Filing Instructions

SARASOTA MILITARY ACADEMY, INC.

Exempt Organization Tax Return

Taxable Year Ended June 30, 2026

Date Due: November 16, 2026

Remittance: None is required. Your Form 990 for the tax year ended 6/30/2026 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. If not already signed electronically, Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed by an authorized officer of the organization and returned to us.

Important: **Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.**

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **8879-TE**

Department of the Treasury
Internal Revenue Service

IRS E-file Signature Authorization for a Tax-Exempt Entity

For calendar year 2025, or fiscal year beginning 07/01 , 2025, and ending 06/30 , 20 26

Do not send to the IRS. Keep for your records.
Go to *www.irs.gov/Form8879TE* for the latest information.

OMB No. 1545-0047

2025

Name of filer

SARASOTA MILITARY ACADEMY, INC.

EIN or SSN

65-1149763

Name and title of officer or person subject to tax **DR. THOMAS J MCELHENY**
CHAIRMAN

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a **Form 990** check here	X	**b**	**Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	**13,827,799**
2a **Form 990-EZ** check here		**b**	**Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a **Form 1120-POL** check here		**b**	**Total tax** (Form 1120-POL, line 22)	**3b**	
4a **Form 990-PF** check here		**b**	**Tax based on investment income** (Form 990-PF, Part V, line 5)	**4b**	
5a **Form 8868** check here		**b**	**Balance due** (Form 8868, line 3c)	**5b**	
6a **Form 990-T** check here		**b**	**Total tax** (Form 990-T, Part III, line 4)	**6b**	
7a **Form 4720** check here		**b**	**Total tax** (Form 4720, Part III, line 1)	**7b**	
8a **Form 5227** check here		**b**	**FMV of assets at end of tax year** (Form 5227, item D)	**8b**	
9a **Form 5330** check here		**b**	**Tax due** (Form 5330, Part II, line 19)	**9b**	
10a **Form 8038-CP** check here		**b**	**Amount of credit payment requested** (Form 8038-CP, Part III, line 22)	**10b**	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that [X] I am an officer of the above entity or [ ] I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2025 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

[X] I authorize **MILLER & MILLER PA, CPA** to enter my PIN **25763** as my signature
ERO firm name
Enter five numbers, but do not enter all zeros

on the tax year 2025 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2025 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date **09/22/26**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. **50432904013**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2025 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **KELLEY D. MILLER** Date **09/22/26**

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Miller & Miller PA, CPA
5660 Marquesas Cir
Sarasota, FL 34233
941-366-4152

October 7, 2026

CONFIDENTIAL

SARASOTA MILITARY ACADEMY, INC.
801 NORTH ORANGE AVENUE
SARASOTA, FL 34236

Dear :

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

If the entity is a Florida corporation with active status, it is required to file an annual report each year with the Florida Department of State, Division of Corporations by May 1 to maintain active status. The annual report may be filed online using the Division's website, www.Sunbiz.org.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Miller & Miller PA, CPA

Filing Instructions

SARASOTA MILITARY ACADEMY, INC.

Exempt Organization Tax Return

Taxable Year Ended June 30, 2026

Date Due: November 16, 2026

Remittance: None is required. Your Form 990 for the tax year ended 6/30/2026 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. If not already signed electronically, Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed by an authorized officer of the organization and returned to us.

Important: **Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.**

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **8879-TE**

Department of the Treasury
Internal Revenue Service

IRS E-file Signature Authorization for a Tax-Exempt Entity

For calendar year 2025, or fiscal year beginning 07/01 , 2025, and ending 06/30 , 20 26

Do not send to the IRS. Keep for your records.
Go to *www.irs.gov/Form8879TE* for the latest information.

OMB No. 1545-0047

2025

Name of filer

SARASOTA MILITARY ACADEMY, INC.

EIN or SSN

65-1149763

Name and title of officer or person subject to tax **DR. THOMAS J MCELHENY**
CHAIRMAN

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a **Form 990** check here	X	**b**	**Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	**13,827,799**
2a **Form 990-EZ** check here		**b**	**Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a **Form 1120-POL** check here		**b**	**Total tax** (Form 1120-POL, line 22)	**3b**	
4a **Form 990-PF** check here		**b**	**Tax based on investment income** (Form 990-PF, Part V, line 5)	**4b**	
5a **Form 8868** check here		**b**	**Balance due** (Form 8868, line 3c)	**5b**	
6a **Form 990-T** check here		**b**	**Total tax** (Form 990-T, Part III, line 4)	**6b**	
7a **Form 4720** check here		**b**	**Total tax** (Form 4720, Part III, line 1)	**7b**	
8a **Form 5227** check here		**b**	**FMV of assets at end of tax year** (Form 5227, item D)	**8b**	
9a **Form 5330** check here		**b**	**Tax due** (Form 5330, Part II, line 19)	**9b**	
10a **Form 8038-CP** check here		**b**	**Amount of credit payment requested** (Form 8038-CP, Part III, line 22)	**10b**	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that [X] I am an officer of the above entity or [ ] I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2025 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

[X] I authorize **MILLER & MILLER PA, CPA** to enter my PIN **25763** as my signature
ERO firm name
Enter five numbers, but do not enter all zeros

on the tax year 2025 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2025 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date **09/22/26**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. **50432904013**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2025 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **KELLEY D. MILLER** Date **09/22/26**

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2025
Open to Public Inspection

A For the 2025 calendar year, or tax year beginning 07/01/25 , and ending 06/30/26

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: SARASOTA MILITARY ACADEMY, INC.

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): 801 NORTH ORANGE AVENUE

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: SARASOTA FL 34236

D Employer identification number: 65-1149763

E Telephone number: 941-926-1700

G Gross receipts$ 13,827,799

F Name and address of principal officer:
DR. THOMAS J MCELHENY
801 NORTH ORANGE AVENUE
SARASOTA FL 34236

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.SARASOTAMILITARYACADEMY.ORG

H(c) Group exemption number:

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 2002

M State of legal domicile: FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
SEE SCHEDULE O

2 Check this box ☐ 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	11
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5 Total number of individuals employed in calendar year 2025 (Part V, line 2a)	5	152
6 Total number of volunteers (estimate if necessary)	6	45
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	224,195	218,831
9 Program service revenue (Part VIII, line 2g)	13,127,017	13,543,563
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	36,336	21,933
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	61,999	43,472
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,449,547	13,827,799
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,637,612	7,995,376
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) 0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,423,282	4,623,592
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	13,060,894	12,618,968
19 Revenue less expenses. Subtract line 18 from line 12	388,653	1,208,831

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	20,846,969	21,231,916
21 Total liabilities (Part X, line 26)	9,895,954	9,058,081
22 Net assets or fund balances. Subtract line 21 from line 20	10,951,015	12,173,835

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 — Date

DR. THOMAS J MCELHENY CHAIRMAN
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check	PTIN
KELLEY D. MILLER	KELLEY D. MILLER	10/07/26	☐ if self-employed	P01408511

Firm's name: MILLER & MILLER PA, CPA — Firm's EIN: 83-1270393

Firm's address: 5660 MARQUESAS CIR SARASOTA, FL 34233 — Phone no. 941-366-4152

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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 $ **7,940,555** including grants of $) (Revenue $ **13,543,563**)

SEE SCHEDULE O

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

N/A

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

N/A

4d Other program services (Describe on Schedule O.)

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

4e Total program service expenses **7,940,555**

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*	**1**	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	**2**	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*	**3**		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	**4**		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	**5**		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*	**6**		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	**7**		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	**8**		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	**9**		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	**10**		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	**11a**	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	**11b**		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*	**11c**		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	**11d**		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	**11e**	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	**11f**	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	**12a**	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	**12b**		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	**13**	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	**14a**		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*	**14b**		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	**15**		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	**16**		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	**17**		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*	**18**		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*	**19**		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	**20b**		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	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 25a*	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		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*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		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*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	5		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

			Yes	No
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 **2a** **152**			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	**2b**	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	**3b**		
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)?	**4a**		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
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?	**6a**		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**			
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?	**7a**		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		X
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		X
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b**			
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.	**13a**		
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 **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	**15**		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**		X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	**17**		

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 on Schedule O. See instructions.*

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11		
	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 on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **FL**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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 on Schedule O)*

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

SAVANNAH KALKA 801 NORTH ORANGE AVENUE
SARASOTA FL 34236 941-926-1700

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) **CHRISTINA BOWMAN**	50.00									
HEAD OF SCHOOL	0.00			X				172,152	0	24,086
(2) **DAVID BLACK**	2.00									
DIRECTOR	0.00	X						0	0	0
(3) **ERICA GREGORY**	2.00									
VICE CHAIR	0.00	X		X				0	0	0
(4) **BENJAMIN M. KNISELY**	4.00									
SECRETARY	0.00	X		X				0	0	0
(5) **DR. THOMAS J MCELHENY**	4.00									
CHAIRMAN	0.00	X		X				0	0	0
(6) **JERRY NEFF**	2.00									
DIRECTOR	0.00	X						0	0	0
(7) **CHARLES SHUGG**	2.00									
DIRECTOR	0.00	X						0	0	0
(8) **RON SKIPPER**	2.00									
DIRECTOR	0.00	X						0	0	0
(9) **PETER SKOKOS**	2.00									
TREASURER	0.00	X		X				0	0	0
(10) **RICHARD SWOOPE**	2.00									
DIRECTOR	0.00	X						0	0	0
(11) **MICHAEL TOLLERTON**	2.00									
DIRECTOR	0.00	X						0	0	0

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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) WILLIAM SCOTT WALLACE										
(12)	**2.00**									
DIRECTOR	**0.00**	**X**						**0**	**0**	**0**
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								**172,152**		**24,086**
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								**172,152**		**24,086**

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

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		**X**
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	**X**	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		**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
ENTECH 5276 SUMMERLIN COMMONS WAY #701 FORT MYERS FL 33907	**IT SERVICES**	**349,798**
CITY WIDE FACILITY SOLUTIONS 8950 9TH ST. N SUITE 103 ST. PETERSBURG FL 33702	**FACILITIES**	**282,673**
SARASOTA COUNTY SHERIFF'S OFFICE 6010 CATTLERIDGE RD. SARASOTA FL 34232	**SECURITY**	**226,920**
FLORIDA POWER AND LIGHT GENERAL MAIL FACILITY MIAMI FL 33188	**UTILITIES**	**182,081**

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 **4**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
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	218,831				
	g Noncash contributions included in lines 1a-1f	1g	$				
	h **Total.** Add lines 1a–1f			218,831			
Program Service Revenue		Business Code					
	2a SCHOOL REVENUE	611600		13,543,563	13,543,563		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a–2f			13,543,563			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			21,933			21,933
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real	(ii) Personal			
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	7a					
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
	11a ADVANCE PLACEMENT	611600		33,373	33,373		
	b CREDIT CARD REBATE	611600		10,099			10,099
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d			43,472			
	12 **Total revenue.** See instructions			13,827,799	13,576,936	0	32,032

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 or note to any line 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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	196,238		196,238	
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	5,783,931	4,721,137	1,062,794	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	776,327	609,320	167,007	
9 Other employee benefits	789,840	596,213	193,627	
10 Payroll taxes	449,040	352,818	96,222	
11 Fees for services (nonemployees):				
a Management				
b Legal	675	675		
c Accounting	54,212		54,212	
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.)	1,056,095	130,541	925,554	
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	347,175	89,733	257,442	
17 Travel	986	986		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	333,669	313,045	20,624	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	922,049	445,774	476,275	
23 Insurance	409,108		409,108	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a TEXTBOOKS, SUPPLIES, MAT	383,068	225,604	157,464	
b CAPITAL OUTLAY	363,697	88,431	275,266	
c SPORTS AND RECREATION	254,028	252,824	1,204	
d REPAIRS AND MAINTENANCE	172,142	74,863	97,279	
e All other expenses	326,688	38,591	288,097	
25 Total functional expenses. Add lines 1 through 24e	12,618,968	7,940,555	4,678,413	0
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 ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1,844,612	1	2,427,748
	2	Savings and temporary cash investments		266,802	2	322,522
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		14,759	4	84,551
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		448,212	9	1,316
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,572,105			
	b	Less: accumulated depreciation	10b 10,529,138	18,145,119	10c	18,042,967
	11	Investments—publicly traded securities			11	
	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		127,465	15	352,812
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		20,846,969	16	21,231,916
Liabilities	17	Accounts payable and accrued expenses		900,541	17	492,790
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		8,796,652	20	8,165,732
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	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		198,761	25	399,559
	26	**Total liabilities.** Add lines 17 through 25		9,895,954	26	9,058,081
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		10,879,821	27	11,995,569
	28	Net assets with donor restrictions		71,194	28	178,266
		Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		10,951,015	32	12,173,835
	33	Total liabilities and net assets/fund balances		20,846,969	33	21,231,916

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,827,799
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,618,968
3	Revenue less expenses. Subtract line 2 from line 1	3	1,208,831
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,951,015
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 on Schedule O)	9	13,989
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	12,173,835

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on 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. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		X
b	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. ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	X	
c	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 on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990)

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.

Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public Inspection

Name of the organization

SARASOTA MILITARY ACADEMY, INC.

Employer identification number

65-1149763

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 12, 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 (Form 990).)

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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☐ 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.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization must generally satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) **12**

13 **First 5 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 2025 (line 6, column (f), divided by line 11, column (f)) **14** %

15 Public support percentage from 2024 Schedule A, Part II, line 14 **15** %

16a **33 1/3% support test — 2025.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support test — 2024.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10%-facts-and-circumstances test — 2025.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10%-facts-and-circumstances test — 2024.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

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 ☐

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

(Complete only if you checked the box on line 10 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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(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 on 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 VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First 5 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

15	Public support percentage for 2025 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2024 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2025** (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from **2024** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests — 2025.** 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 — 2024.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	**1**		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	**2**		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	**3a**		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*	**3b**		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in Part VI what controls the organization put in place to ensure such use.*	**3c**		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	**4a**		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	**4b**		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	**4c**		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	**7**		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	**8**		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*	**9a**		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*	**9b**		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*	**9c**		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	**10a**		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	**10b**		

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).*

- **a** ☐ The organization satisfied the Activities Test. *Complete line 2 below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- **c** ☐ The organization supported a governmental supported organization. *Describe in Part VI how you supported a governmental supported organization (see instructions).*

			Yes	No
2	Activities Test. *Answer lines 2a and 2b below.*			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? If "Yes," then in *Part VI identify those supported organizations and explain* how these *activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. *Answer lines 3a, 3b, and 3c below.*			
a	Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? *If "Yes," provide details in Part VI.*	**3a**		
b	Did the organization direct the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	**3b**		
c	Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI .*	**3c**		

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

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	**1**		
2 Recoveries of prior-year distributions	**2**		
3 Other gross income (see instructions)	**3**		
4 Add lines 1 through 3.	**4**		
5 Depreciation and depletion	**5**		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7 Other expenses (see instructions)	**7**		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors *(explain in detail in Part VI)*:			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d.	**3**		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by 0.035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D – Distributions			**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4	Amounts paid to acquire exempt-use assets	**4**	
5	Qualified set-aside amounts (prior IRS approval required—*provide details in Part VI*)	**5**	
6	**Total annual distributions.** Add lines 1 through 5.	**6**	
7	Distributions to attentive supported organizations to which the organization is responsive (*provide details in Part VI*). See instructions.	**7**	
8	Distributable amount for 2025 from Section C, line 6	**8**	
9	Line 7 amount divided by line 8 amount	**9**	

Section E – Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2025**	**(iii) Distributable Amount for 2025**
1	Distributable amount for 2025 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2025 (reasonable cause required–*explain in Part VI*). See instructions.			
3	Excess distributions carryover, if any, to 2025			
a	From 2020			
b	From 2021			
c	From 2022			
d	From 2023			
e	From 2024			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2025 distributable amount			
i	Carryover from 2020 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2025 from Section D, line 6: $			
a	Applied to underdistributions of prior years			
b	Applied to 2025 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2025, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in Part VI.* See instructions.			
6	Remaining underdistributions for 2025. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in Part VI.* See instructions.			
7	**Excess distributions carryover to 2026.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2021			
b	Excess from 2022			
c	Excess from 2023			
d	Excess from 2024			
e	Excess from 2025			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b, and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5 and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B (Form 990) (Rev. December 2024))
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

Name of the organization

SARASOTA MILITARY ACADEMY, INC.

Employer identification number

65-1149763

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(**3**) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[ ] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33$^{1}/_{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . $ . . . . . .

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization
SARASOTA MILITARY ACADEMY, INC.

Employer identification number
65-1149763

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACKSON FOUNDATION P.O. BOX 95672 CHICAGO IL 60694	$ 120,000	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	RON SKIPPER P.O. BOX 5396 SARASOTA FL 34277	$ 13,000	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	JOHN AND LINDA LOEWENBERG 5724 DUNROBIN DR SARASOTA FL 34238	$ 10,000	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST 1266 FIRST ST. SUITE 1 SARASOTA FL 34236	$ 23,510	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	ROTARY CLUB OF SARASOTA SOUTHSIDE FOUNDATION P.O. BOX 5718 SARASOTA FL 34277	$ 5,000	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	COMMUNITY FOUNDATION OF SARSOTA COUNTY 2635 FRUITVILLE RD SARASOTA FL 34237	$ 16,141	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SARASOTA MILITARY ACADEMY, INC.

Employer identification number

65-1149763

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor 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? ☐ Yes ☐ No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

☐ Preservation of land for public use (for example, recreation or education)
☐ Preservation of a historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

		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 on line 2a	2c	
d Number of conservation easements included on line 2c acquired after July 25, 2006, 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, handling of violations, and enforcing conversation easements during the year

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

8 Does each conservation easement reported on line 2d 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" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB 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 FASB 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) Revenue included on Form 990, Part VIII, line 1 $

(ii) Assets included in Form 990, Part X $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

a Revenue included on 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 make 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 program
- **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" on 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.

		Amount
c Beginning balance	**1c**	
d Additions during the year	**1d**	
e Distributions during the year	**1e**	
f Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ **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" on Form 990, Part IV, line 10.

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

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** Term endowment ____ %

The percentages on 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:

		Yes	No
(i) Unrelated organizations?	**3a(i)**		
(ii) Related organizations?	**3a(ii)**		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

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

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. 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		8,398,300		8,398,300
b Buildings		14,808,497	6,120,665	8,687,832
c Leasehold improvements				
d Equipment		5,365,308	4,408,473	956,835
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				18,042,967

Part VII Investments – Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. 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)		
Total. *(Column (b) must equal Form 990, Part X, line 12, col. (B))*		

Part VIII Investments – Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITIES	369,322
(3) FUNDS HELD FOR BENEFIT OF OTHERS	29,806
(4) COMPENSATED ABSENCES	5,638
(5) INTEREST RATE SWAP CONTRACT	-5,207
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	399,559

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

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	13,841,788
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) 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	13,989		
e	Add lines 2a through 2d			2e	13,989
3	Subtract line 2e from line 1			3	13,827,799
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	13,827,799

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	11,846,943
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	-772,025		
e	Add lines 2a through 2d			2e	-772,025
3	Subtract line 2e from line 1			3	12,618,968
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	12,618,968

Part XIII Supplemental Information

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 X - LINE 2 - FIN 48 FOOTNOTE

THE SCHOOL QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER INTERNAL REVENUE CODE 501 (C)(3). THE SCHOOL'S STATUS AS A TAX EXEMPT NOT-FOR-PROFIT ENTITY IS CONSIDERED A TAX POSITION SUBJECT TO REPORTING REQUIREMENTS UNDER FASB ACCOUTNING STANDARDS CODIFICATION 740-10. ENTITIES ARE RQUIRED TO EXAMINE ALL TAX POSITIONS AND DETERMINE IF IT IS MORE LIKELY THAN NOT THAT THE POSITIONS WOULD BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. THE SCHOOL HAS NOT RECORDED ANY ACCRUALS FOR UNCERTIAN INCOME TAX POSITIONS AT JUNE 30, 2026.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER
CHANGE IN INTEREST RATE SWAP AGREEMENT $ 13,989

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER
PENSION EXPENSES PER GASB 68 $ -772,025

Part XIII Supplemental Information *(continued)*

SCHEDULE E
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
Attach to Form 990 or Form 990-EZ.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
SARASOTA MILITARY ACADEMY, INC.

Employer identification number
65-1149763

Part I

			YES	NO
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?	1	X	
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?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	X	
	PUBLISHED IN ALL MATERIALS AND MEDIA AVAILABLE TO THE STAFF, FACULTY, CADETS, AND GENERAL PUBLIC.			
4	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" on either line 6a or line 6b, explain in 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, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain in Part II	7	X	

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

SCH E - FINANCIAL AID OR GOVERNMENT ASSISTANCE EXPLANATION

FEFP FUNDS RECEIVED MONTHLY.

SCHEDULE J
(Form 990)
(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SARASOTA MILITARY ACADEMY, INC.

Employer identification number

65-1149763

Part I Questions Regarding Compensation

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

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

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

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

	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	CHRISTINA BOWMAN HEAD OF SCHOOL	(i)	169,152	0	3,000	23,394	692	196,238	0
		(ii)	0	0	0	0	0	0	0
2		(i)							
		(ii)							
3		(i)							
		(ii)							
4		(i)							
		(ii)							
5		(i)							
		(ii)							
6		(i)							
		(ii)							
7		(i)							
		(ii)							
8		(i)							
		(ii)							
9		(i)							
		(ii)							
10		(i)							
		(ii)							
11		(i)							
		(ii)							
12		(i)							
		(ii)							
13		(i)							
		(ii)							
14		(i)							
		(ii)							
15		(i)							
		(ii)							
16		(i)							
		(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE K (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
SARASOTA MILITARY ACADEMY, INC.

Employer identification number
65-1149763

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	SARASOTA COUNTY, FL	59-6000848		07/18/12	5,565,000	SEE PART VI		X		X		X
B	SARASOTA COUNTY, FL	59-6000848		03/25/16	8,554,540	PURCHASE LAND		X		X		X
C												
D												

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	2,216,000	3,737,808		
2	Amount of bonds legally defeased				
3	Total proceeds of issue	5,565,000	8,554,540		
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds	751			
6	Proceeds in refunding escrows				
7	Issuance costs from proceeds	110,000	174,027		
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds		8,374,549		
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion	2012			

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X			X				
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	%		%		%		%	
6 Total of lines 4 and 5	%		%		%		%	
7 Does the bond issue meet the private security or payment test?		X		X				
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X		X				

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	X		X					
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?								
b Exception to rebate?								
c No rebate due?								
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X					

Part IV Arbitrage *(continued)*

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X				
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?		X		X				

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions.

SCHEDULE K - PURPOSE OF ISSUE DESCRIPTION
SARASOTA COUNTY, FL
REFINANCE CAPITAL BONDS

Part VI **Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions. *(continued)*

SCHEDULE O (Form 990) (Rev. December 2024)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to *www.irs.gov/Form990* for instructions and the latest information.	Open to Public Inspection

Name of the organization	Employer identification number
SARASOTA MILITARY ACADEMY, INC.	65-1149763

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
SARASOTA MILITARY ACADEMY IS A HIGH SCHOOL FOR GRADES 9-12 AND A MIDDLE SCHOOL FOR GRADES 6-8. IT IS A NOT-FOR-PROFIT ORGANIZATION THAT PROVIDES CLASSES MEETING THE FLORIDA STATE INSTRUCTIONAL CURRICULUM REQUIREMENTS FOR A HIGH SCHOOL. ALL HIGH SCHOOL STUDENTS ARE REQUIRED TO ENROLL IN JROTC CLASSES AND WEAR THE U.S. ARMY UNIFORM. IN ADDITION TO OFFERING ALL STATE-MANDATED COURSES, CLASSES IN FENCING, HAM RADIO, SHOW CHORUS, BAND AND CHOIR ARE ALSO AVAILABLE. THE MEDAL OF HONOR PROGRAM WAS RECENTLY ADDED TO OUR CURRICULUM AT BOTH SCHOOLS. EXCEPTIONAL EDUCATIONAL CLASSES ARE OFFERED AS APPROPRIATE. PARTICIPATION IN EXTRACURRICULAR ACTIVITIES IS EXPECTED AND INCLUDES TEAMS IN DRILL AND RAIDERS. WE ARE ALSO A MEMBER OF THE FLORIDA HIGH SCHOOL ATHLETICS ASSOCIATION AND HAVE ACTIVITIES IN GOLF, BASEBALL, SOCCER, BASKETBALL, VOLLEYBALL, CROSS COUNTRY, TRACK AND WRESTLING. WE ARE AN ARMY CADET COMMAND 'HONOR UNIT WITH DISTINCTION', AND FULLY ACCREDITED WITH THE SOUTHERN ASSOCIATION OF COLLEGES AND SCHOOLS/ADVANCED.

ALL MIDDLE SCHOOL STUDENTS ARE REQUIRED TO PARTICIPATE IN MILITARY STUDIES AND CHARACTER DEVELOPMENT IN THE ENTIRE PROGRAM WITH A LEARNER-CENTERED APPROACH. ALL STUDENTS ARE EXPECTED TO PARTICIPATE IN AN EXTRACURRICULAR ACTIVITY OR CLUB.

FORM 990 - ORGANIZATION'S MISSION
WITHIN A CULTURE WHERE EVERY CADET IS HIGHLY VALUED, SARASOTA MILITARY ACADEMY IS COMMITTED TO: (1) PREPARING STUDENTS FOR COLLEGE, CAREERS, AND CITIZENSHIP; (2) DEVELOPING TOMORROW'S LEADERS; AND (3) CULTIVATING CHARACTER BASED UPON THE STEADFAST VALUES OF HONOR, INTEGRITY, AND RESPECT.

FORM 990, PART I, LINE 6
ASSIST IN SERVING LUNCH, CHAPERONE EVENTS, ADMINISTRATION, MENTOR CHILDREN, ORGANIZE SOCIAL EVENTS, TRANSPORTATION, NURSES OFFICE, AND ATHLETIC COACHES.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT
THE SARASOTA MILITARY ACADEMY (SMA) OFFERS A VAST ARRAY OF EXCITING, HIGH INTEREST, AND IN-DEPTH COURSE OFFERINGS (MAJORS). ALL COURSES ARE DESIGNED TO MEET AND EXCEED DISTRICT AND SUNSHINE STATE STANDARDS AND TO LAUNCH STUDENTS ON A PATH TO FUTURE SUCCESS. OUR GRADUATES ARE WELL PREPARED FOR COLLEGE, MILITARY SERVICE, OR THEIR CHOSEN CAREER FIELD. WE ARE PROUD TO OUTLINE THE "MAJOR OPPORTUNITIES" OFFERED TO SMA CADETS.

SMALL CLASS SIZES, INDIVIDUALIZED INSTRUCTION, STRUCTURE, DISCIPLINE, STRINGENTLY ENFORCED DRESS CODES, AND RESPECT IN THE CLASSROOM HELP TO ENSURE A UNIQUE, HIGH QUALITY INSTRUCTIONAL PROGRAM. WE HAVE NO ENTRANCE REQUIREMENTS, BUT WE DO HAVE HIGH EXPECTATIONS FOR OUR CADETS BOTH ACADEMICALLY AND BEHAVIORALLY. ADDITIONAL INFORMATION MAY BE FOUND ON OUR WEBSITE AT: SARASOTAMILITARYACADEMY.ORG.

RECIPIENT OF THE UNITED STATES ARMY'S HIGHEST AWARD "HONOR UNIT WITH DISTINCTION". FULLY ACCREDITED BY THE SOUTHERN ASSOCIATION OF COLLEGES AND

SCHEDULE O (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SARASOTA MILITARY ACADEMY, INC.

Employer identification number

65-1149763

SCHOOLS/ADVANCED. DRUG TESTING AND CRIMINAL HISTORY BACKGROUND CHECKS OF EVERY EMPLOYEE. A RECOGNIZED COMMUNITY LEADER FOR INVOLVEMENT IN VETERANS' AND MEMORIAL DAY PARADES, CIVIC EVENTS, BLOOD BANK CONTRIBUTIONS, LETTERS TO TROOPS, WREATHS ACROSS AMERICA AND TOYS FOR TOTS. FAMILY ORIENTED WITH CONCERN FOR THE SUCCESS OF EACH CADET.

JROTC ADVANCED SKILLS DEVELOPMENT AND LEADERSHIP - FOR STUDENTS WHO ARE SERIOUS ABOUT JOINING THE MILITARY AND/OR GOING TO ONE OF THE SERVICE ACADEMIES, STAFF TRAINING IS AVAILABLE. SINCE SMA IS A COLLEGE AND CAREER PREPARATORY SCHOOL, MOST OF OUR STUDENTS (85%) GO ON TO COLLEGE RATHER THAN THE MILITARY WITH A 95% GRADUATION RATE. PLEASE BE AWARE THAT ALTHOUGH WE ARE A MILITARY ACADEMY, AND EVERYONE TAKES JROTC, THE FOCUS IN THE PROGRAM IS ON DEVELOPING LEADERSHIP QUALITIES VIA THE JROTC PROGRAM WITH THE END GOAL BEING TO HELP OUR STUDENTS BECOME BETTER CITIZENS, LEADERS, AND TEAM PLAYERS IN THEIR CHOSEN PATH IN LIFE.

SMA PREP PARTICIPATED IN THE VETERAN'S AND MEMORIAL DAY PARADES, WREATHS ACROSS AMERICA AND TOYS FOR TOTS. SMA PREP JOINED THE FLORIDA SUN COAST LEAGUE (FSCL) AND IS COMPETING WITH OTHER MEMBERS IN MANY SPORTS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE 990 IS REVIEWED AND APPROVED AT A BOARD MEETING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
ON AN ANNUAL BASIS OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST. THESE CONFLICTS ARE MONITORED AND REVIEWED BY THE CEO.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD HAS HISTORICALLY DETERMINED FAIR MARKET PAY FOR TOP MANAGEMENT AND WILL CONTINUE TO DO SO IF SIGNIFICANT CHANGES ARE NECESSARY.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
THE BOARD HAS HISTORICALLY DETERMINED FAIR MARKET PAY FOR KEY EMPLOYEES AND WILL CONTINUE TO DO SO IF SIGNIFICANT CHANGES ARE NECESSARY.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
MEETINGS OF THE BOARD ARE POSTED ON THE SCHOOL'S WEBSITE, MARQUEE, MAIN OFFICES AND MESSAGED TO ALL FAMILIES. DURING THE MEETING, COPIES OF THE PREVIOUS MEETING MINUTES AND FINANCIAL STATEMENTS ARE AVAILABLE FOR VISITORS TO VIEW. THEY ARE ALSO AVAILABLE ON REQUEST OR ONLINE ON THE SCHOOL'S WEBSITE.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION
SWAP RATE CHANGE $ 13,989

FORM 990, PART XII, LINE 2C - CHANGE IN FINANCIAL REVIEW PROCESS
THERE WERE NO CHANGES TO THE ENTITY'S AUDIT OVERSIGHT PROCESS DURING THE TAX YEAR.

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to *www.irs.gov/Form4562* for instructions and the latest information.

OMB No. 1545-0172

2025

Attachment Sequence No. **179**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
SARASOTA MILITARY ACADEMY, INC.	**INDIRECT DEPRECIATION**	**65-1149763**

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	**2,500,000**
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	**4,000,000**
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 2024 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 don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2026. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't 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	**246,347**

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2025	17	**0**
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 2025 Tax Year Using the General Depreciation System

	(a) Classification of property (see instructions)	(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	50-year property			50 yrs.	MM	S/L	
i	Residential rental property			27.5 yrs.	MM	S/L	
				27.5 yrs.	MM	S/L	
j	Nonresidential real property			39 yrs.	MM	S/L	
					MM	S/L	

Section C— Assets Placed in Service During 2025 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	30-year			30 yrs.	MM	S/L	
d	40-year			40 yrs.	MM	S/L	
e	50-year			50 yrs.	MM	S/L	

THERE ARE NO AMOUNTS FOR PAGE 3

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**	**246,347**
23a	For assets shown in Part III that are placed in service during the current tax year, and have costs capitalized under section 263A, enter the amount of the basis attributable to interest costs capitalized under section 263A(f)	**23a**	
b	For assets shown in Part III that are placed in service during the current tax year, and have costs capitalized under section 263A, enter the amount of the basis attributable to costs capitalized under section 263A other than interest costs capitalized under section 263A(f)	**23b**	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, 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**

b If "Yes," is the evidence written? ☐ **Yes** ☐ **No**

c Do you own, lease, or charter an aircraft? Check all that apply. See instructions ☐ **Own** ☐ **Lease** ☐ **Charter**

(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:								
		%						
		%						
27 Property used 50% or less in a qualified business use :								
		%				S/L-		
		%				S/L-		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21						**28**		
29 Add amounts in column (i), line 26. Enter here and on line 7							**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.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**don't** include commuting miles)												
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												
	Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Other Depreciation:												
1	WINDOWS	8/10/2014	31,652				31,652	39	MO	S/L	8,860	811
2	ADMIN GYM CLASSROOMS	8/10/2014	140,945				140,945	39	MO	S/L	39,453	3,614
3	COMPUTER LAB CABLE INSTALLS	8/10/2014	4,908				4,908	10	MO	S/L	4,908	0
4	IPITOMY PHONE SYSTEM	8/10/2014	23,963				23,963	5	MO	S/L	23,963	0
5	WINDOWS 7 BACKUP SOFTWARE	8/10/2014	62,520				62,520	3	MO	S/L	62,520	0
6	IT SYSTEM COMPUTERS INSTALLATI	8/10/2014	251,104				251,104	5	MO	S/L	251,104	0
7	GYM HARDWOOD FLOORING	8/10/2014	43,264				43,264	5	MO	S/L	43,264	0
8	HOOPS AND VOLLEY BALL EQUIPME	8/10/2014	19,527				19,527	10	MO	S/L	19,527	0
9	BLEACHERS FOR THE GYM	8/10/2014	43,300				43,300	10	MO	S/L	43,300	0
10	SCOREBOARDS	8/10/2014	6,543				6,543	10	MO	S/L	6,543	0
11	GYM WALL PADDING	8/10/2014	6,011				6,011	5	MO	S/L	6,011	0
12	30 TVS AND MOUNTS	8/10/2014	29,828				29,828	5	MO	S/L	29,828	0
13	SINGLE FOOD WARMER	8/10/2014	1,720				1,720	5	MO	S/L	1,720	0
14	KITCHEN EQUIPMENT	8/10/2014	11,412				11,412	5	MO	S/L	11,412	0
15	40 DELL COMPUTERS	8/10/2014	43,288				43,288	5	MO	S/L	43,288	0
16	LICENSE SCAN SYSTEM	8/10/2014	1,600				1,600	5	MO	S/L	1,600	0
17	2 LUNCH TABLES $1059 ACH	8/10/2014	2,753				2,753	7	MO	S/L	2,753	0
18	3 HP 24 PORT MODULES	8/10/2014	5,715				5,715	5	MO	S/L	5,715	0
19	PREP BUILDING	8/10/2014	220,614				220,614	39	MO	S/L	61,753	5,657
20	CONFERENCE TABLE	9/05/2014	2,500				2,500	10	MO	S/L	2,500	0
21	2 LUNCH TABLES $1174.07 EACH	8/10/2014	2,425				2,425	7	MO	S/L	2,425	0
22	LOW VOLTAGE WIRING	9/17/2014	684				684	5	MO	S/L	684	0
23	SWITCH	11/07/2014	2,361				2,361	5	MO	S/L	2,361	0
24	SHELF	11/07/2014	940				940	5	MO	S/L	940	0
25	HP INTELLIGENT MANAGEMENT CEN	9/03/2014	4,880				4,880	3	MO	S/L	4,880	0
26	TUBA	1/20/2015	2,336				2,336	5	MO	S/L	2,336	0
27	DELL POWEREDGE SWITCH	1/05/2015	2,380				2,380	5	MO	S/L	2,380	0
28	PAVERS - PAT O'HARA PAVERS INC.	3/20/2015	26,349				26,349	10	MO	S/L	26,349	0
29	LOCKER ROOM BENCHES	4/15/2015	4,862				4,862	5	MO	S/L	4,862	0
30	2 SERVERS AT $11124.54 EACH INVOI	6/30/2015	22,249				22,249	5	MO	S/L	22,249	0
31	CABLING IN INFO CENTER COMPUTE	7/27/2015	3,189				3,189	5	MO	S/L	3,189	0
32	COMPLETION OF COMPUTER LAB	7/27/2015	4,791				4,791	5	MO	S/L	4,791	0
33	PREP COMPUTER LAB TABLES	7/30/2015	13,972				13,972	5	MO	S/L	13,972	0
34	AED LIFEPAK	8/23/2015	1,714				1,714	5	MO	S/L	1,714	0
35	15 CCTV CAMERAS	10/30/2015	20,474				20,474	5	MO	S/L	20,474	0
36	PREP CLINIC PANTRY CABINETS	11/30/2015	1,498				1,498	5	MO	S/L	1,498	0
37	PREP LOUNGE TABLE - MILLER'S BUT	1/19/2016	2,000				2,000	5	MO	S/L	2,000	0
38	PREP SPEAKER SYSTEM - ENCORE BI	3/21/2016	18,480				18,480	10	MO	S/L	17,094	1,386
39	PREP LAND	3/25/2016	7,424,550				7,424,550	0	--	Land	0	0
40	NEW CLASSROOM BUILDING	8/11/2016	39,721				39,721	39	MO	S/L	9,081	1,019
41	25 DELL LAPTOPS	4/04/2016	31,788				31,788	5	MO	S/L	31,788	0
42	LAPTOP CART	4/04/2016	2,125				2,125	5	MO	S/L	2,125	0
43	NEW CLASSROOM BUILDING	8/11/2016	1,329,899				1,329,899	39	MO	S/L	304,058	34,100
44	6 LUNCH TABLES	6/20/2016	7,873				7,873	5	MO	S/L	7,873	0
45	STUDENT DESKS AND CHAIRS	6/24/2016	30,286				30,286	5	MO	S/L	30,286	0
46	PBX SYSTEM (TELEPHONE)	5/03/2017	1,899				1,899	7	MO	S/L	1,899	0
47	MONUMENT SIGN	5/19/2017	1,685				1,685	10	MO	S/L	1,362	169
48	PAVERS	8/10/2017	16,401				16,401	10	MO	S/L	12,984	1,640
49	SOFA LOVESEAT	7/21/2016	1,388				1,388	5	MO	S/L	1,388	0
50	SOFA	7/21/2016	1,688				1,688	5	MO	S/L	1,688	0
51	PHONE SYSTEM	7/18/2016	4,680				4,680	10	MO	S/L	4,173	468
52	DH70 DEHUMIDIFIER	6/19/2017	2,550				2,550	5	MO	S/L	2,550	0
53	BUS	7/01/2017	107,153				107,153	10	MO	S/L	85,722	10,716
54	NEW BUS #1602	10/12/2016	109,262				109,262	5	MO	S/L	109,262	0
55	IT INFRASTRUCTURE FOR NEW BUIL	8/11/2016	169,278				169,278	39	MO	S/L	38,703	4,340
56	IDS SYSTEM	10/25/2017	16,271				16,271	15	MO	S/L	8,316	1,085
57	CABINETS AND COUNTER TOPS FOR	11/14/2016	3,783				3,783	5	MO	S/L	3,783	0
58	MONUMENT SIGN	3/07/2017	4,505				4,505	10	MO	S/L	3,754	451
59	WATCHGUARD	8/31/2017	4,640				4,640	5	MO	S/L	4,640	0
60	LAMINATOR	8/24/2017	2,700				2,700	7	MO	S/L	2,700	0
61	PC FOR PREP WORLD NEWS PROJECT	9/01/2017	1,400				1,400	5	MO	S/L	1,400	0
62	20 DELL LAPTOPS	10/19/2017	28,959				28,959	5	MO	S/L	28,959	0
63	2016 DODGE CARAVAN	2/27/2018	16,420				16,420	5	MO	S/L	16,420	0
64	CARPET REMOVAL - IT ROOM	8/11/2016	9,185				9,185	5	MO	S/L	9,185	0
65	ICE MACHINE	11/09/2017	1,778				1,778	5	MO	S/L	1,778	0
66	FOOD WARMER	11/29/2017	1,930				1,930	5	MO	S/L	1,930	0
67	SCIENCE ROOM SINK	8/25/2016	2,297				2,297	10	MO	S/L	2,029	230
68	3 IPAD PROS	2/19/2018	2,337				2,337	5	MO	S/L	2,337	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
69	SHELVING	7/27/2016	4,943				4,943	5	MO	S/L	4,943	0
70	15 SMART TVS	8/26/2016	14,685				14,685	5	MO	S/L	14,685	0
71	AC COMPRESSOR	4/13/2018	2,507				2,507	5	MO	S/L	2,507	0
72	2 CAMERAS - GYM	7/24/2017	4,042				4,042	5	MO	S/L	4,042	0
73	RAPID RUN CABLE IN MEDIA CENTEI	11/05/2018	950				950	10	MO	S/L	633	95
74	CARRIER 5 TON STRAIGHT COOL COI	8/13/2018	3,100				3,100	7	MO	S/L	3,063	37
75	IPAD PRO BUNDLE	8/03/2018	994				994	5	MO	S/L	994	0
76	GYM HALLWAY CAMERA AND INSTA	9/27/2018	1,233				1,233	5	MO	S/L	1,233	0
77	CISCO WI-FI HARDWARE SUPPORT	8/21/2018	25,986				25,986	3	MO	S/L	25,986	0
78	SERVER HARD DRIVES & ADAPTER	12/20/2018	6,684				6,684	5	MO	S/L	6,684	0
79	3 PCS	12/20/2018	4,936				4,936	5	MO	S/L	4,936	0
80	30 PCS	12/20/2018	25,217				25,217	5	MO	S/L	25,217	0
81	2 CAMERAS IN CAFETERIA	1/03/2019	3,333				3,333	5	MO	S/L	3,333	0
82	2 CAMERAS IN COURTYARD	1/03/2019	2,614				2,614	5	MO	S/L	2,614	0
83	CAMERA AT PARENT PICK-UP	1/03/2019	1,609				1,609	5	MO	S/L	1,609	0
84	CAMERA IN ADMIN HALLWAY	1/03/2019	1,406				1,406	5	MO	S/L	1,406	0
85	VIRTUALIZATION PROJECT	5/13/2019	99,179				99,179	7	MO	S/L	87,372	11,807
86	A/C COMPRESSOR	5/01/2019	1,968				1,968	7	MO	S/L	1,734	234
87	NEW AC UNIT	10/22/2019	7,307				7,307	10	MO	S/L	4,141	730
88	INVERTER BOARD	10/22/2019	1,036				1,036	5	MO	S/L	1,036	0
89	BLOWER MOTOR - AC	12/17/2019	1,877				1,877	7	MO	S/L	1,475	268
90	NEW AC UNIT	3/30/2020	7,712				7,712	10	MO	S/L	4,049	771
91	NEW AC UNIT	5/07/2020	6,791				6,791	10	MO	S/L	3,509	679
92	4 CAMERAS	5/28/2020	3,796				3,796	5	MO	S/L	3,796	0
93	4 CAMERAS	5/28/2020	5,400				5,400	5	MO	S/L	5,400	0
94	SERVER WARRANTY	5/28/2020	3,948				3,948	2	MO	S/L	3,948	0
95	THERMOSTAT INTERFACE	7/21/2020	3,692				3,692	5	MO	S/L	3,631	61
96	2 KEYBOARDS	7/23/2020	1,998				1,998	5	MO	S/L	1,965	33
97	AC BLOWER MOTOR	8/28/2020	1,402				1,402	5	MO	S/L	1,356	46
98	2 CB CARTS	7/01/2020	4,019				4,019	5	MO	S/L	4,019	0
99	WATCHGUARD FIREWALL HARDWAI	7/23/2020	15,931				15,931	3	MO	S/L	15,931	0
100	3 CHROMEBOOK CARTS	11/13/2020	6,096				6,096	5	MO	S/L	5,690	406
101	BUS LOOP CAMERA INSTALL	12/09/2020	3,000				3,000	5	MO	S/L	2,750	250
102	BUS LOOP CAMERA	12/11/2020	2,168				2,168	5	MO	S/L	1,987	181
103	CAMERA FOR GYM	12/11/2020	959				959	5	MO	S/L	879	80
104	CB CART	12/24/2020	2,032				2,032	5	MO	S/L	1,829	203
105	2 DELL 3080S	12/29/2020	1,909				1,909	5	MO	S/L	1,718	191
106	YAMAHA LAB CONTROLLER & WIRE	2/01/2021	3,798				3,798	5	MO	S/L	3,355	443
107	CHROMEBOOK CART	4/28/2021	2,010				2,010	5	MO	S/L	1,675	335
108	GYM SOUNDPROOFING	6/25/2021	20,305				20,305	15	MO	S/L	5,415	1,353
109	SCANNER	6/01/2021	3,180				3,180	5	MO	S/L	2,597	583
110	AC MOTOR BLOWER	6/28/2021	891				891	5	MO	S/L	713	178
111	INFRASTRUCTURE UPGRADE	7/12/2021	197,066				197,066	5	MO	S/L	157,653	39,413
112	4 OUTDOOR PICNIC TABLES	7/29/2021	6,486				6,486	5	MO	S/L	5,081	1,297
113	INFRASTRUCTURE UPGRADES	8/18/2021	5,400				5,400	5	MO	S/L	4,140	1,080
114	EXTERIOR PAGING HORN	8/06/2021	1,600				1,600	7	MO	S/L	895	229
115	LITERACY STUDENT SOLUTIONS 2 YI	8/24/2021	3,700				3,700	2	MO	S/L	3,700	0
116	FIRE ALARM PANEL	9/28/2021	13,068				13,068	7	MO	S/L	7,001	1,867
117	HYDROPONIC GROWING SYSTEM	10/13/2021	4,000				4,000	5	MO	S/L	3,000	800
118	MORNING NEWS LAPTOP	10/15/2021	1,879				1,879	5	MO	S/L	1,410	375
119	9 CADET PCS AND 2 CB CARTS	3/16/2022	12,591				12,591	5	MO	S/L	8,394	2,518
120	SECURITY FENCE	7/25/2022	6,760				6,760	15	MO	S/L	1,314	451
121	REPAIRS TO BUS #1130	7/29/2022	24,828				24,828	5	MO	S/L	14,483	4,966
122	DVR SERVER	7/14/2022	16,060				16,060	5	MO	S/L	9,636	3,212
123	2 CB CARTS	7/14/2022	5,225				5,225	5	MO	S/L	3,135	1,045
124	10 TEACHER PCS	7/14/2022	13,036				13,036	5	MO	S/L	7,821	2,607
125	10 CADET PCS	7/14/2022	8,284				8,284	5	MO	S/L	4,970	1,657
126	SECURITY GATE	8/31/2022	5,734				5,734	15	MO	S/L	1,083	382
127	STORAGE SHED FOR GARDEN	10/11/2022	1,058				1,058	10	MO	S/L	291	106
128	FIRE ALARM SYSTEM	8/31/2022	12,993				12,993	10	MO	S/L	3,681	1,300
129	APPLECARE FOR IPADS	8/13/2022	4,975				4,975	4	MO	S/L	3,628	1,243
130	25 - 11 INCH IPAD PROS	8/13/2022	21,225				21,225	5	MO	S/L	12,381	4,245
131	22 HIGH END CADET PCS 10 CADET P	8/30/2022	48,769				48,769	5	MO	S/L	27,636	9,753
132	STUDYSYNC STUDENT LICENSES	10/12/2022	33,570				33,570	5	MO	S/L	18,464	6,714
133	TURF PROJECT	11/28/2022	23,452				23,452	39	MO	S/L	1,553	602
134	WASHER/DRYER SET	12/07/2022	1,198				1,198	7	MO	S/L	442	171
135	SHED FOR JUNIOR RAIDERS	12/20/2022	999				999	10	MO	S/L	250	100
136	NEW IRRIGATION CONTROLLER	3/06/2023	940				940	5	MO	S/L	439	188
137	CISCO MERAKI AND WATCHGUARD	3/21/2023	63,671				63,671	5	MO	S/L	28,652	12,734
138	CISCO MERAKI LICENSES	3/21/2023	608				608	5	MO	S/L	274	121
139	3 RISERS FOR BAND ROOM	4/19/2023	3,542				3,542	10	MO	S/L	767	355

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
141	AWNING	8/22/2023	2,475				2,475	15	MO	S/L	303	165
142	GATE CAMERA SYSTEM	7/31/2023	5,110				5,110	7	MO	S/L	1,399	730
143	KITCHEN COOLER	9/19/2023	4,973				4,973	10	MO	S/L	870	498
144	3 CB CARTS	8/31/2023	8,221				8,221	5	MO	S/L	3,014	1,645
145	CLASSROOM DOORS	12/29/2023	1,382				1,382	39	MO	S/L	53	36
146	6 DELL 7010S	1/06/2024	9,169				9,169	5	MO	S/L	2,751	1,834
147	AC SYSTEM - BUILDING 5	2/29/2024	11,357				11,357	10	MO	S/L	1,514	1,136
148	2007 FORD E350 VAN	2/22/2024	16,500				16,500	7	MO	S/L	3,143	2,357
149	2015 BUS	3/04/2024	46,509				46,509	10	MO	S/L	6,201	4,651
150	2 CHROMEBOOK CARTS	5/22/2024	5,601				5,601	3	MO	S/L	2,023	1,867
151	FRONT SECURITY GATE	7/31/2024	4,203				4,203	15	MO	S/L	257	280
152	FIRE ALARM AMPLIFIER AND DEVICI	8/01/2024	5,064				5,064	15	MO	S/L	309	338
153	NEW GYM AC COMPRESSOR	9/25/2024	7,109				7,109	10	MO	S/L	533	711
154	NEW CAFETERIA AC SYSTEM	10/30/2024	49,340				49,340	10	MO	S/L	3,289	4,934
155	NEW AC UNITS - ROOM 501 & 503	11/25/2024	9,475				9,475	10	MO	S/L	553	947
156	DOOR MAG LOCK FOR CAFETERIA	11/06/2024	15,674				15,674	15	MO	S/L	697	1,045
157	2 YAHAMA KEYBOARDS	8/20/2024	4,000				4,000	5	MO	S/L	667	800
158	KITCHEN COOLER	4/16/2025	3,004				3,004	10	MO	S/L	50	300
159	CAMERA	4/30/2025	1,559				1,559	10	MO	S/L	26	156
160	5 TEACHER PCS	8/13/2024	7,677				7,677	3	MO	S/L	2,346	2,559
161	3 CB CARTS	8/13/2024	7,998				7,998	3	MO	S/L	2,444	2,666
162	2 DELL SWITCHES	11/30/2024	16,470				16,470	3	MO	S/L	3,203	5,490
163	CAMERA	7/28/2025	1,412				1,412	10	MO	S/L	0	129
164	5 CAMERAS	8/31/2025	15,368				15,368	10	MO	S/L	0	1,281
165	IRRIGATION SYSTEM	1/14/2026	4,200				4,200	10	MO	S/L	0	210
166	55 GAL WATER HEATER	9/17/2025	2,531				2,531	10	MO	S/L	0	190
167	AC BUILDING 2 RM 207 AND 209	6/15/2026	13,825				13,825	10	MO	S/L	0	115
168	55 teacher pcs	7/01/2025	71,799				71,799	3	MO	S/L	0	23,933
169	2 laptops	7/29/2025	3,807				3,807	3	MO	S/L	0	1,163
	Total Other Depreciation		11,682,354				11,682,354				2,180,067	246,347
	Total ACRS and Other Depreciation		11,682,354				11,682,354				2,180,067	246,347
	Grand Totals		11,682,354				11,682,354				2,180,067	246,347
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Less: Domestic R & E Expense		0				0				0	0
	Net Grand Totals		11,682,354				11,682,354				2,180,067	246,347

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Other Depreciation:												
1	WINDOWS	8/10/2014	0				0	0	HY		0	0
2	ADMIN GYM CLASSROOMS	8/10/2014	0				0	0	HY		0	0
3	COMPUTER LAB CABLE INSTALLS	8/10/2014	0				0	0	HY		0	0
4	IPITOMY PHONE SYSTEM	8/10/2014	0				0	0	HY		0	0
5	WINDOWS 7 BACKUP SOFTWARE	8/10/2014	0				0	0	HY		0	0
6	IT SYSTEM COMPUTERS INSTALLATI	8/10/2014	0				0	0	HY		0	0
7	GYM HARDWOOD FLOORING	8/10/2014	0				0	0	HY		0	0
8	HOOPS AND VOLLEY BALL EQUIPME	8/10/2014	0				0	0	HY		0	0
9	BLEACHERS FOR THE GYM	8/10/2014	0				0	0	HY		0	0
10	SCOREBOARDS	8/10/2014	0				0	0	HY		0	0
11	GYM WALL PADDING	8/10/2014	0				0	0	HY		0	0
12	30 TVS AND MOUNTS	8/10/2014	0				0	0	HY		0	0
13	SINGLE FOOD WARMER	8/10/2014	0				0	0	HY		0	0
14	KITCHEN EQUIPMENT	8/10/2014	0				0	0	HY		0	0
15	40 DELL COMPUTERS	8/10/2014	0				0	0	HY		0	0
16	LICENSE SCAN SYSTEM	8/10/2014	0				0	0	HY		0	0
17	2 LUNCH TABLES $1059 ACH	8/10/2014	0				0	0	HY		0	0
18	3 HP 24 PORT MODULES	8/10/2014	0				0	0	HY		0	0
19	PREP BUILDING	8/10/2014	0				0	0	HY		0	0
20	CONFERENCE TABLE	9/05/2014	0				0	0	HY		0	0
21	2 LUNCH TABLES $1174.07 EACH	8/10/2014	0				0	0	HY		0	0
22	LOW VOLTAGE WIRING	9/17/2014	0				0	0	HY		0	0
23	SWITCH	11/07/2014	0				0	0	HY		0	0
24	SHELF	11/07/2014	0				0	0	HY		0	0
25	HP INTELLIGENT MANAGEMENT CEN	9/03/2014	0				0	0	HY		0	0
26	TUBA	1/20/2015	0				0	0	HY		0	0
27	DELL POWEREDGE SWITCH	1/05/2015	0				0	0	HY		0	0
28	PAVERS - PAT O'HARA PAVERS INC.	3/20/2015	0				0	0	HY		0	0
29	LOCKER ROOM BENCHES	4/15/2015	0				0	0	HY		0	0
30	2 SERVERS AT $11124.54 EACH INVOI	6/30/2015	0				0	0	HY		0	0
31	CABLING IN INFO CENTER COMPUTE	7/27/2015	0				0	0	HY		0	0
32	COMPLETION OF COMPUTER LAB	7/27/2015	0				0	0	HY		0	0
33	PREP COMPUTER LAB TABLES	7/30/2015	0				0	0	HY		0	0
34	AED LIFEPAK	8/23/2015	0				0	0	HY		0	0
35	15 CCTV CAMERAS	10/30/2015	0				0	0	HY		0	0
36	PREP CLINIC PANTRY CABINETS	11/30/2015	0				0	0	HY		0	0
37	PREP LOUNGE TABLE - MILLER'S BUT	1/19/2016	0				0	0	HY		0	0
38	PREP SPEAKER SYSTEM - ENCORE BI	3/21/2016	0				0	0	HY		0	0
39	PREP LAND	3/25/2016	0				0	0	HY		0	0
40	NEW CLASSROOM BUILDING	8/11/2016	0				0	0	HY		0	0
41	25 DELL LAPTOPS	4/04/2016	0				0	0	HY		0	0
42	LAPTOP CART	4/04/2016	0				0	0	HY		0	0
43	NEW CLASSROOM BUILDING	8/11/2016	0				0	0	HY		0	0
44	6 LUNCH TABLES	6/20/2016	0				0	0	HY		0	0
45	STUDENT DESKS AND CHAIRS	6/24/2016	0				0	0	HY		0	0
46	PBX SYSTEM (TELEPHONE)	5/03/2017	0				0	0	HY		0	0
47	MONUMENT SIGN	5/19/2017	0				0	0	HY		0	0
48	PAVERS	8/10/2017	0				0	0	HY		0	0
49	SOFA LOVESEAT	7/21/2016	0				0	0	HY		0	0
50	SOFA	7/21/2016	0				0	0	HY		0	0
51	PHONE SYSTEM	7/18/2016	0				0	0	HY		0	0
52	DH70 DEHUMIDIFIER	6/19/2017	0				0	0	HY		0	0
53	BUS	7/01/2017	0				0	0	HY		0	0
54	NEW BUS #1602	10/12/2016	0				0	0	HY		0	0
55	IT INFRASTRUCTURE FOR NEW BUIL	8/11/2016	0				0	0	HY		0	0
56	IDS SYSTEM	10/25/2017	0				0	0	HY		0	0
57	CABINETS AND COUNTER TOPS FOR	11/14/2016	0				0	0	HY		0	0
58	MONUMENT SIGN	3/07/2017	0				0	0	HY		0	0
59	WATCHGUARD	8/31/2017	0				0	0	HY		0	0
60	LAMINATOR	8/24/2017	0				0	0	HY		0	0
61	PC FOR PREP WORLD NEWS PROJECT	9/01/2017	0				0	0	HY		0	0
62	20 DELL LAPTOPS	10/19/2017	0				0	0	HY		0	0
63	2016 DODGE CARAVAN	2/27/2018	0				0	0	HY		0	0
64	CARPET REMOVAL - IT ROOM	8/11/2016	0				0	0	HY		0	0
65	ICE MACHINE	11/09/2017	0				0	0	HY		0	0
66	FOOD WARMER	11/29/2017	0				0	0	HY		0	0
67	SCIENCE ROOM SINK	8/25/2016	0				0	0	HY		0	0
68	3 IPAD PROS	2/19/2018	0				0	0	HY		0	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
69	SHELVING	7/27/2016	0				0	0	HY		0	0
70	15 SMART TVS	8/26/2016	0				0	0	HY		0	0
71	AC COMPRESSOR	4/13/2018	0				0	0	HY		0	0
72	2 CAMERAS - GYM	7/24/2017	0				0	0	HY		0	0
73	RAPID RUN CABLE IN MEDIA CENTEI	11/05/2018	0				0	0	HY		0	0
74	CARRIER 5 TON STRAIGHT COOL COI	8/13/2018	0				0	0	HY		0	0
75	IPAD PRO BUNDLE	8/03/2018	0				0	0	HY		0	0
76	GYM HALLWAY CAMERA AND INSTA	9/27/2018	0				0	0	HY		0	0
77	CISCO WI-FI HARDWARE SUPPORT	8/21/2018	0				0	0	HY		0	0
78	SERVER HARD DRIVES & ADAPTER	12/20/2018	0				0	0	HY		0	0
79	3 PCS	12/20/2018	0				0	0	HY		0	0
80	30 PCS	12/20/2018	0				0	0	HY		0	0
81	2 CAMERAS IN CAFETERIA	1/03/2019	0				0	0	HY		0	0
82	2 CAMERAS IN COURTYARD	1/03/2019	0				0	0	HY		0	0
83	CAMERA AT PARENT PICK-UP	1/03/2019	0				0	0	HY		0	0
84	CAMERA IN ADMIN HALLWAY	1/03/2019	0				0	0	HY		0	0
85	VIRTUALIZATION PROJECT	5/13/2019	0				0	0	HY		0	0
86	A/C COMPRESSOR	5/01/2019	0				0	0	HY		0	0
87	NEW AC UNIT	10/22/2019	0				0	0	HY		0	0
88	INVERTER BOARD	10/22/2019	0				0	0	HY		0	0
89	BLOWER MOTOR - AC	12/17/2019	0				0	0	HY		0	0
90	NEW AC UNIT	3/30/2020	0				0	0	HY		0	0
91	NEW AC UNIT	5/07/2020	0				0	0	HY		0	0
92	4 CAMERAS	5/28/2020	0				0	0	HY		0	0
93	4 CAMERAS	5/28/2020	0				0	0	HY		0	0
94	SERVER WARRANTY	5/28/2020	0				0	0	HY		0	0
95	THERMOSTAT INTERFACE	7/21/2020	0				0	0	HY		0	0
96	2 KEYBOARDS	7/23/2020	0				0	0	HY		0	0
97	AC BLOWER MOTOR	8/28/2020	0				0	0	HY		0	0
98	2 CB CARTS	7/01/2020	0				0	0	HY		0	0
99	WATCHGUARD FIREWALL HARDWAI	7/23/2020	0				0	0	HY		0	0
100	3 CHROMEBOOK CARTS	11/13/2020	0				0	0	HY		0	0
101	BUS LOOP CAMERA INSTALL	12/09/2020	0				0	0	HY		0	0
102	BUS LOOP CAMERA	12/11/2020	0				0	0	HY		0	0
103	CAMERA FOR GYM	12/11/2020	0				0	0	HY		0	0
104	CB CART	12/24/2020	0				0	0	HY		0	0
105	2 DELL 3080S	12/29/2020	0				0	0	HY		0	0
106	YAMAHA LAB CONTROLLER & WIRE	2/01/2021	0				0	0	HY		0	0
107	CHROMEBOOK CART	4/28/2021	0				0	0	HY		0	0
108	GYM SOUNDPROOFING	6/25/2021	0				0	0	HY		0	0
109	SCANNER	6/01/2021	0				0	0	HY		0	0
110	AC MOTOR BLOWER	6/28/2021	0				0	0	HY		0	0
111	INFRASTRUCTURE UPGRADE	7/12/2021	0				0	0	HY		0	0
112	4 OUTDOOR PICNIC TABLES	7/29/2021	0				0	0	HY		0	0
113	INFRASTRUCTURE UPGRADES	8/18/2021	0				0	0	HY		0	0
114	EXTERIOR PAGING HORN	8/06/2021	0				0	0	HY		0	0
115	LITERACY STUDENT SOLUTIONS 2 YI	8/24/2021	0				0	0	HY		0	0
116	FIRE ALARM PANEL	9/28/2021	0				0	0	HY		0	0
117	HYDROPONIC GROWING SYSTEM	10/13/2021	0				0	0	HY		0	0
118	MORNING NEWS LAPTOP	10/15/2021	0				0	0	HY		0	0
119	9 CADET PCS AND 2 CB CARTS	3/16/2022	0				0	0	HY		0	0
120	SECURITY FENCE	7/25/2022	0				0	0	HY		0	0
121	REPAIRS TO BUS #1130	7/29/2022	0				0	0	HY		0	0
122	DVR SERVER	7/14/2022	0				0	0	HY		0	0
123	2 CB CARTS	7/14/2022	0				0	0	HY		0	0
124	10 TEACHER PCS	7/14/2022	0				0	0	HY		0	0
125	10 CADET PCS	7/14/2022	0				0	0	HY		0	0
126	SECURITY GATE	8/31/2022	0				0	0	HY		0	0
127	STORAGE SHED FOR GARDEN	10/11/2022	0				0	0	HY		0	0
128	FIRE ALARM SYSTEM	8/31/2022	0				0	0	HY		0	0
129	APPLECARE FOR IPADS	8/13/2022	0				0	0	HY		0	0
130	25 - 11 INCH IPAD PROS	8/13/2022	0				0	0	HY		0	0
131	22 HIGH END CADET PCS 10 CADET P	8/30/2022	0				0	0	HY		0	0
132	STUDYSYNC STUDENT LICENSES	10/12/2022	0				0	0	HY		0	0
133	TURF PROJECT	11/28/2022	0				0	0	HY		0	0
134	WASHER/DRYER SET	12/07/2022	0				0	0	HY		0	0
135	SHED FOR JUNIOR RAIDERS	12/20/2022	0				0	0	HY		0	0
136	NEW IRRIGATION CONTROLLER	3/06/2023	0				0	0	HY		0	0
137	CISCO MERAKI AND WATCHGUARD I	3/21/2023	0				0	0	HY		0	0
138	CISCO MERAKI LICENSES	3/21/2023	0				0	0	HY		0	0
139	3 RISERS FOR BAND ROOM	4/19/2023	0				0	0	HY		0	0

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
141	AWNING	8/22/2023	0				0	0	HY		0	0
142	GATE CAMERA SYSTEM	7/31/2023	0				0	0	HY		0	0
143	KITCHEN COOLER	9/19/2023	0				0	0	HY		0	0
144	3 CB CARTS	8/31/2023	0				0	0	HY		0	0
145	CLASSROOM DOORS	12/29/2023	0				0	0	HY		0	0
146	6 DELL 7010S	1/06/2024	0				0	0	HY		0	0
147	AC SYSTEM - BUILDING 5	2/29/2024	0				0	0	HY		0	0
148	2007 FORD E350 VAN	2/22/2024	0				0	0	HY		0	0
149	2015 BUS	3/04/2024	0				0	0	HY		0	0
150	2 CHROMEBOOK CARTS	5/22/2024	0				0	0	HY		0	0
151	FRONT SECURITY GATE	7/31/2024	0				0	0	HY		0	0
152	FIRE ALARM AMPLIFIER AND DEVICI	8/01/2024	0				0	0	HY		0	0
153	NEW GYM AC COMPRESSOR	9/25/2024	0				0	0	HY		0	0
154	NEW CAFETERIA AC SYSTEM	10/30/2024	0				0	0	HY		0	0
155	NEW AC UNITS - ROOM 501 & 503	11/25/2024	0				0	0	HY		0	0
156	DOOR MAG LOCK FOR CAFETERIA	11/06/2024	0				0	0	HY		0	0
157	2 YAHAMA KEYBOARDS	8/20/2024	0				0	0	HY		0	0
158	KITCHEN COOLER	4/16/2025	0				0	0	HY		0	0
159	CAMERA	4/30/2025	0				0	0	HY		0	0
160	5 TEACHER PCS	8/13/2024	0				0	0	HY		0	0
161	3 CB CARTS	8/13/2024	0				0	0	HY		0	0
162	2 DELL SWITCHES	11/30/2024	0				0	0	HY		0	0
163	CAMERA	7/28/2025	0				0	0	HY		0	0
164	5 CAMERAS	8/31/2025	0				0	0	HY		0	0
165	IRRIGATION SYSTEM	1/14/2026	0				0	0	HY		0	0
166	55 GAL WATER HEATER	9/17/2025	0				0	0	HY		0	0
167	AC BUILDING 2 RM 207 AND 209	6/15/2026	0				0	0	HY		0	0
168	55 teacher pcs	7/01/2025	0				0	0	HY		0	0
169	2 laptops	7/29/2025	0				0	0	HY		0	0
	Total Other Depreciation		0				0				0	0
	Total ACRS and Other Depreciation		0				0				0	0
	Grand Totals		0				0				0	0
	Less: Dispositions and Transfers		0				0				0	0
	Net Grand Totals		0				0				0	0

Depreciation Adjustment Report

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences

There are no assets that meet the criteria of this report

Other Depreciation:

Asset	Description	Date In Service	Cost	Tax	AMT
1	WINDOWS	8/10/2014	31,652	812	0
2	ADMIN GYM CLASSROOMS	8/10/2014	140,945	3,614	0
3	COMPUTER LAB CABLE INSTALLS	8/10/2014	4,908	0	0
4	IPITOMY PHONE SYSTEM	8/10/2014	23,963	0	0
5	WINDOWS 7 BACKUP SOFTWARE	8/10/2014	62,520	0	0
6	IT SYSTEM COMPUTERS INSTALLATION	8/10/2014	251,104	0	0
7	GYM HARDWOOD FLOORING	8/10/2014	43,264	0	0
8	HOOPS AND VOLLEY BALL EQUIPMENT	8/10/2014	19,527	0	0
9	BLEACHERS FOR THE GYM	8/10/2014	43,300	0	0
10	SCOREBOARDS	8/10/2014	6,543	0	0
11	GYM WALL PADDING	8/10/2014	6,011	0	0
12	30 TVS AND MOUNTS	8/10/2014	29,828	0	0
13	SINGLE FOOD WARMER	8/10/2014	1,720	0	0
14	KITCHEN EQUIPMENT	8/10/2014	11,412	0	0
15	40 DELL COMPUTERS	8/10/2014	43,288	0	0
16	LICENSE SCAN SYSTEM	8/10/2014	1,600	0	0
17	2 LUNCH TABLES $1059 ACH	8/10/2014	2,753	0	0
18	3 HP 24 PORT MODULES	8/10/2014	5,715	0	0
19	PREP BUILDING	8/10/2014	220,614	5,657	0
20	CONFERENCE TABLE	9/05/2014	2,500	0	0
21	2 LUNCH TABLES $1174.07 EACH	8/10/2014	2,425	0	0
22	LOW VOLTAGE WIRING	9/17/2014	684	0	0
23	SWITCH	11/07/2014	2,361	0	0
24	SHELF	11/07/2014	940	0	0
25	HP INTELLIGENT MANAGEMENT CENTER	9/03/2014	4,880	0	0
26	TUBA	1/20/2015	2,336	0	0
27	DELL POWEREDGE SWITCH	1/05/2015	2,380	0	0
28	PAVERS - PAT O'HARA PAVERS INC.	3/20/2015	26,349	0	0
29	LOCKER ROOM BENCHES	4/15/2015	4,862	0	0
30	2 SERVERS AT $11124.54 EACH INVOICE	6/30/2015	22,249	0	0
31	CABLING IN INFO CENTER COMPUTER LA	7/27/2015	3,189	0	0
32	COMPLETION OF COMPUTER LAB	7/27/2015	4,791	0	0
33	PREP COMPUTER LAB TABLES	7/30/2015	13,972	0	0
34	AED LIFEPAK	8/23/2015	1,714	0	0
35	15 CCTV CAMERAS	10/30/2015	20,474	0	0
36	PREP CLINIC PANTRY CABINETS	11/30/2015	1,498	0	0
37	PREP LOUNGE TABLE - MILLER'S BUTCH	1/19/2016	2,000	0	0
38	PREP SPEAKER SYSTEM - ENCORE BROAI	3/21/2016	18,480	0	0
39	PREP LAND	3/25/2016	7,424,550	0	0
40	NEW CLASSROOM BUILDING	8/11/2016	39,721	1,018	0
41	25 DELL LAPTOPS	4/04/2016	31,788	0	0
42	LAPTOP CART	4/04/2016	2,125	0	0
43	NEW CLASSROOM BUILDING	8/11/2016	1,329,899	34,100	0
44	6 LUNCH TABLES	6/20/2016	7,873	0	0
45	STUDENT DESKS AND CHAIRS	6/24/2016	30,286	0	0
46	PBX SYSTEM (TELEPHONE)	5/03/2017	1,899	0	0
47	MONUMENT SIGN	5/19/2017	1,685	154	0
48	PAVERS	8/10/2017	16,401	1,641	0
49	SOFA LOVESEAT	7/21/2016	1,388	0	0
50	SOFA	7/21/2016	1,688	0	0
51	PHONE SYSTEM	7/18/2016	4,680	39	0
52	DH70 DEHUMIDIFIER	6/19/2017	2,550	0	0
53	BUS	7/01/2017	107,153	10,715	0
54	NEW BUS #1602	10/12/2016	109,262	0	0
55	IT INFRASTRUCTURE FOR NEW BUILDING	8/11/2016	169,278	4,340	0
56	IDS SYSTEM	10/25/2017	16,271	1,085	0
57	CABINETS AND COUNTER TOPS FOR BUIL	11/14/2016	3,783	0	0
58	MONUMENT SIGN	3/07/2017	4,505	300	0
59	WATCHGUARD	8/31/2017	4,640	0	0
60	LAMINATOR	8/24/2017	2,700	0	0
61	PC FOR PREP WORLD NEWS PROJECT	9/01/2017	1,400	0	0
62	20 DELL LAPTOPS	10/19/2017	28,959	0	0
63	2016 DODGE CARAVAN	2/27/2018	16,420	0	0
64	CARPET REMOVAL - IT ROOM	8/11/2016	9,185	0	0
65	ICE MACHINE	11/09/2017	1,778	0	0
66	FOOD WARMER	11/29/2017	1,930	0	0
67	SCIENCE ROOM SINK	8/25/2016	2,297	38	0

Asset	Description	Date In Service	Cost	Tax	AMT
68	3 IPAD PROS	2/19/2018	2,337	0	0
69	SHELVING	7/27/2016	4,943	0	0
70	15 SMART TVS	8/26/2016	14,685	0	0
71	AC COMPRESSOR	4/13/2018	2,507	0	0
72	2 CAMERAS - GYM	7/24/2017	4,042	0	0
73	RAPID RUN CABLE IN MEDIA CENTER	11/05/2018	950	95	0
74	CARRIER 5 TON STRAIGHT COOL CONDEN	8/13/2018	3,100	0	0
75	IPAD PRO BUNDLE	8/03/2018	994	0	0
76	GYM HALLWAY CAMERA AND INSTALLA	9/27/2018	1,233	0	0
77	CISCO WI-FI HARDWARE SUPPORT	8/21/2018	25,986	0	0
78	SERVER HARD DRIVES & ADAPTER	12/20/2018	6,684	0	0
79	3 PCS	12/20/2018	4,936	0	0
80	30 PCS	12/20/2018	25,217	0	0
81	2 CAMERAS IN CAFETERIA	1/03/2019	3,333	0	0
82	2 CAMERAS IN COURTYARD	1/03/2019	2,614	0	0
83	CAMERA AT PARENT PICK-UP	1/03/2019	1,609	0	0
84	CAMERA IN ADMIN HALLWAY	1/03/2019	1,406	0	0
85	VIRTUALIZATION PROJECT	5/13/2019	99,179	0	0
86	A/C COMPRESSOR	5/01/2019	1,968	0	0
87	NEW AC UNIT	10/22/2019	7,307	731	0
88	INVERTER BOARD	10/22/2019	1,036	0	0
89	BLOWER MOTOR - AC	12/17/2019	1,877	134	0
90	NEW AC UNIT	3/30/2020	7,712	771	0
91	NEW AC UNIT	5/07/2020	6,791	679	0
92	4 CAMERAS	5/28/2020	3,796	0	0
93	4 CAMERAS	5/28/2020	5,400	0	0
94	SERVER WARRANTY	5/28/2020	3,948	0	0
95	THERMOSTAT INTERFACE	7/21/2020	3,692	0	0
96	2 KEYBOARDS	7/23/2020	1,998	0	0
97	AC BLOWER MOTOR	8/28/2020	1,402	0	0
98	2 CB CARTS	7/01/2020	4,019	0	0
99	WATCHGUARD FIREWALL HARDWARE	7/23/2020	15,931	0	0
100	3 CHROMEBOOK CARTS	11/13/2020	6,096	0	0
101	BUS LOOP CAMERA INSTALL	12/09/2020	3,000	0	0
102	BUS LOOP CAMERA	12/11/2020	2,168	0	0
103	CAMERA FOR GYM	12/11/2020	959	0	0
104	CB CART	12/24/2020	2,032	0	0
105	2 DELL 3080S	12/29/2020	1,909	0	0
106	YAMAHA LAB CONTROLLER & WIRELESS	2/01/2021	3,798	0	0
107	CHROMEBOOK CART	4/28/2021	2,010	0	0
108	GYM SOUNDPROOFING	6/25/2021	20,305	1,354	0
109	SCANNER	6/01/2021	3,180	0	0
110	AC MOTOR BLOWER	6/28/2021	891	0	0
111	INFRASTRUCTURE UPGRADE	7/12/2021	197,066	0	0
112	4 OUTDOOR PICNIC TABLES	7/29/2021	6,486	108	0
113	INFRASTRUCTURE UPGRADES	8/18/2021	5,400	180	0
114	EXTERIOR PAGING HORN	8/06/2021	1,600	228	0
115	LITERACY STUDENT SOLUTIONS 2 YR	8/24/2021	3,700	0	0
116	FIRE ALARM PANEL	9/28/2021	13,068	1,866	0
117	HYDROPONIC GROWING SYSTEM	10/13/2021	4,000	200	0
118	MORNING NEWS LAPTOP	10/15/2021	1,879	94	0
119	9 CADET PCS AND 2 CB CARTS	3/16/2022	12,591	1,679	0
120	SECURITY FENCE	7/25/2022	6,760	451	0
121	REPAIRS TO BUS #1130	7/29/2022	24,828	4,966	0
122	DVR SERVER	7/14/2022	16,060	3,212	0
123	2 CB CARTS	7/14/2022	5,225	1,045	0
124	10 TEACHER PCS	7/14/2022	13,036	2,608	0
125	10 CADET PCS	7/14/2022	8,284	1,657	0
126	SECURITY GATE	8/31/2022	5,734	382	0
127	STORAGE SHED FOR GARDEN	10/11/2022	1,058	106	0
128	FIRE ALARM SYSTEM	8/31/2022	12,993	1,299	0
129	APPLECARE FOR IPADS	8/13/2022	4,975	104	0
130	25 - 11 INCH IPAD PROS	8/13/2022	21,225	4,245	0
131	22 HIGH END CADET PCS 10 CADET PCS	8/30/2022	48,769	9,754	0
132	STUDYSYNC STUDENT LICENSES	10/12/2022	33,570	6,714	0
133	TURF PROJECT	11/28/2022	23,452	601	0
134	WASHER/DRYER SET	12/07/2022	1,198	171	0
135	SHED FOR JUNIOR RAIDERS	12/20/2022	999	100	0
136	NEW IRRIGATION CONTROLLER	3/06/2023	940	188	0
137	CISCO MERAKI AND WATCHGUARD RENE	3/21/2023	63,671	12,734	0
138	CISCO MERAKI LICENSES	3/21/2023	608	122	0

65-1149763 **Future Depreciation Report FYE: 6/30/2027**

FYE: 6/30/2026 **Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
139	3 RISERS FOR BAND ROOM	4/19/2023	3,542	354	0
141	AWNING	8/22/2023	2,475	165	0
142	GATE CAMERA SYSTEM	7/31/2023	5,110	730	0
143	KITCHEN COOLER	9/19/2023	4,973	497	0
144	3 CB CARTS	8/31/2023	8,221	1,644	0
145	CLASSROOM DOORS	12/29/2023	1,382	35	0
146	6 DELL 7010S	1/06/2024	9,169	1,833	0
147	AC SYSTEM - BUILDING 5	2/29/2024	11,357	1,136	0
148	2007 FORD E350 VAN	2/22/2024	16,500	2,357	0
149	2015 BUS	3/04/2024	46,509	4,651	0
150	2 CHROMEBOOK CARTS	5/22/2024	5,601	1,711	0
151	FRONT SECURITY GATE	7/31/2024	4,203	280	0
152	FIRE ALARM AMPLIFIER AND DEVICES	8/01/2024	5,064	338	0
153	NEW GYM AC COMPRESSOR	9/25/2024	7,109	711	0
154	NEW CAFETERIA AC SYSTEM	10/30/2024	49,340	4,934	0
155	NEW AC UNITS - ROOM 501 & 503	11/25/2024	9,475	948	0
156	DOOR MAG LOCK FOR CAFETERIA	11/06/2024	15,674	1,044	0
157	2 YAHAMA KEYBOARDS	8/20/2024	4,000	800	0
158	KITCHEN COOLER	4/16/2025	3,004	301	0
159	CAMERA	4/30/2025	1,559	156	0
160	5 TEACHER PCS	8/13/2024	7,677	2,559	0
161	3 CB CARTS	8/13/2024	7,998	2,666	0
162	2 DELL SWITCHES	11/30/2024	16,470	5,490	0
163	CAMERA	7/28/2025	1,412	142	0
164	5 CAMERAS	8/31/2025	15,368	1,536	0
165	IRRIGATION SYSTEM	1/14/2026	4,200	420	0
166	55 GAL WATER HEATER	9/17/2025	2,531	253	0
167	AC BUILDING 2 RM 207 AND 209	6/15/2026	13,825	1,383	0
168	55 teacher pcs	7/01/2025	71,799	23,933	0
169	2 laptops	7/29/2025	3,807	1,269	0
	Total Other Depreciation		11,682,354	186,367	0
	Total ACRS and Other Depreciation		11,682,354	186,367	0
	Grand Totals		11,682,354	186,367	0

Federal Statements

Taxable Interest on Investments

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
	$ 21,933		14			
TOTAL	$ 21,933					

Federal Statements

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER PROFESSIONAL FEES	$ 1,056,095	$ 130,541	$ 925,554	$
TOTAL	$ 1,056,095	$ 130,541	$ 925,554	$ 0

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER PURCHASED SERVICES	$ 129,527	$	$ 129,527	$
TAXES DUES AND FEES	94,976	15,126	79,850	
COMMUNICATIONS	76,373		76,373	
DUAL ENROLLMENT CHRGE	23,465	23,465		
RENTALS	2,347		2,347	
TOTAL	$ 326,688	$ 38,591	$ 288,097	$ 0