

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2001

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2001 calendar year, or tax year beginning **JANUARY 1**, 2001, and ending **December 31**, 2001

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Final return
 - Amended return
 - Application pending

Please use IRS label or print or type See Specific Instructions	C Name of organization Ability School of Utah		D Employer identification number 87 : 0517862
	Number and street (or P.O. box if mail is not delivered) to street address	Room/suite	E Telephone number 801 908 7347
	City or town, state or country and ZIP + 4 Sandy, Utah 84094		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

G Web site ▶

J Organization type (check only one) ▶ 501(c) (**3**) (insert no) 4947(a)(1) or 527

K Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

H and **I** are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Enter 4-digit GEN ▶ **4177**

M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 8b, 8b, 9b, and 10b to line 12 ▶

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
		a	Direct public support	1a	5754	
		b	Indirect public support	1b	0	
		c	Government contributions (grants)	1c	0	
		d	Total (add lines 1a through 1c) (cash \$ <u>5754</u> noncash \$ <u>0</u>)	1d	5754	
		2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	200420	
		3	Membership dues and assessments	3	0	
		4	Interest on savings and temporary cash investments	4	66	
		5	Dividends and interest from securities	5	0	
		6a	Gross rents	6a	0	
		b	Less rental expenses	6b	0	
		c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	0	
	7	Other investment income (describe ▶)	7	0		
	8a	Gross amount from sales of assets other than inventory	(A) Securities	8a	0	
			(B) Other	8b	0	
	b	Less cost or other basis and sales expenses	8c	0		
	c	Gain or (loss) (attach schedule)	8d	0		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))				
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including \$ <u>5328</u> of contributions reported on line 1a)	9a	8525		
	b	Less direct expenses other than fundraising expenses	9b	426		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	8099		
	10a	Gross sales of inventory, less returns and allowances	10a	0		
	b	Less cost of goods sold	10b	0		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	0		
	11	Other revenue (from Part VII, line 103)	11	0		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	214339		
Expenses	13	Program services (from line 44, column (B))	13	210623		
	14	Management and general (from line 44, column (C))	14	2976		
	15	Fundraising (from line 44, column (D))	15	0		
	16	Payments to affiliates (attach schedule)	16	0		
	17	Total expenses (add lines 13 and 14, column (A))	17	213599		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	740		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	27488		
	20	Other changes in net assets or fund balances (attach explanation)	20	(4785)		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	23443		

109 P

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 2b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	31123	31123		
26	Other salaries and wages	25361	23667	1694	
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes	4316	4061	255	
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	34228	33201	1027	
34	Telephone	1640	1640		
35	Postage and shipping				
36	Occupancy	72571	72571		
37	Equipment rental and maintenance				
38	Printing and publications				
39	Travel				
40	Conferences, conventions, and meetings	2635	2635		
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	9045	9045		
43a	Other expenses not covered above (itemize): a				
b	advertising	17366	17366		
c	license fees	15314	15314		
d					
e					
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	213599	210623	2976	

Joint Costs Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? ▶..... Education.....	Program Service Expenses
a 50 students K-12th grade with 90% of students reading above grade level and 50% doing math above grade, drop-outs rescued, students complete with competence (Grants and allocations \$ _____)	210623
b (Grants and allocations \$ _____)	
c (Grants and allocations \$ _____)	
d (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	210623

Part IV Balance Sheets (See Specific Instructions on page 24.)

Note. Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year	
Assets	45 Cash—non-interest-bearing	2402	45	4901	
	46 Savings and temporary cash investments	29	48	42	
	47a Accounts receivable	47a 24836			
	b Less allowance for doubtful accounts	47b 0	24502	47c	24836
	48a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b		48c	
	49 Grants receivable			49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a Other notes and loans receivable (attach schedule)	51a			
	b Less allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges			53	
	54 Investments—securities (attach schedule) ▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54	
	55a Investments—land, buildings, and equipment basis	55a			
	b Less accumulated depreciation (attach schedule)	55b		55c	
56 Investments—other (attach schedule)			56		
57a Land, buildings, and equipment basis	57a 73738				
b Less accumulated depreciation (attach schedule)	57b 13988	6581	57c	59750	
58 Other assets (describe ▶ <u>Furn/fixt, leasehold imp</u>)			58		
59 Total assets (add lines 45 through 58) (must equal line 74)		33514	59	89529	
Liabilities	60 Accounts payable and accrued expenses		60		
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	4707	63	66086	
	64a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)		64b		
	65 Other liabilities (describe ▶ _____)	1319	65		
66 Total liabilities (add lines 60 through 65)		6026	66	66086	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted		67		
	68 Temporarily restricted		68		
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds	27488	72	23443	
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	27488	73		
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		33514	74	89529	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)

a	Total revenue, gains, and other support per audited financial statements ▶	a	n/a
b	Amounts included on line a but not on line 12, Form 990	b	n/a
	(1) Net unrealized gains on investments \$		
	(2) Donated services and use of facilities \$		
	(3) Recoveries of prior year grants \$		
	(4) Other (specify)		
	\$		
	Add amounts on lines (1) through (4) ▶	b	n/a
c	Line a minus line b, ▶	c	n/a
d	Amounts included on line 12, Form 990 but not on line a:	d	n/a
	(1) Investment expenses not included on line 6b, Form 990 \$		
	(2) Other (specify)		
	\$		
	Add amounts on lines (1) and (2) ▶	d	n/a
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	n/a

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	n/a
b	Amounts included on line a but not on line 17, Form 990	b	n/a
	(1) Donated services and use of facilities \$		
	(2) Prior year adjustments reported on line 20, Form 990 \$		
	(3) Losses reported on line 20, Form 990 \$		
	(4) Other (specify)		
	\$		
	Add amounts on lines (1) through (4) ▶	b	n/a
c	Line a minus line b ▶	c	n/a
d	Amounts included on line 17, Form 990 but not on line a:	d	n/a
	(1) Investment expenses not included on line 6b, Form 990 \$		
	(2) Other (specify)		
	\$		
	Add amounts on lines (1) and (2) ▶	d	n/a
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	n/a

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated see Specific Instructions on page 26)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Dawn Gordon 1144 W. 3300 So. SLC, Ut	Pres. 3hr. Ex. Dir. 40hr	0 23275	0 0	0 0
Phil Parke 1144 W. 3300 So., SLC, Ut	V. Pres.	0	0	0
Lora Mengucci 1144 W. 3300 So. SLC, Ut	Off.	0	0	0
Gairia Taufer 1144 W. 3300 So., SLC, Ut	Sec./Tres. Teacher	0 -7848	0 0	0 0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		
b	If "Yes," enter the name of the organization		
81a	Enter direct or indirect political expenditures See line 81 instructions <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)		N/A
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes" did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86a	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87a	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed		N/A
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	5
91	The books are in care of <u>Dawn Gordon</u> Telephone no <u>(801) 908-7347</u> Located at <u>913 E. Superior Circle Sandy, UT</u> ZIP + 4 <u>84094</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Tuition					200420
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					8099
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		0	
105 Total (add line 104, columns (B), (D), and (E))					

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	This 501(c)3 organization operates a school K-12. Tuition and fees are charged to provide students a quality education and to furnish them with the proper materials etc. Fundraisers are run for library books, new bldg, and sports equip.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(A) Name, address and EIN of corporation partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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)

Please Sign Here: *Dawn Gordon* Signature of officer Date: 1 March 31, 2002

Type or print name and title: Dawn Gordon Exec. Director

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. W): _____

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ EIN: _____ Phone no: _____

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2001

Supplementary Information—(See separate instructions.)

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization: Ability School of Utah Employer identification number: 87-0517862

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ▶				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶	None	

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A or line I of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments		

See part V
Form 990

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 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 charitable, etc , 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) (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 Organizations described on lines 10 or 11. a Enter 2% of amount in column (a), line 24 ▶	26a	
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts ▶	26b	
c Total support for section 509(a)(1) test Enter line 24, column (e) ▶	26c	
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶	26d	
e Public support (line 26c minus line 26d total) ▶	26e	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶	26f	

27 Organizations described on line 12. a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year

(2000) _____ (1999) _____ (1998) _____ (1997) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5 000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year

(2000) _____ (1999) _____ (1998) _____ (1997) _____

c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	27c	
d Add Line 27a total _____ and line 27b total _____ ▶	27d	
e Public support (line 27c total minus line 27d total) ▶	27e	
f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶	27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	27h	

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions)
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 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?	<input checked="" type="checkbox"/>	
30 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?	<input checked="" type="checkbox"/>	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? S.L Tribune If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	<input checked="" type="checkbox"/>	
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	<input checked="" type="checkbox"/>	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<input checked="" type="checkbox"/>	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<input checked="" type="checkbox"/>	
d Copies of all material used by the organization or on its behalf to solicit contributions?	<input checked="" type="checkbox"/>	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33 Does the organization discriminate by race in any way with respect to.		
a Students' rights or privileges?		<input checked="" type="checkbox"/>
b Admissions policies?		<input checked="" type="checkbox"/>
c Employment of faculty or administrative staff?		<input checked="" type="checkbox"/>
d Scholarships or other financial assistance?		<input checked="" type="checkbox"/>
e Educational policies?		<input checked="" type="checkbox"/>
f Use of facilities?		<input checked="" type="checkbox"/>
g Athletic programs?		<input checked="" type="checkbox"/>
h Other extracurricular activities?		<input checked="" type="checkbox"/>
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		<input checked="" type="checkbox"/>
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		<input checked="" type="checkbox"/>
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	<input checked="" type="checkbox"/>	

Ability School of Utah
Balance Sheet
12/31/01

Assets

Checking	4,901
Savings	42
Accounts Receivable	24,836
Leasehold Improvements	67,000
Furniture & Fixtures	6,738
Accum Depreciation	<u>(13,988)</u>
Assets	<u>89,529</u>

Total Assets **89,529**

Liabilities

Loans Payable	
Loan from Officer for 2000 not prev. recorded.	<u>66,086</u>
Liabilities	<u>66,086</u>

Equity

Current Earnings	740
Retained Earnings	27,488
adjustment of last years deprec on leasehold improv. not prev. recorded.	<u>-4785</u>
Adjusted Retained Earnings	22,703
Equity	<u>23,443</u>

Total Liability/Equity **89,529**

Ability School of Utah
Profit & Loss Statement
01/01/01 Thru 12/31/01

Income

Tuition	200,420
Fundraising	13,853
Interest Income	66
Total Income	\$214,339

Expenses

Training	2,635
Rent	62,000
Materials/Books	15,526
License Fees	15,314
Arts/Crafts/Field Trips	8,554
Supplies	10,147
Telephone	1,640
Insurance	1,074
Advertising	17,366
Utilities	9,497
Depreciation	9,045
	\$152,798

Payroll	
Gross Payroll	56,484
Payroll Taxes	4,316
	\$60,801

Total Expenses	\$213,599
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Net Income	\$740
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Ability School of Utah
EIN 87-0517862
Form 990, 2001

Explanation for line 20, Form 990

Due to an oversight, depreciation on leasehold improvements was not recorded year 2000. Depreciation has been updated now for 2000 and 2001. This is reflected on the financial statement.

Ability School of Utah
EIN 87-0517862
Form 990, 2001

Information for line 63-loans from officers, directors, trustees and key employees

Lenders Name	Dawn Gordon
Balance Due	\$66,086.00
Date of Note.	January 1999
Matunty Date	5 years
Repayment Terms	500.00 monthly until paid in full
Interest Rate	Waived
Secunty Provided.	None
Purpose	Remodel Bldg , Operating expenses
Consideration	Cash

Ability School of Utah
EIN 87-0517862
Form 990, 2001

Schedule of Accounts Receivable

<u>Name</u>	<u>Amount</u>	
de Salaberry	2,000 00	Tuition in arrears
Bell	475.00	Tuition in arrears
Fordham	2,745.54	Tuition in arrears
Anderson	475.00	Tuition in arrears
Albawi	345.00	Tuition in arrears
Balken	385.00	Tuition in arrears
Behunin	550 00	Tuition in arrears
Gordon	300.00	Tuition in arrears
Hall	400.00	Tuition in arrears
Hess, A	1,805.00	Tuition in arrears
Hess, G	446.00	Tuition in arrears
Lucas	400.00	Tuition in arrears
Markovich	843.00	Tuition in arrears
Mecham	316.00	Tuition in arrears
Nelson	320 00	Tuition in arrears
Neslen	300 00	Tuition in arrears
Olson	375 00	Tuition in arrears
Parke	70.00	Tuition in arrears
Plaskett	10,420 00	Tuition in arrears
Rock	712.50	Tuition in arrears
Romrell	143.00	Tuition in arrears
Strode	350.00	Tuition in arrears
Stewart	285 00	Tuition in arrears
Wilkening	180.00	Tuition in arrears
Woolstenhulme	187.50	Tuition in arrears
Wnght	7 50	Tuition in arrears
	<u>\$24,836.04</u>	

**Ability School of Utah
Depreciation Schedule
2001**

	Furniture/Fixture	Leasehold Improvements	
Asset Balance end of 2000	6,738	67,000	
Acquired 2001	0	0	
Total Asset Amount	6,738	67,000	
less balance prior to 2000 *	5,638	0	
Equity adj For l/y dep	0	4,785	
Balance to be depreciated	1,100	62,215	
Depreciation 2001	157	8,888	
Total depreciation for 2001		9,045	
Asset Balance	6,738	67,000	
less accumulated depreciation	314	13,673	
Total Asset Balance	6,424	53,327	
		59,751	

* No depreciation was taken on these assets prior to 2000, last years depreciation was taken on assets acquired that year for \$1,100.00 only Depreciation this year, 2001 was calculated less this balance on furniture & fixtures as it was not included prior to now

** This amount was calculated using straight-line 7 year, half year convention for the first year of service which was last year, and this years depreciation was adjusted to reflect this amount.

Ability School of Utah
Special Events Schedule
EIN 87-0517862
Form 990 2001

Schedule for line 9

Special Event	Spagetti Dinner	Catalog Fundraiser	Golf Tournament	Remaining Events	Totals
Gross Receipts	800 00	3,033 80	6,363.00	3,656 50	13,853 30
Less Contribution	150.00	1,787.70	1,925.00	1,465.50	5,328.20
Gross Revenue	650.00	1,246 10	4,438 00	2,191 00	8,525 10
Less Direct Expense	102.05	0.00	154.59	169.55	426 19
Net Income	<u>\$547.95</u>	<u>\$1,246.10</u>	<u>\$4,283.41</u>	<u>\$2,021.45</u>	<u>\$8,098 91</u>