Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2002

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2002 calendar year, or tax year beginning 2002, and ending 20 D Employer Identification mumb B Check if applica 86 0850124 29 IB WJ 86-0850124 200312 APPLIED SCHOLASTICS INTERNATIONAL ACADEMY FOR LEARNING Address cher : Telephone number : Name change (702)737-8668 Industreturo 1018 E SAHARA AVE STE D LAS VEGAS NV 89104-3222 Account ating mentions: 🔲 Castr Final return P-89 P26 ☐ Other (specify) ▶ HabidaadHaatalaHabidabikabiladid Amended retu applicable to section 527 organizations. Section 501(c)(2) organizations and 4947(a)(1) nonemempt charmed Application pending H(a) is this a group return for affiliates? 🔲 Yes 🗹 No. trusts must attach a completed Schedule A (Form 900 or 900-EZ). H(b) If "Yes," enter number of affiliates ▶ G Web site: ▶ none ☐ Yes ☐ Bo Hich Are all affiliates included? J Organization type (check only one) ► 2 501(c) (3) < (insert no.) 4947(a)(1) or 527 (# "No." attach a list. See instructions.) N/A H(d) is this a separate return filed by an K. Check here ▶ 🔲 if the organization's gross receipts are normally not more than \$25,000. The organization covered by a group ruling? 🗹 Yes 🔲 No 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. Enter 4-digit GEN > 4171 M Check ▶ ☑ if the organization is not required 133,743 Gross receipts. Add lines 6b. 8b, 9b, and 10b to line 12 ▶ to attach Sch B (Form 990 990-EZ or 990-PF). Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions.) Contributions, gifts, grants, and similar amounts received a Direct public support . . 0 16 b Indirect public support 0 1c d Total Land Sees (Falthrough (Ic) (cash \$ 0 0 noncash \$ 10 125,698 2 Program service revenue opcluding government fees and contracts (from Part VII, line 93) 2 3 0 8 128 4 0 5 5 Dividends and interest from securities LESS TEME CAPENSES 0 66 0 6c Net rental income or (loss) (subtract line 6b from line 6a) 0 Other investment income (describe ▶ (A) Securities **650** Other 8a Gross amount from sales of assets other 2.964 80 than inventory , . . . 0 855 b Less cost or other basis and sales expenses. 2,964 8c Gain or floss) (attach schedule) ... 2,964 84 d Net gain or (loss) (combine line 8c, columns (A) and (B)) 9 Special events and activities (attach schedule) a Gross revenue (not including \$; 1,751 contributions reported on line 1a) **9b** 344 b. Less, direct expenses other than fundraising expenses 1,407 9c c. Net income or (loss) from special events (subtract line 9b from line 9a) 3,202 10a | 10a Gross sales of inventory, less returns and allowances . 2,789 b Less, cost of goods sold 413 10c Gross profit or (loss) from sales of inventory (attach schedule) (subtract fine 10b from line 10a). 0 11 Other revenue (from Part VII, line 103) 130,610 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 12 103,899 13 13 Program services (from line 44, column (B)) . . 34,468 14 14 Management and general (from line 44, column (C)) . 864 15 Fundraising (from line 44, column (D)) 0 16 16 Payments to affiliates (attach schedule) . 139,231 17 Total expenses (add lines 16 and 44, column (A)) -8.621 18 18 Excess or (deficit) for the year (subtract line 17 from line 12) . 32,702 19 19 Net assets or fund balances at beginning of year (from line 73, column (A)) . 267 20 Other changes in net assets or fund balances (attach explanation) CPA.5. Qd.), 24,348

Net assets or fund balances at end of year (combine lines 18, 19, and 20)

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2002)

21

Cat. No. 11282Y

Par		Statement of Functional Expenses	All organizations (and section 4947)	nust compl a)(1) nonex	lete column (A). Colum empt cheritable trusts i	rs (6), (C), and (D) are re but optional for others. (1	quired for section 501(c) ise page 21 of the instr	 and (4) organizations actions.)
		not include amounts repo 6b, 8b, 9b, 10b, or 16 of			(A) Total	(6) Program services	(C) Management and general	(D) Fundralsing
22	Gran	nts and allocations (attach	schedule)					
	(cash	\$ noncash \$		22				
23		tific assistance to individuals (•	23				
24		efits paid to or for members (24	40.000	40.400		<i>/////////////////////////////////////</i>
25		rpensation of officers, dire	ctors, etc .	25	13,000	10,400	2,340	200
26		er salanes and wages		26	65,130	65,130		
27		sion plan contributions .	• •	28				
28		er employee benefits		29	5,977	5,499	406	72
29	•	roll taxes		30	93	5,455		
30		essional fundraising fees		31	250		250	
31 32		ounting fees		32	661		661	
32 33	_	at fees plies .		33	3,545	284	3,261	
33 34	•	phone .	•	34	1,014		1,014	
35		tage and shipping	•	35	204		204	
36		upancy		36	26,631	21,305	4,794	532
37		ipment rental and mainten	ance	37	921		921	
38	•	ting and publications	urec	38	130	10	120	
39	Trav	• '	• • •	39				
40		iferences, conventions, and	l meetinas	40	220		220	
41		rest		41				
42		reciation, depletion, etc. (a	ttach schedule)	42	5,327		5,327	
43	•	r expenses not covered above (ite		43a	2,330		2,330	
ь		bility Insurance		43b	2023		2023	
C	Lic	ense Fees		43c	9,670		9.670	
đ		d Debt		43d	848		848	
•	Sta	aff Training		436	1350	696	654	
44		functional expenses (add lines 22 thro. feting columns (6)-(D), carry these to		44	139,231	103,324	35,043	864
Join Are	t Co	sts. Check >	re following SO	P 98-2	ndraisinn solicitatio	n reported in (BS) Pro	oram services? . I	· ► 🛘 Yes 🗹 No
r Y	es, e	nter (1) the aggregate amount	t of these joint co	sts \$, 與 th	e amount allocated	to Program service	s \$
(141) t	he an	nount allocated to Manageme	ent and general \$, and (hv) th	e amount allocated	to Fundraising \$	
Pa	1 111	Statement of Program	m Service Ac	compli	shments (See p	page 24 of the in	structions)	
Wha	t is t	he organization's primary e	exempt purpose	? ▶ K-1	2 Education			Program Service
All o	rganu ients	zations must describe their of served, publications issued ons and 4947(a)(1) nonexem	exempt purpose , etc. Discuss ac	achieven chieveme	ments in a clear ar ents that are not n	neasurable (Section	n 501(c)(3) and (4)	Expenses (Request for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts but options for others.)
a	see.	attached						
	_							
			. <i>.</i>	Cente	and allocations	- <u> </u>		103,324
				Crants	and allocations	•		103,324
0								
	·							
-				(Grants	and allocations	<u> </u>)	
C		· · · · · ·						
			•				· · · ·-	
	· · · ·			(Grants	and allocations	··	· · · · · · · · · · · · · · · · · · ·	
ď								
]
				(Grants	and allocations	š	<u>.</u>	ł
•	Other	program services (attach	schedule)		and aflocations	\$)	
		of Program Service Expe				Program services)		103,324

Part IV Balance Sheets (See page 24 of the instructions)

Notes	Where required, attached schedules and amount column should be for end-of-year amounts only	s within the	description	(A) Beginning of year		(B) End of year
45	Cash—non-interest-bearing	··		8,628	45	5,999
	Savings and temporary cash investments .			5,000	46	5,000
"	congcional annual a		• • • • •			
47a	Accounts receivable	478	1,038			
Ь	Less, allowance for doubtful accounts ,	47Ь	848	955	47c	190
i						
48a	Pledges receivable	48a				
	Less, allowance for doubtful accounts ,	48b		·	48c	
49	Grants receivable				49	
50	Receivables from officers, directors, trust-	ees, and	key employees		ll	
	(attach schedule)				50	. <u></u>
51a	Other notes and loans receivable (attach		ŀ			
휥	schedule)	51a				
Assets q	Less, allowance for doubtful accounts ,	51b			51c	
⋖ 52	Inventones for sale or use		<i>.</i> .	<u>801</u>	52	413
53	Prepaid expenses and deferred charges .		<u>.</u> <u>.</u> .		53	
54	Investments-securities (attach schedule),	•	☑ Cost ☐ FMV	200	54	300
55a	Investments-land, buildings, and					
}	equipment basis	55a				
Ь	Less. accumulated depreciation (attach	1 1				
ŀ	schedule)	55b		<u> </u>	55c	<u> </u>
56	Investments-other (attach schedule)				56	
57a	Land, buildings, and equipment basis.	57a	20,959			
Ь	Less. accumulated depreciation (attach	1 1	[
1	schedule)	57b	5,594	1,433		15,365
58	Other assets (describe ► deposits)	18,889	58	139
					i 1	
_ 59	Total assets (add lines 45 through 58) (mus	st equal lin	e 74)	35,906		27,406
60	Accounts payable and accrued expenses .			1,254		1,200
61	Grants payable	•			61	
62	Deferred revenue			1,950	min .	1,858
8 63	Loans from officers, directors, trustees, ar	nd key em	ployees (attach			
63 64a 64a	schedule)				63	
월 648	Tax-exempt bond liabilities (attach schedule			-	64a	
- ь	Mortgages and other notes payable (attach	schedute)	·		64b	
65	Other habilities (describe >)		65	
				2.004	[2.050
66	Total liabilities (add lines 60 through 65)			3,204	66	3,058
Orga	enszations that follow SFAS 117, check here	■ and	complete lines			
2	67 through 69 and lines 73 and 74		İ			
68 69 69	Unrestricted		.		67	
쿨 68	Temporanly restricted .	-			68	
a5 69	Permanently restricted		<u>.</u>		69	
Orga	anizations that do not follow SFAS 117, chec	k here ▶	and and			
<u> </u>	complete lines 70 through 74					
ঠ 70	Capital stock, trust principal, or current fun				70	
Net Assets 72 73 73	Paid-in or capital surplus, or land, building,			22 702	71	24 240
밁 72	Retained earnings, endowment, accumulate			32,702	72	24,348
ਨੂੰ 73	Total net assets or fund balances (add in	ies 67 thro	ough 69 or lines			
ž)	70 through 72,		= (1)	32,702	73	24,348
1	column (A) must equal line 19, column (B)	-	7			
74	Total liabilities and net assets / fund balar	ICES (200	ines bb and /3)	35,906	74	27,406

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.

Par	rt IV-A	Reconciliation of Reven Financial Statements wi Return (See page 26 of the	th Řevenue	per	Part		Reconciliation of Financial States Return			
		nue, gains, and other support			•		penses and lo			
b	•	ed financial statements		N/A	Ь		nancial statement included on line			N/A
/4\	bne 12, F						7, Form 990			
(1)	on investr	lized gains ments . <u>\$</u>			(1)	Donated and use o	services flacilities			
(2)	Donated and use of	services of facilities \$			(2)	Pnor year a reported lo	djustments n line 20,			
(3)	Recovene	es of pnor			_	Form 990	<u>\$</u>			
(4)	year gran Other (sp				(3)	Losses replacements	•			
	· · · · ·	s			(4)	Other (sp	eafy)			
	Add amou	ints on lines (1) through (4) ▶	ь				\$ \$			
c	Line a mi	nus line b ▶	c		c		ints on lines (1) thi cus line b	rough (4)>>	С	
d	Amounts	included on line 12,) but not on line a:			d	Amounts	included on line but not on line a	•		
(1)		t expenses			(1)	investment		_		
	not include 6b. Form 9	led on line				not include 6b. Form 9	ed on line			
(2)	Other (sp	····			(2)		= =			
•					, ,		."			
	Add amo	unts on lines (1) and (2)	d]	Add amor	unts on lines (1)	and (2) >	d	
•		enue per line 12, Form 990			•		enses per line 17,			
Par	t V Lis	it of Officers, Directors, 1	rustees, a	nd Key I	mplo			not compens	ated	; see page 26 o
	u ie	(A) Name and address	,	(E) Title a	nd aven	age hours per to position	(C) Compensation (if not paid, enter -0)	(D) Contributors employee boods p deleted company	s to hess &	(E) Expense eccount and other allowances
see	attachme	nt								
-										
						· · · · ·				-
						-	 			
75	organizatio	fficer, director, trustee, or key e on and all related organizations, attach schedule—see page	of which mor	e than \$1	0,000 v	mpensation ras provided	of more than \$100 I by the related org),000 from yo anizations?	ur >	Yes 🗹 No

Academy For Learning EIN 86-0850124 2002

Farm	990 (2002)		F	Page 5			
Pai	Other Information (See page 27 of the instructions)		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	76		~			
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		~			
	If "Yes," attach a conformed copy of the changes						
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	76a		~			
	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		N/	į		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		1			
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?	80a	,,,,,,,	V			
Ь	If "Yes," enter the name of the organization ▶						
	and check whether it is 🗀 exempt or 🗔 nonexempt.						
81a	Enter direct or indirect political expenditures. See line 81 instructions. [81a] [9]						
Ь	Did the organization file Form 1120-POL for this year?	81b	 -	<u> </u>			
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	82a		·			
	or at substantially less than fair rental value?						
b	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)	83a		<i>Y//////</i>			
	3a Did the organization comply with the public inspection requirements for returns and exemption applications?						
	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?						
	Did the organization solicit any contributions or gifts that were not tax deductible? .	848		N			
þ	If "Yes" did the organization include with every solicitation an express statement that such contributions	84b	mm	V///	١		
0.5	or gifts were not tax deductible?	85a		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1		
85	501(c)(4), (5), or (6) organizations: a Were substantially all dues nondeductible by members?	85b		137	ì		
b	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						
_	Dues, assessments, and similar amounts from members [85c] N/A						
	Section 162(e) lobbying and political expenditures						
-	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A						
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A						
	Does the organization elect to pay the section 6033(e) tax on the amount on line 851?	85g			١		
	If section 6033(eX1)(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		NLE	1		
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 . 86a N/A						
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A						
87	501(c)(12) orgs. Enter a Gross income from members or shareholders. 87a N/A						
ь	Gross income from other sources (Do not net amounts due or paid to other						
	sources against amounts due or received from them)			MMM.			
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	mm				
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under						
Ь	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		Щ_			
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			•			
	Sections 4912, 4955 and 4958			<u>_</u>			
	Enter Amount of tax on line 89c, above, reimbursed by the organization .						
	List the states with which a copy of this return is filed none	1	4				
_	Number of employees employed in the pay period that includes March 12, 2002 (See instructions) The books are in care of ▶ Tracy Yeich Telephone no ▶ (702) 75	37-86	88				
91	1010 Food Cohere Avenue 4D Lee Verse Mounds						
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	•	ı	- 0			
	F VA	Form	990	(2002)			
				,			

Part \	Analysis of Income-Producing	Activities (See p	age 31	of the i	instructio	ns)		
Note:	Enter gross amounts unless otherwise	Unrelated I	DUSTNESS	income	Excluded b	y sectio	n 512, 513, cr 514	Œ)
indical		(A) Business code	Ar	(B) nount	(C) Exclusion (ode	(D) Amount	Related or exempt function income
	K-12 Education	<u> </u>	1			\neg	·	125,698
b _			i					
			1					·
- d		· ·	1		†			
			Î					
1 1	Aedicare/Medicaid payments		1			_1		
	ees and contracts from government agence	es	İ					
_	Membership dues and assessments .			-				
	nterest on savings and temporary cash investme	nts			14		128	
	Avidends and interest from securities							
	let rental income or (loss) from real estate							
	lebt-financed property		T		Ī			
	ot debt-financed property					\neg		
	let rental income or (loss) from personal proper	tv	1	-			<u></u>	
	Other investment income	''						
	iam or (loss) from sales of assets other than invent	ary .						2,964
_	let income or (loss) from special events .	-,						1,407
	Gross profit or (loss) from sales of inventory	,						413
	Other revenue: a	'	T	•				
b_								
c _								
d _					ŀ			·
•								
104 5	Subtotal (add columns (B), (D), and (E))							130,482
	fotal (add line 104, columns (B), (D), and (E	E))					.	130,610
	ine 105 plus line 1d, Part I, should equal ti		12, Par	i <i>l</i>				
Part \	Relationship of Activities to the A	ccomplishment o	of Exem	pt Purpo	oses (See	page	e 32 of the ins	tructions)
Line N ▼	 Explain how each activity for which incor of the organization s exempt purposes (o 					d imp	ortantly to the a	ccomplishment
93A	~					1		
101	The special event provided a venue							-
100								
102	By having more reference materials,							
Part I						age 3	2 of the instru	ctions)
	W	(B)		(C)		Ť	(D)	(E)
,	Name, address, and EIN of corporation, partnership, or disregarded entity	Percentage of ownership interest	N	ature of a	ctivities	- 1	Total income	End-of-year assets
NA		%					•	
		%	_	-				
		%						
		%						
Part >	Information Regarding Transfers Ass	sociated with Pers	onal Be	nefit Con	tracts (Se	e pag	e 33 of the ins	tructions.)
(b) (nd the organization, during the year, receive any funds ord the organization, during the year, pay pi If "Yes" to (b), file Form 8870 and Form	remiums, directly o	or indire		•			Yes Mo
	Under penalties of payury I declare that I have exa			npenying so	hedules and	staten	nents, and to the b	est of my knowledge
N	and belief it is true, correct, and complete. Declar	ration of preparer (other	than offic	er) is based	notni Ba no t	metion	of which busbase.	has any knowledge
Please	Yvery Ger	4						
Sign	Signature of officer					Det	e .	
Here	Tracy Yeich, Secretary/Treasurer					No	ovember 15, 2	003
	Type or print name and tide							
David	Preparer s		Da	tr	Check		Preparer s SSN or	PTIN (See Gen. Inst. W)
Pad December	signature		ł		self- employed	▶□		
Preparer	I timi s name (or yours)					N .	•	
Use Only	if self-employed address, and ZIP + 4					hone n	o > ()	
								_

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section \$01(e), 501(f), 501(k), 501(r), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

Employer Identification rumber

Department of the Treasury Internal Revenue Service

▶ MUST be completed by the above organizations and attached to their Form \$90 or 990-EZ

OMB No 1515-0017

Name of the o			Employer identificat	ion rumber	
	For Learning		86 . 0850124		
Part I	Compensation of the Five High (See page 1 of the instructions 1	est Paid Employees Ot ist each one If there are	her Than Office e none, enter "f	None ")	
(a) Name	and address of each employee paid more than \$50,000	(b) Tide and average hours per week devoted to position		(d) Contributions to eraployee benefit plans & deferred compensation	(e) Expense account and other allowances
поле			•		
-					
Total numi \$50,000	ber of other employees paid over	0			
Part II	Compensation of the Five High (See page 2 of the instructions Lis	est Paid Independent (Contractors for viduals or firms)	Professional So	enter "None")
(m) h	lame and address of each independent contractor		- · · · · · ·	of service	(c) Compensation
none					
	·····				
Total numb	er of others receiving over \$50 000 for	0			

Pa	rt li	Statements About Activities (See page 2 of the instructions)	Yes	No			
1	att or	uring the year, has the organization attempted to influence national, state, or local legislation, including any tempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities \$		~			
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of elobbying activities					
2	OW With	uning the year, has the organization, either directly or indirectly, engaged in any of the following acts with any bistambal contributors: trustees, directors, officers, creators, key employees, or members of their families, of the any taxable organization with which any such person is affiliated as an officer, director trustee, majority when, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)					
	Sa	ale, exchange, or leasing of property?					
b	Le	ending of money or other extension of credit?		~			
C	Fu	irnishing of goods, services, or facilities?					
đ	Pa	syment of compensation (or payment or reimbursement of expenses if more than \$1,000)? ((EFET +0 2d)	_	~			
•	Tre	ansfer of any part of its income or assets?		-			
3	Do	bes the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)		•			
4		you have a section 403(b) annuity plan for your employees?					
		ttach a statement to explain how the organization determines that individuals or organizations receiving grants from it in furtherance of its charitable programs "qualify" to receive payments.					
Pa	rt I	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)					
The	orga	anization 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)					
7		A school Section 170(b)(1)(A)(ii) (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)					
8	П	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)					
9	Ö	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's na and state ▶	ame	, city ,			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1700 (Also complete the Support Schedule in Part IV-A.)	b)(1)(A)(iv)			
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the gene Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)	rai p	ublic			
	_	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%% of its support from contributions, membership fees, and gross receipts from activities related to its chantable, etc., functions—subject to certain exceptions, and (2) no more than 33%% 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 org 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)(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					
		none	_				
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)					

Academy For Learning 86-0850124 2002

Schedule A (Form 990 or 990-EZ) 2002

Page 2

TO THE	: You may use the worksheet in the instructions	for converting fr	om the accrual	to the cash metho	od of accounting	of accounting.
	ndar year (or flacal year beginning in) . >	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
	Grits, grants, and contributions received (Do					
	not include unusual grants. See line 28.), .					
16	Membership fees received					
17				1		
•	sold or services performed, or furnishing of facilities in any activity that is related to the organization's chantable, 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	1	1	1		ļ.
19	by the organization after June 30, 1975 Net income from unrelated business	 		 		
	activities not included in line 18	ļ <i></i> -		ļ		
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 moorne 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.			<u> </u>		
25	Enter 1% of time 23	-	· · · · · · · · · · · · · · · · · · ·	1	1	
 26	Organizations described on lines 10 or 11:	a Feeter 204 of	amount in coke	mo (a) kno 24	► 2 6	la
	_				<i>7///</i>	
D	Prepare a list for your records to show the nar governmental unit or publicly supported organi.	ne or and amour	a curromouteu oy al cebe for 1008	rbounds 2001 eve	earled the	
	amount shown in line 26a. Do not file this list w	dikumur setum (Enter the Intal of	all these excess at	mounts > 2	Sib
c	Total support for section 509(a)(1) test: Enter le				🕨 🔼	Sc
d						
_						Bd
	Public support (line 26c minus line 26d total)				. ▶ 21	be .
Ĭ	Public support percentage (line 26e (numera	stor) divided by	line 26c (denon	ninator)) .	▶ 2	6f 9
27	Organizations described on line 12: a For person "prepare a list for your records to show Do not file this list with your return. Errer th	or amounts inclu	ded in lines 15, Hotal amounts o mounts for each	16, and 17 that eceived in each year	were received air from, each	disqualified person
b	For any amount included in line 17 that was received for each (include in the list organizations described in lines the difference between the amount received and amounts) for each year (2001)	ved from each pe year, that was m 5 through 11, as o the larger amour	rson (other than ore than the large well as individual nt described in (1	"disqualified person or of (1) the amoun o) Do not file this !	ns"), prepare a li t on line 25 for t list with your re sum of these di	ist for your records to the year or (2) \$5,000 turn. After computing fferences (the excess
c	Add Amounts from column (e) for lines 15		16		► z	7c
-4	Add: Line 27a total	and tine 27b tot			\cdot \cdot \cdot	7d
-	Public support fine 27c total minus line 27d to		a	 · · ·		7e
	Total support for section 509(a)(2) test. Enter a		23 column fel	▶ 27f		
I	Public support for section sustants test enter a Public support percentage (line 27e frumen	announa normane atom divided be	Lo, COMMINI (C).	instori)		7g 9
y	Investment income percentage (line 276 (surnar	umn (e) framver	tor) divided by	line 27f idenomi		7h 9
	Unusual Grants: For an organization describ					

. 1

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	Yes No
24	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?	29 🗸
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?	30 V
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?.	31
	If "Yes," please describe if "No " please explain (if you need more space, attach a separate statement.)	
	In the largest newspaper in Las Vegas, Nevada, the Academy For Learning ran the statement on page 7 of Schedule A instructions.	
32	Does the organization maintain the following	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	
Þ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b
C	Copies of all catalogues brochures, announcements, and other written communications to the public dealing	32c
d	with student admissions programs and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?	32d 🗸
_		
	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	
	Tools to diguitation assimilated by face at any way with respect to	
8	Students' rights or privileges?,	33a V
_	Adams notices	33b
D	Admissions policies?	- V
c	Employment of faculty or administrative staff?	33c
		1 2
d	Scholarships or other financial assistance?	33d
e	Educational policies?	33e
	•	· ·
f	Use of facilities?	33f
_	Athletic programs?	33a
9	reason programs r	
h	Other extracurricular activities?	33h
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	
	Paratha and a second a second and a second a	34a
378	Does the organization receive any financial aid or assistance from a governmental agency?	
ь	Has the organization's right to such aid ever been revoked or suspended?	345
	If you answered "Yes" to either 34a or b, please explain using an attached statement.	
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05	

	Academy	For Learning	86-08501	24 2002		
_	arms v fleatin san at san-est sons	<u>`</u>			Independent	Page 5
Pa	I VI-A Lobbying Expenditures by El (To be completed ONLY by an				e instructions)	
~	ck ▶ a ☐ if the organization belongs to an affilia				and "limited control"	Ormerone mode
<u> </u>	Limits on Lobbyi			Julia Cara	(a) Affiliated group	(b) To be completed
	(The term "expenditures" mea	•			totals	for ALL electing organizations
				36	 	
36 37	Total lobbying expenditures to influence public Total lobbying expenditures to influence a legi:			37		
38	Total lobbying expenditures (add lines 36 and	•	cendodynigy	38		
39	Other exempt purpose expenditures .	37) .		39		
40	Total exempt purpose expenditures (add lines	38 and 39\		40		
41	Lobbying nontaxable amount. Enter the amount	•	eno table			
7.	3 3	bbying nontexet	•			
		f the amount on !		· · · · · · ////		
	Over \$500,000 but not over \$1,000,000 \$100,0			00,000		
	Over \$1,000,000 but not over \$1,500,000 . \$175,0	•		1 1 4 4 4		
	Over \$1,500,000 but not over \$17,000,000 \$225,0	•		1 1////		
	Over \$17,000,000	•		1 //////		
42				42		
43	Subtract line 42 from tine 36. Enter -0- if line 4		ne 36	43		
44	Subtract line 41 from line 38. Enter -0- if line 4	•		44		
			-			
	Caution: If there is an amount on either line 4.	3 or line 44, you i	nust file Form 4	720		
	4-Year Av	eraging Period	d Under Secti	ion 501(h)		
	(Some organizations that made a section	n 501(h) election	do not have to	complete all of the	ne five columns b	elow
	See the instructions f	or lines 45 throug	th 50 on page 1	1 of the instruction	ons)	
		Lob	bying Expendit	ures During 4-Y	ear Averaging Po	erlod
	Calendar year (or	(a)	ы	(c)	(d)	(e)
	fiscal year beginning in) ▶	2002	2001	2000	1999	Total
						
45	Lobbying nortaxable amount		1			
46	Lobbying ceiting amount (150% of time 45(e)).					
				1		
47	Total lobbying expenditures				<u> </u>	
					1	
48	Grassroots nontaxable amount ,		<u> </u>			<u> </u>
49	Grassroots ceiling amount (150% of line 48(e))					
		1				
50	Grassroots lobbying expenditures .	<u> </u>	<u> </u>	<u> </u>	<u></u>	
Pa	I VI-B Lobbying Activity by Nonelector (For reporting only by organization)	cting Public C ations that did	narities not complete	Part VI-A) (Sec	page 11 of th	e instructions)
Dun	ing the year, did the organization attempt to infli		· · · · · · · · · · · · · · · · · · ·			Amount
	mpt to influence public opinion on a legislative r				7 (63 140	ANIMAN
	Volunteers		_		.	
					1 1.4	VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions) uring the year, did the organization attempt to influence national, state or local legislation, including any itempt to influence public opinion on a legislative matter or referendum through the use of a Volunteers.

b Paid staff or management (Include compensation in expenses reported on lines c through h.)

c Media advertisements.

d Mailings to members, legislators, or the public.

e Publications, or published or broadcast statements

f Grants to other organizations for lobbying purposes

g Direct contact with legislators, their staffs, government officials, or a legislative body.

h Raffies, demonstrations, seminars, conventions, speeches, lectures, or any other means.

i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

r ,cir	ı vı			e page 12 of the instruction	ns)		JAC .	
31		the reporting orga	nízation directly or	indirectly engage in any of the	following with any other organization of 527, relating to political organization		d in se	ction
_				to a nonchantable exempt orga			Yes	No
_	_	` ·		w o north made each pr way		51=()		~
		Other assets				a(ii)		~
		er transactions						
•				. nauchartable august accomme		P00		~
		_		nonchantable exempt organiza	uon	b(ii)		~
				rtable exempt organization	• • •	b(iii)		~
			s, equipment, or other	ner assets	• • • • •	b(iv)		·
		Reimbursement a	_			P(A)	\vdash	
		Loans or loan gue					\vdash	
				ship or fundraising solicitations		p(A)	\vdash	
		-		sts other assets, or paid emplo	yees	<u> </u>		<u> </u>
Line	n) no	Amount involved	Name of non	(c) chanzable exempt organization	Description of transfers, transactions and s	haring air	ingeme	**************************************
								
	des	cribed in section 5	01(c) of the Code (following schedule	other than section 501(c)(3)) or i	e or more tax-exempt organizations in section 527?	U Yes	. 2	No
			 					
								
								
					 			
				<u> </u>	 			
		 -						
				ļ	 	_		
					 			
								
				ļ	ļ			
					ļ			
				· · · - · · · · · · · · · · · · ·	<u></u>			
								
·		 -		 	 			
		 .	·	•	Schedule A (For	n 990 or	00 0-€2	2002

Line 8C, Form 990, Academy For Learning, EIN 86-0850124 2002

Oakridge Micro-Energy Stock:

\$2964

Less cost or sales expense:

00

Net Gain.

\$2964

Part I, Line 10C, Form 990, Academy For Learning, EIN 86-0850124 2002

Gross Sales of Book Inventory \$3202

Less Cost of Books Sold: \$2789

Gross Profit \$ 413

Part I, 9A, Form 990, Academy For Learning, EIN 86-0850124 2002

Special Events: Bingo

Gross Receipts \$1751

Less Contributions 00

Gross Revenue \$1751

Less Direct Expenses: \$ 344

Net Income \$1407

Academy For Learning, Form 990, Part II Spreadsheet EIN 86-0850124 2002

\$26,631 00

Line 26 Salaries	Holly Robles Loyd Wasson Juanita Merrill Mike Remeika Julie Childers	\$15,338 28 \$ 2,110 00 \$19,052 00 \$25,000 08 \$ 3,630 00
Total		\$65,130 36
Line 36, Occupancy		
Rent Utilities		\$24,056 00 \$ 2,575 00

Total

Part III, Form 990, Academy For Learning, EIN 86-0850124 2002 Attachment, Program Accomplishments

The Academy For Learning is a private school that delivers grades Kindergarten through 12th grade. This schooling utilizes the effective study methods developed by philosopher L. Ron Hubbard. In 2002, 30 students were enrolled, all of whom completed at least one grade level and some completed 1 ½ grade levels in a year. The school provides a completely drug-free, violence-free environment for the students.

Part IV, Line 54, Form 990, Academy For Learning, EIN 86-0850124 2002

\$50.00 of stock in E. Published Books. This was its cost and its value now
\$50.00 of stock in Aggregate, Inc. This was its cost and its value now
\$100.00 of stock in Al's Plant Care, Inc. This was the cost and its value now
\$100.00 of stock in Portraits. This was the cost and its value now.

Part IV, Line 57A, Form 990, Academy For Learning, EIN 86-0850124 2002 See attached form 4562

Fixed Assets.

Computer:	\$600
Computer	\$100
Organ:	\$1000
Art [.]	\$8750
Art	\$10,000
Computer	\$509

Total. \$20,959

2002 Depreciation: \$ 5,327

Prior Years Depreciation: \$ 267 = \$5,594

Total Book Value of Assets: \$15,365

Part V, Form 990, Academy Fo		ademy For Lea	ming	86-0850124	2002
(A)	(B)	(C)	(D)	(E)	
Tracy Yeich Academy For Learning 1018 E Sahara Ave Suite D Las Vegas, NV 89104	Trustee (1)	0	0	0	
Steven Yeich Academy For Learning 1018 E Sahara Ave Suite D Las Vegas, NV 89104	Trustee (1)	0	0	0	
Roger Ellsworth Academy For Learning 1018 E Sahara Ave Suite D Las Vegas, NV 89104	Trustee (1)	0	0	0	
Joann Ellsworth Academy For Learning 1018 E. Sahara Ave. Suite D. Las Vegas, NV 89104	Trustee (1)	0	0	o	
Lasca Hix-Fallon Academy For Learning 1018 E. Sahara Ave Suite D Las Vegas, NV 89104	Trustee (1)	0	0	0	
Tracy Yeich Academy For Learning 1018 E Sahara Ave Suite D Las Vegas, NV 89104	Executive Directe Secretary/Treasur 50 hours per wee	rer per year	0	Tuition for one child (value- \$425/mth)
Steven Yeich Academy For Learning 1018 E. Sahara Ave. Suite D Las Vegas, NV 89104	President (1)	0	0	0	
Roger Ellsworth Academy For Learning 1018 E Sahara Ave. Suite D Las Vegas, NV 89104	Vice-President (1) 0	0	o	

4562

Depreciation and Amortization

_	OMB	No.	154	5-01	72
	G	<u> </u>		_	

ZUUZ

(Including Information on Listed Property) Department of the Treesury Attachment Sequence No 67 ➤ See separate instructions. ► Attach to your tax return. Business or activity to which this form relates Identifying numb Name(s) shown on return Learning Non-protit school Academy +oc86-*-0*850*(2* Election To Expense Certain Tangible Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. \$24,000 Maximum amount. See page 2 of the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see page 2 of the instructions) 2 3 \$200,000 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Ω Tentative deduction Enter the smaller of line 5 or line 8. 10 10 Carryover of disallowed deduction from line 13 of your 2001 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2003 Add lines 9 and 10, less line 12 ▶ | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) Part II Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see page 3 of the instructions) 15 Property subject to section 168(f)(1) election (see page 4 of the instructions) Other depreciation (including ACRS) (see page 4 of the instructions) Part III MACRS Depreciation (Do not include listed property.) (See page 4 of the instructions.) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2002 If you are electing under section 168(i)(4) 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 2002 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction year placed in period only-see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property 15-year property f 20-year property g 25-year property 25 yrs. S/L S/L 27.5 yrs. MM h Residential rental 27.5 yrs. MM S/L property S/L MM 39 yrs. i Nonresidential real MM S/L Section C—Assets Placed in Service During 2002 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year S/L 12 yrs. c 40-year MM S/L 40 yrs. Summary (see page 6 of the instructions) 3*a* 7 21 Listed property Enter amount from line 28 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 instr.

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

ら、3a7

Form	4562 (2002)							_							Page 4
Pa	proper	Property (In	entertainm	ent, re	creatio	n, or a	ımuseı	ment)							
		For <mark>any vehicl</mark> e lb, columns (a)											ense, (complet	e only
Sec	tion A—Depre												senger	autom	obiles.)
24a	Do you have evid	ence to support t	he business/	investme	nt use cla	umed? (⊴ Yes	☐ No	24b If	"Yes,"	is the e	vidence	written?	V Yes	□ No
	(a) be of property (list	(b) Date placed in	(c) Business/ investment use	Cos	(d) t or other	Bas	(e) as for dep siness/im	preciation	(f) Recovery	Me	(g) thod/	Depr	(h) eciation luction	Ek	(I) octed on 179
	vehicles first)	service	percentage	L	basis		USG OF	ty)	penod	Com	notine	080	ucion —		ost
25 	Special deprec year and used	more than 509	K in a qual	rfied bu	siness t	ıse (see	page	7 of the	instruct	юns)	25				
<u>26</u>	Property used				usiness	use (s	ee pag	e 7 of t	the instr	uctions	<u>) </u>				
<u>Se</u>	e depred	riation re							<u> </u>	┼		5,	<u>327</u>	+	
			96			+	-		 -	├					
		500/	<u> </u>					-4 45 -	<u> </u>			l		——	
<u>27</u>	Property used	50% or less <u>i</u>			ness us	e (see	page /	or the	Instruction			I		<i>\\\\\\\</i>	
			% %						 	S/L S/L					
		-	70		-	-			 	S/L		<u> </u>		-/////	
	4.4.4	<u> </u>	<u> </u>		7 Cata			lina 21	1 2000		28	5.3	327		
28 29	Add amounts Add amounts								i, page	,	20		28/	3	
<u> </u>	Acc anounts	in Column (y,)							· /ehicles			-			
Con	nplete this secti	on for vehicles								ın 5%	owner."	or rela	ated pe	rson	
If you	provided vehicles	to your employee	s, first answe	er the que	estions in	Section	C to see	ıf you m	eet an exc	eption t	o comple	eting this	section	for those	vehicles
	· · ·		-	}	a)		b)	Ι .	(c)	(c		1	9)	(1	_
30	Total business/inv		_		cle 1		cle 2		icie 3	Vehi	-		cle 5	Vehic	-
	the year (do not see page 2 of the		iñ umes—		-			†							
31	Total commuting		n the veer			_	_	<u> </u>							
32	Total other per miles driven	•	-											 	
33	Total miles di Add lines 30 t	•	he year		1 21-	V	l NI-	Yes	No	Yes	No	Yes	No	Yes	No
34	Was the vehicl use during off		personal	Yes	No	Yes	No_	103	NO	103	140	103	110	165	140
35	Was the vehice more than 5% of	•													
36	Is another personal use?		able for				_								
		Section C—Qu	estions fo	or Emp	loyers \	Who P	rovide	Vehicle	s for U	se by ?	Their E	mploye	905		
	wer these ques	stions to deter	mine if yo	u meet	an exc	eption	to con	npleting	g Section	n B fo	r vehicl	les use	d by e	mploye	es who
are	not more than	5% owners or	related pe	rsons (see pag	je 8 of	the ins	truction	ns)					_	
37	Do you mainta by your emplo		olicy stater	ment th	at prohi	brts all	persor	al use	of vehic	les, inc	luding	commu	ıtıng,	Yes	No
38	Do you maintair See page 8 of t	a written policy										r emplo	yees?		
39	Do you treat a			-	-										
40		de more than f						ınform	ation fro	m vou	r emplo	ovees a	bout		
•••	the use of the									,,,,		,			
41		e requirements						on use'	? (See pa	ge 9 of	the inst	ructions	:)		
	Note: If your a	nswer to 37, 38	3, 39, 40, o	r 41 is '	Yes, de	o not c	omplete	Sectio.	n B for ti	he cove	ered vel	ricles			
Pa	rt VI Amor	tization				•			_					_	
	(a) Description	of costs	Date an	(b) xortization gins	,	Amor	c) tızable ount		(d Co sect	de	Amort	e) tization od or		(f) ortization this year	for
40	A	6 4b-4 b-			MO 4			0 06 44			perce	ntage		-	
<u>42</u>	Amortization o	costs that be	yıns a urıng T	your 20	NZ TAX Y	/ear (se	e page	च ठा ग्र∖	e ii isiruci	101B)	-				
_					- 		· · · -	- +			+	+			
43	Amortization (of coete that h	egan befor	na voni ir	2002 to	Y Vear		1				43			
44		nounts in colui					tions fo	x wher	e to rece	ort		44			
<u> </u>			11, 000	<u></u>											

Depreciation Worksheet (keep for your records.) Academy For Learning 86-0850124 2002

					f dans	,			,	
Description of Property	Date Placed is Service		Business/ Investment Use %	Section 173 Deduction and Special Allowance	Depreciation Prior Years	Besis for Depreciation	Method/ Correstion	Period	i i i	Potential
Computer	00-11	10000	1000		216a	0000	λĦ	Ŋ	605000	24,00
Computer	7-01	1000	100%		1500	(00 op	Ma	ហ	G.D.Scom	20'hE
Ocadon	19-01	1000	100%		3600	(0000	9	7	GDS-0%	279.00
art	10-15-61	81500	100%		0	87500	MO	7	3 DS 50%	2230,00
Oct	19-3-01	12-31-01 10,000"	100%		Q	00000	mo	h	005 jos.	2,538.00
Computer	3-00	5000	0,00		0	2000	À	Ŋ	GDE DOWN	102,00
-										
										-
										ļ
i										
										1.
										-
					,					-
-	-									4
				ļ					;	,
40+010		20050			36700	30959	1			5327.00
					72.7					

rum 8868

(December 200)

Department if the Treasury Internal Brownia Service

Application for Extension of Time To File an Exempt Organization Return

File ≥ separate application for each return

OMB No. 1545 1269

• If you are filing for an Automatic 3-Month Extension, o	c <mark>omplete only Part I</mark> and check th	ns box ► 🗗
 If you are filing for an Additional (not automatic) 3-Mo 	inth Extension, complete only Pa	art II (on page 2 of this form)
Note Do not complete Part II unless you have already bei		
Form 8868		
Automatic 3-Month Extension of Time-		
Note Form 990-T corporations requesting an automatic 6 in		
All other corporations (including Form 990 C files) must use form by returns Partnerships REMICs and trusts must use Form by	ise Form 7004 to request an exter 8736 to request an extension of til	nsion of time to file inclume tax he to file Form 1065-1066, or 1041
Type or Name of Exempt Organization		Employer identification number
print LACORDEMY For Lea	amina	186.0850124
Number stress and rook or suite no if a P.O. b.	אין איני אין אין אין אין אין אין אין אין אין אי	
1018 East Saha	ua Avenue	Suite D
TOTAL TOTAL	r a foreign address, see instructions	
Las Vegas NV	S9 104 -221	8
Check type of return to be filed (file a separate application	on for words courns	<i></i>
		57 .
	rporation) = 401(a) or 408(a) trust)	Form 4720
	st other than above)	3 Form 5227 □ Form 6069
Form 960 PF Form 1041 A	at third than above)	☐ Form 8870
• If the organization does not have an office or place of bi		
If this escala Group Return, enter the organization's force		
for the whole group check this box > If it is for pa-		
name, and EINs of all members the extension will cover	it of the group thete his tox	(M) and arrach a list with the
1 - Frequest an automatic 3 month to month for 990-	T corporation: Automiton of tur	MILLIANTE TO MANAGE THE MANAGE TH
to life the Exempt organization return for the organiza-	store nurred above. The extension	the for the constitution and the for
► Uz calendar year 20¢2_or	the can also the can range	15 for the organization's results for
► C) tax year beginning	20 and ending	10
- 27 to yeth is graining	20 and channy	20
2 If this tax year is for less than 12 months, check reas	on 🚍 Initial return 😅 Final re	turn 🗀 Change in accounting period
3a If this application is for Form 990 BL 990 PF 990 T	E 4720 or 6069 onter the testal	ive tax less any
nonrefundable credits. See instructions	1, 4720 of 6000 Chief the Commi	\$
b If this application is for Form 990 PF or 990 T enter a	any refundable credes and esturat	od tay payments
made include any prior year overpayment allowed as	a crecht	\$
c Balance Due Subtract line 3b from line 3a Include y		commend dupou a
with FTD coupon or, if required by using EFTPS instructions	(Ekectronic Federal Tax Paymer	it System) See
Sinnatus	re and Verification	
Under presence, of payable I declate that I have examined this form unlikely	ng accompanying servideles and striumous	and to the best of my knowledge see belief
in the correct and complete and that I am authorized to prepare his ful	aw .	
J .	Execution	
Superfire Teach Usich	me Desertas	Date \$ 5-8-03
For Paperwork Reduction Act Notice, see Instruction	Cat No 2/916D	Forn. 8868 (12 2000)

Fram 8868 (12 a	000)	Page Z
• If you are	iling for an Additional (not automatic) 3-Month Extension, complete	only Part II and check this box
Note Only c	omplete Part II if you have already been granted an automatic 3-month	extension on a previously filed Form 8868
	iling for an Automatic 3-Month Extension, complete only Part I (on pa	
Part II	Additional (not automatic) 3-Month Extension of Time—Must	File Original and One Copy
Type or	Name of Exempt Organization	Employer identification number
print	Academy For Learning	186.0850129
File by the	Number street and room or suite no If a P.O. box see instructions	For IRS use only
extended due date for	1018 & Sahara Ave #D	<u> </u>
tung the ceturn See	City town or post office, state and ZIP code, For a foreign address, see instructions	
instructions	has vegas NV 89104-3218	
Check type	of return to be filed (File a separate application for each return)	
Form 990	B. ["]	orm 1041-A
STOP Do no	t complete Part II if you were not already granted an automatic 3-month	extension on a previously filed Form 8868
• If the orga	nization does not have an office or place of business in the United State	es, check this box .
	a Group Return, enter the organization's four digit Group Exemption Ni	
for the whol	group, check this box 🕨 📋 If it is for part of the group, check this	s box > 🖪 and attach a list with the
	INs of all members the extension is for	
4 Freque	at an additional 3-month extension of time until Nov. 15	, 20 <i>0</i> 3
	endar year⊘>, or other tax year beginning , 20	and ending , 20
6 If this to	tx year is for less than 12 months, check reason 📮 Initial return 📮	Final return Change in accounting period
7 State in	detail why you need the extension, Adolitional H	ime is heeded
	for review by accounta	nts " legal
-	Counsel	
	pplication is for Form 990-BL, 990 PF, 990 T, 4720, or 6069, enter the	e tentative tax, less any
b if this a	pplication is for Form 990-PF, 990 T, 4720, or 6069, enter any refundab	le credits and estimated
tax pay	ments made. Include any prior year overpayment allowed as a creditively with Form 8868.	
-	Due Subtract line 8b from line 8a Include your payment with this form	o or it roduled doposit
with Fi	D coupon or if required, by using EFTPS (Electronic Federal Tax	Payment System) See
instruct	ons	\$
	Signature and Verification	
Under panalties	of perjury. If declare that I have examined this form Including accompanying schedules and sand complete, and that I am authorized to prepare this form.	stati ments, and to the best of my knowledge and belief
KITADA COMCC		
	I , execu	deer
Signature >	Leavey yearly Title Direc	ten Bar > 8-9-03
		the IRS
☐ We have	approved this application. Please attach this form to the organization's return	
date of t	not approved this application. However, we have granted a 10-day grace period the organization's return (including any prior extensions). This grace period is consinered to be made on a timely return. Please attach this form to the organization.	idered to be a valid extension of time for elections.
☐ We have	not approved this application. After considering the reasons stated in item 7, we ere not granting a 10-day grace period.	
	iot consider this application because it was filed after the due date of the return	for which an extension was requested
Other		
	Ву	
Director		Date
returned to a	niing Address — Enter the address if you want the copy of this applica in address different than the one entered above	tion for an additional 3 month extension
	Name	
Type or print	Number and street (include suite, room, or apt. no.) Or a PO box number	
-	City or town, province or state, and country (including postal or ZIP code)	