

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

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

OMB No 1545-0047

2004Open to Public
Inspection**A For the 2004 calendar year, or tax year beginning**

, and ending

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**MOJAVE ACADEMY, INC**

Number and street (or P O box if mail is not delivered to street address)

Room/suite

PO BOX 919

City or town, state or country, and ZIP + 4

DATIL**NM 87821****D Employer identification no.****33-0891385****E Telephone number****505-772-5283****F Accounting method:**☒ Cash ☐ Accrual ☐ Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

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? ☐ Yes ☐ No

(If "No," att a list See instr)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I Group Exemption Number****M Check** ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)**G Website:** ▶ **N/A****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.****L Gross receipts** Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **366,605****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 18 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	24,480		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (cash \$ 12,079 noncash \$ 12,401)	1d	24,480		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	342,125		
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4			
	5	Dividends and interest from securities	5			
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe)	7				
Expenses	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
	b	Less: cost or other basis and sales expenses	8a			
	c	Gain or (loss) (attach schedule)	8b			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
	9	Special events (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including contributions reported on line 1c) of	9a			
	b	Less: direct expenses (attach schedule)	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)				
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
	11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	366,605			
Assets	13	Program services (from line 44, column (B))	13	301,734		
	14	Management and general (from line 44, column (C))	14	59,984		
	15	Fundraising (from line 44, column (D))	15	3,713		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	365,431		
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	1,174		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	847,486		
	20	Other changes in net assets or fund balances (attach explanation)	20			
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	848,660		

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

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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 page 22 of the instructions.)

Do not include amounts reported on line
6b, 8b, 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 \$ _____ non-cash \$ _____)	22			
23 Specific assistance to individuals	23			
24 Benefits paid to or for members	24			
25 Compensation of officers, directors, etc.	25 17,724	10,365	7,359	
26 Other salaries and wages	26 35,841	16,467	19,374	
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31 1,156		1,156	
32 Legal fees	32 536		536	
33 Supplies	33 5,650	4,418	1,219	13
34 Telephone	34			
35 Postage and shipping	35 1,531	1,531		
36 Occupancy	36 55,533	55,533		
37 Equipment rental and maintenance	37 23,060	23,060		
38 Printing and publications	38 34,139	6,521	27,618	
39 Travel	39			
40 Conferences, conventions, and meetings	40 306	306		
41 Interest	41 50,988	50,988		
42 Depreciation, depletion, etc. (attach schedule)	42 58,540	58,540		
43 Other expenses not covered above (itemize): a	43a			
b SEE STATEMENT 1	43b 80,427	74,005	2,722	3,700
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 365,431	301,734	59,984	3,713

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 page 25 of the instructions.)

What is the organization's primary exempt purpose?

▶ **EDUCATION**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) & (4) orgs. & 4947(a)(1) trusts, but optional for others.)**a SEE STATEMENT 2**(Grants and allocations \$ _____) **301,734****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)▶ **301,734**

Part IV Balance Sheets (See page 25 of the instructions.)

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
45	Cash-non-interest-bearing	132,349	45	111,050
46	Savings and temporary cash investments		46	
47a	Accounts receivable	1,573		
b	Less: allowance for doubtful accounts		47c	1,573
		30,305		
48a	Pledges receivable	176,000		
b	Less: allowance for doubtful accounts		48c	176,000
		177,000		
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less: allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges		53	
54	Investments-securities SEE STATEMENT 3 <input type="checkbox"/> Cost <input type="checkbox"/> FMV	5,000	54	
55a	Investments-land, buildings, and equipment: basis			
b	Less: accumulated depreciation (attach schedule)		55c	
56	Investments-other (attach schedule)		56	
57a	Land, buildings, and equipment: basis	1,401,241		
b	Less: accumulated depreciation (attach schedule)			
		210,349	57c	1,190,892
58	Other assets (describe SEE STATEMENT 4)	2,344	58	700
59	Total assets (add lines 45 through 58) (must equal line 74)	1,570,770	59	1,480,215
60	Accounts payable and accrued expenses	6,255	60	1,350
61	Grants payable		61	
62	Deferred revenue		62	
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule) SEE WORKSHEET	562,286	64b	561,162
65	Other liabilities (describe SEE STATEMENT 5)	154,743	65	69,043
66	Total liabilities (add lines 60 through 65)	723,284	66	631,555
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
67	Unrestricted	847,486	67	848,660
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		72	
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)	847,486	73	848,660
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	1,570,770	74	1,480,215

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

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MOJAVE ACADEMY, INC

33-0891385

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Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements ▶	a	366,605
b	Amounts included on line a but not on line 12, Form 990:		
(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	
c	Line a minus line b ▶	c	366,605
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	\$		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	366,605

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

a	Total expenses and losses per audited financial statements ▶	a	365,431
b	Amounts included on line a but not on line 17, Form 990:		
(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	
c	Line a minus line b ▶	c	365,431
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	\$		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	365,431

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
CHARLES PRENNER PO BOX 565 DATIL NM 87821	PRESIDENT	0	0	0
LOUISE MEYER PO BOX 919 DATIL NM 87821	VICE-PRESIDE	2,915	0	0
CHERI HALL PO BOX 919 DATIL NM 87821	TREASURER	14,807	0	0
JOHN VASKO 9125 COPPER AVE ALBUQUERQU 87123	DIRECTOR	0	0	0
MARTIN GREEN 30 CROSS ST. BOGOTA, NJ 07603	DIRECTOR	0	0	0
JOAN VASKO 10509 GRIFFITH P ALBUQUERQU 87123	DIRECTOR	0	0	0
JOKE REEDER 45450 TWINLAKES NEWBERRY S 92365	DIRECTOR	0	0	0
JOANNE CALI PO BOX 565 DATIL NM 87821	SEC.	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?
If "Yes," attach schedule-see page 28 of the instructions.

▶ ☐ Yes ☒ No

Part VI Other Information (See page 28 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	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.	77	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	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?	80a	X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a	
b	Did the organization file Form 1120-POL for this year?	81b	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?	82a	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.)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A 84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	N/A 85a	
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.	N/A 85b	
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?	N/A 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?	N/A 85h	
86	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	
87	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 NONE		
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90b	11
91	The books are in care of <input type="checkbox"/> Telephone no. <input type="checkbox"/> Located at <input type="checkbox"/> ZIP + 4 <input type="checkbox"/>		
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	<input type="checkbox"/>

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by sec. 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, BOARD, & SEMINAR FEES					342,125
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					
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	342,125
105 Total (add line 104, columns (B), (D), and (E))					342,125

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 page 34 of the instructions.)

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	PROGRAM SERVICE REVENUE IS PAYMENT FOR TUITION AND MATERIALS FOR EDUCATING THE STUDENTS.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (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

Signature of officer

CHARLES J. PRANNER, PRESIDENT

Date

8/12/05

Type or print name and title

Paid
Preparer's
Use OnlyPreparer's
signatureFirm's name (or yours
if self-employed),
address, and ZIP + 4GREENBERG AND JACKSON CPAS
2441 HONOLULU AVENUE SUITE 120
MONTROSE, CA 91020-1864Date
8/02/05Check if
self-
employed ☐Preparer's SSN or PTIN
(See Gen. Instr. W)
P00057624EIN
Phone
no

818-249-3230

SCHEDULE A
(Form 990 or 990-EZ)**Organization Exempt Under Section 501(c)(3)**(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2004Department of the Treasury
Internal Revenue Service**Supplementary Information-(See separate instructions.)**▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

MOJAVE ACADEMY, INC**33-0891385****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 empl ben plans & deferred comp	(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 ▶		

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

Schedule A (Form 990 or 990-EZ) 2004

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.)

1 X

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.

- 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?

2a X

b Lending of money or other extension of credit?

2b X

c Furnishing of goods, services, or facilities?

SEE STATEMENT 6

2c X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990

SEE STATEMENT 7

2d X

e Transfer of any part of its income or assets?

2e X

- 3a** Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)

3a X

b Do you have a section 403(b) annuity plan for your employees?

3b X

- 4a** Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?

4a X

b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?

4b X

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 5 of the instructions.)

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?	29 X	
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 X	
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? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ADVERTISEMENTS SET FORTH THE NONDISCRIMINATION POLICY	31 X	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d X	
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?	33a	X
b Admissions policies?	33b	X
c Employment of faculty or administrative staff?	33c	X
d Scholarships or other financial assistance?	33d	X
e Educational policies?	33e	X
f Use of facilities?	33f	X
g Athletic programs?	33g	X
h Other extracurricular activities?	33h	X
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?	34a	X
b Has the organization's right to such aid ever been revoked or suspended?	34b	X
If you answered "Yes" to either 34a or b, please explain using an attached statement.		
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	35 X	

Part VI-A**Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768) **N/A**Check **a** ☐ if the organization belongs to an affiliated group. Check **b** ☐ if you checked "a" and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount. Enter the amount from the following table-		
If the amount on line 40 is-		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is-		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B**Lobbying Activity by Nonelecting Public Charities**(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt 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** Rallies, 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.

Yes	No	Amount

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

(1) **Cash**

(ii) Other assets

b Other transactions:

(i) Sales or exchanges of assets with a noncharitable exempt organization

(II) Purchases of assets from a noncharitable exempt organization

(III) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

► ☐ Yes ☒ No

b If "Yes," complete the following schedule:

[illegible]

Depreciation and Amortization

OMB No 1545-0172

Form **4562**

(Including Information on Listed Property)

2004Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

▶ Attach to your tax return.

Attachment
Sequence No. **67**

Name(s) shown on return

MOJAVE ACADEMY, INCIdentifying number
33-0891385

Business or activity to which this form relates

INDIRECT DEPRECIATION**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See page 2 of the instructions for a higher limit for certain businesses	1	102,000
2	Total cost of section 179 property placed in service (see page 3 of the instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	410,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 3 of the instructions	5	
(a) Description of property		(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2003 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2005. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)**

14	Special depreciation allowance for qualified prop (other than listed prop) placed in service during the tax year (see pg 3 of the instructions)	14	9,704
15	Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16	Other depreciation (including ACRS) (see page 4 of the instructions)	16	6,939

Part III MACRS Depreciation (Do not include listed property.) (See page 5 of the instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2004	17	40,547
18	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 2004 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		200	5.0	HY	200DB	40
c 7-year property		1,788	7.0	HY	200DB	255
d 10-year property						
e 15-year property						
f 20-year property		7,717	20.0	HY	150DB	289
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property	7/31/04	6,251	39 yrs.	MM	S/L	73
				MM	S/L	

Section C-Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (see page 8 of the instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr	22	57,847
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2004)

MOJAVE ACADEMY, INC

33-0891385

Form 4562 (2004)

Page 2

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A-Depreciation and Other Information** (Caution: See page 9 of the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?				Yes	No	24b If "Yes," is the evidence written?				Yes	No
(a) Type of prop (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see page 8 of the instructions)								25			
26 Property used more than 50% in a qualified business use (see page 8 of the instructions):											
		%									
		%									
27 Property used 50% or less in a qualified business use (see page 8 of the instructions):											
		%				S/L-					
		%				S/L-					
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28			
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29			

Section B-Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

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

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

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see page 10 of the instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See page 10 of the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See page 10 of the instructions.)		

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

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2004 tax year (see page 11 of the instructions):					
43 Amortization of costs that began before your 2004 tax year				43	693
44 Total. Add amounts in column (f). See page 12 of the instructions for where to report				44	693

Forms
990 / 990-PF**Mortgages and Other Notes Payable****2004**

For calendar year 2004, or tax year beginning

, and ending

Name

Employer Identification Number

MOJAVE ACADEMY, INC**33-0891385****FORM 990, PART IV, LINE 64B - ADDITIONAL INFORMATION**

Name of lender

Relationship to disqualified person

(1)	JOKE REEDER	
(2)	JOHN VASKO	
(3)	JOHN VASKO	
(4)	CHUCK PRENNER	
(5)	KENT STRYKER	
(6)	CHUCK PRENNER	
(7)	CHUCK PRENNER	
(8)	BANK OF AMERICA	
(9)	JEFF & JACKIE COLSON	
(10)	BANK OF AMERICA	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 54,061			WHEN FUNDS ARE AVAILABLE	
(2) 350,000	6/29/00	6/29/02	BALLOON PAYMENT	8.500
(3) 80,000	7/27/01	11/25/04	BALLON PAYMENT	
(4) 5,000	6/14/02		WHEN FUNDS ARE AVAIL.	
(5) 33,333	4/17/02	5/01/04	\$1250 PER MONTH	
(6) 200,000	9/01/03		WHEN AVAILABLE	
(7) 6,000	5/15/03		WHEN FUNDS ARE AVAILABLE	
(8) 34,000	11/25/04		INTEREST ONLY	8.400
(9) 8,700	11/25/04		WHEN FUNDS ARE AVAILABLE	
(10) 336,797	10/01/04	9/30/19	\$3,104.14	7.253

Security provided by borrower

Purpose of loan

(1)		TO MEET CASH NEEDS OF SCHOOL
(2)		PURCHASE LAND FOR SCHOOL
(3)		CONSTRUCTION
(4)		BUILDING LOAN ADDITIONAL 6000. IN 04
(5)		
(6)	LAND	REFINANCE LAND AND BUILDINGS
(7)		CLASSROOM WELL
(8)		REFINANCE EXISTING CREDIT LOAN
(9)		TO MEET CASH NEEDS OF SCHOOL
(10)		REFINANCE BALLON LOANS

Consideration furnished by lender

Balance due at
beginning of yearBalance due at
end of year

(1)	40,376	40,376
(2)	260,411	
(3)	45,499	
(4)	5,000	5,000
(5)	5,000	
(6)	200,000	
(7)	6,000	6,000
(8)		34,000
(9)		8,700
(10)		336,797
Totals	562,286	430,873

Forms
990 / 990-PF**Mortgages and Other Notes Payable****2004**

For calendar year 2004, or tax year beginning , and ending

Name

Employer Identification Number

MOJAVE ACADEMY, INC**33-0891385****FORM 990, PART IV, LINE 64B - ADDITIONAL INFORMATION**

Name of lender	Relationship to disqualified person
(1) WELLS FARGO	
(2) BANK OF AMERICA - WILDWOOD	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 54,000	3/31/04		INTEREST ONLY	11.000
(2) 117,307	1/02/04	1/01/19	\$1,138/MO	7.751
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1)	PAY-OFF BALLON LOAN
(2)	PAYOFF BALLOON LOAN
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)		12,982
(2)		117,307
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals		130,289

Federal Statements**Statement 1 - Form 990, Part II, Line 43 - Other Functional Expenses**

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
EXPENSES				
STUDENT ALLOWANCES & TRAVEL	1,005	1,005		
INDEPENDENT CONTRACTORS	4,070	370		3,700
BANK CHARGES	250		250	
MERCHANT FEES	2,472		2,472	
STUDENT MEDICAL & MISC	113	113		
STUDY MATERIALS / BOOKS	9,620	9,620		
ANIMAL FEED	7,046	7,046		
CLASS ROOM SUPPLIES	6,942	6,942		
FIELD TRIPS	5,525	5,525		
STUDENT / TEACHER FOOD	43,384	43,384		
TOTAL	\$ 80,427	\$ 74,005	\$ 2,722	\$ 3,700

Statement 2 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

THE SCHOOL.

WE DELIVER THREE PROGRAMS - AN INITIAL PROGRAM CALLED LIFE BASICS, WHERE CHILDREN ARE TAUGHT MORALS AND LIVING SKILLS. OUR SECOND PROGRAM IS CALLED EDUCATIONAL REPAIR. WE COMPLETELY HANDLE A STUDENT'S PAST FAILURES IN HIS EDUCATION. THE STUDENT IS TAUGHT TO BE AN INDEPENDENT STUDENT WITH FULL STUDY AND RESEARCH SKILLS. IN THE THIRD PROGRAM, ACADEMICS, STUDENTS ARE CONSULTED ABOUT THEIR GOALS IN LIFE. THE STUDENTS ARE GIVEN TAILORED PROGRAMS DESIGNED TO HELP THEM ACHIEVE THOSE GOALS.

WE HAD MANY SUCCESSFUL GRADUATES AND SATISFIED PARENTS THIS YEAR. WE RAN A VERY ENJOYABLE AND ADVENTURE FILLED SUMMER PROGRAM IN JULY AND AUGUST. THERE WAS A WHITE WATER RAFTING / CAMPING TRIP IN JULY AND A CAMPING TRIP TO THE GRAND CANYON IN AUGUST. ALSO, WE MADE SEVERAL TRIPS TO THE "CATWALK" A FAMOUS HISTORICAL SPOT IN NM WHICH INCLUDES WATERFALL / SWIMMING HOLE THAT THE STUDENTS THOROUGHLY ENJOYED.

Federal Statements**Statement 3 - Form 990, Part IV, Line 54 - Investments in Securities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>
CORPORATE STOCK	5,000		
	<u>5,000</u>		

Statement 4 - Form 990, Part IV, Line 58 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
EMPLOYEE LOANS	\$ 1,919	\$ 700
SHORT TERM LOANS	425	
TOTAL	<u>\$ 2,344</u>	<u>\$ 700</u>

Statement 5 - Form 990, Part IV, Line 65 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ADVANCE PAYMENTS FROM STUDENTS	\$ 16,556	\$
MEDICAL EXPENSES - DEPOSITS	2,000	2,333
ADVANCE PAYMENTS ON LAND	60,000	60,000
STUDENT DEPOSITS	70,336	
PAYROLL TAXES & SALARY	5,851	5,963
CREDIT CARD		747
TOTAL	<u>\$ 154,743</u>	<u>\$ 69,043</u>

Statement 6 - Schedule A, Part III, Line 2c - Furnishing Goods, Services, or Facilities

STAFF RECEIVE HOUSING AND TUITION AT NO COST.

**Statement 7 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of
Exp**

THREE BOARD MEMBERS WERE PAID COMPENSATION.

MOJAVE MOJAVE ACADEMY, INC

8/2/2005 2:50 PM

33-0891385

Federal Statements

FYE: 12/31/2004

Schedule A, Part V, Line 31 - Publication of Nondiscriminatory Policy

ADVERTISEMENTS SET FORTH THE NONDISCRIMINATION POLICY

33-0891385

Federal Asset Report

FYE: 12/31/2004

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv Meth	Prior	Current
5-year GDS Property:										
67	COMPUTER - NOTEBOOKS	12/31/04	400			X	200	5 HY 200DB	0	240
			<u>400</u>				<u>200</u>		<u>0</u>	<u>240</u>
7-year GDS Property:										
63	BASKETBALL HOOP	3/05/04	600			X	300	7 HY 200DB	0	343
64	FIREPLACE	11/23/04	751			X	376	7 HY 200DB	0	429
65	WASHER / DRYER	12/10/04	370			X	185	7 HY 200DB	0	211
66	HOT BUFFETT	12/31/04	1,680			X	840	7 HY 200DB	0	960
69	EQUIPMENT	12/04/04	174			X	87	7 HY 200DB	0	99
			<u>3,575</u>				<u>1,788</u>		<u>0</u>	<u>2,042</u>
20-year GDS Property:										
62	water line	8/20/04	15,434			X	7,717	20 HY 150DB	0	8,006
			<u>15,434</u>				<u>7,717</u>		<u>0</u>	<u>8,006</u>
Non-Residential Real Property:										
68	DINING HALL - UPGRADE	7/31/04	6,251				6,251	39 MMS/L	0	73
			<u>6,251</u>				<u>6,251</u>		<u>0</u>	<u>73</u>
Prior MACRS:										
1	COMPUTER	6/15/00	1,600				1,600	5 HY 200DB	1,324	184
7	TRUCK	6/15/00	1,500				1,500	5 HY 200DB	1,241	173
8	SNOW PLOW	6/01/00	2,456				2,456	7 HY 200DB	1,689	219
9	TENTS	5/31/01	1,573				1,573	7 HY 200DB	885	197
10	KITCHEN EQUIP	7/31/01	2,000				2,000	7 HY 200DB	1,125	250
11	COMPUTER	7/31/01	1,500				1,500	7 HY 200DB	844	187
12	WASHER	8/03/01	319				319	7 HY 200DB	179	40
13	TENTS	9/01/01	1,398				1,398	7 HY 200DB	787	174
14	WASHER	9/10/01	375				375	7 HY 200DB	211	47
15	SHED	9/10/01	209				209	7 HY 200DB	117	27
16	PRINTER	9/10/01	110				110	7 HY 200DB	62	14
17	DRYER	9/10/01	259				259	7 HY 200DB	146	32
18	BUILDING IMPROVEMENTS	11/16/01	44,768				44,768	39 MMS/L	2,439	1,148
19	TRAILER	4/28/01	11,040				11,040	39 MMS/L	767	283
20	TRAILER	5/04/01	11,250				11,250	39 MMS/L	757	289
21	TRAILER	5/11/01	3,750				3,750	27 MMS/L	358	136
22	DORM ROOMS	5/25/01	75,000				75,000	27 MMS/L	7,159	2,727
23	DORM UNITS	5/31/01	82,927				82,927	27 MMS/L	7,916	3,015
24	DORM UNITS	8/31/01	80,109				80,109	27 MMS/L	6,919	2,913
25	WATER TRANSPORT, WELLS, SEPTIC	6/15/01	148,044				148,044	10 HY 200DB	62,771	17,054
28	FORD 1991	7/31/01	3,500				3,500	5 HY 200DB	2,492	403
29	FORD 1993	7/31/01	3,000				3,000	5 HY 200DB	2,136	346
30	FORD 1971	7/31/01	2,500				2,500	5 HY 200DB	1,780	288
32	KITCHEN OVEN	7/02/02	1,500			X	1,050	7 HY 200DB	857	184
33	DRYER - KIDS BUILDING	1/26/02	180			X	126	7 HY 200DB	103	22
34	TRAILER DOUBLE WIDE	6/12/02	5,043				5,043	27 MMS/L	283	183
35	DORM	3/29/02	2,838				2,838	27 MMS/L	185	103
36	WELL HOUSE	9/15/02	22,813				22,813	39 MMS/L	756	585
37	SKATE PARK	6/14/02	4,800			X	3,360	15 HY 150DB	1,927	287
38	KITCHEN	8/25/02	7,419				7,419	39 MMS/L	262	190
39	CLASSROOM	10/18/02	325				325	39 MMS/L	10	8
45	DOUBLE WIDE - CHURCH ON THE RO	5/02/02	12,000				12,000	39 MMS/L	500	308
46	DOUBLE WIDE	12/10/02	2,693				2,693	39 MMS/L	72	69
47	TRAILER PAD	5/02/02	3,794				3,794	27 MMS/L	224	138
48	SKATE PARK	6/08/02	500			X	350	15 HY 150DB	201	30
49	CLASSROOM	1/01/03	30,925				30,925	39 MMS/L	760	793
50	MOBILE BUILDING - WILDWOOD	8/15/03	72,000				72,000	39 MMS/L	692	1,846
51	WORKSHED - WILDWOOD	8/15/03	28,000				28,000	39 MMS/L	269	718
52	LAND IMP. FENCE, SHEDS WILDWOOD	8/15/03	25,000			X	12,500	15 HY 150DB	13,125	1,188
53	DORM IMPROVEMENTS - JEFF	12/21/03	897			X	449	7 HY 200DB	513	109
54	FORD AEROSTAR WHITE	8/15/03	3,000			X	1,500	5 HY 200DB	1,800	480

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Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	Per Conv	Meth	Prior	Current
55	TRUCK TRAILER	5/27/03	1,000			X	500	5	HY 200DB	600	160
56	LAND IMPROVEMENTS	7/17/03	16,703			X	8,352	15	HY 150DB	8,769	793
57	BUILDINGS - WILDWOOD	8/15/03	42,000				42,000	39	MM S/L	404	1,077
58	FURNITURE - BUNK BEDS	5/09/03	2,678			X	1,339	7	HY 200DB	1,530	328
59	COMPUTER EQUIP	12/16/03	1,539			X	769	5	HY 200DB	923	247
60	FIRE SYSTEM	2/03/03	2,492			X	1,744	7	HY 200DB	997	427
61	TRAILER - CHURCH ON ROCK	9/09/03	5,025				5,025	39	MM S/L	38	128
			<u>774,351</u>				<u>746,101</u>			<u>139,904</u>	<u>40,547</u>
Other Depreciation:											
4	LAND	6/15/00	485,500				485,500	0	-- Land	0	0
5	LAND IMPROVEMENTS	6/15/00	28,406				28,406	0	-- Land	0	0
40	WELL	7/03/02	66,807				66,807	10	MO S/L	10,021	6,681
41	STALLS	10/14/02	682				682	10	MO S/L	85	69
42	ROAD GRADING	11/01/02	9,450				9,450	50	MO S/L	221	189
	Total Other Depreciation		<u>590,845</u>				<u>590,845</u>			<u>10,327</u>	<u>6,939</u>
	Total ACRS and Other Depreciation		<u>590,845</u>				<u>590,845</u>			<u>10,327</u>	<u>6,939</u>
Amortization:											
27	MAILING LIST	1/01/01	1,650				1,650	15	MO Amort	330	110
31	GOODWILL	7/01/01	5,000				5,000	15	MO Amort	833	334
44	LOAN FEES	5/02/02	3,735				3,735	15	MO Amort	415	249
			<u>10,385</u>				<u>10,385</u>			<u>1,578</u>	<u>693</u>
	Grand Totals		<u>1,401,241</u>				<u>1,363,287</u>			<u>151,809</u>	<u>58,540</u>
	Less: Dispositions		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>1,401,241</u>				<u>1,363,287</u>			<u>151,809</u>	<u>58,540</u>