50m 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)

2009

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

Open to Public Inspection

<u>A</u>	ror ti	ne 2009 calendar year, or tax year beginning JUL I, 2009 and ending	<u> JUN 30, 201</u>	0
В	Check i	Please C Name of organization	D Employer ident	ification number
_	—)Add	use of CHRISTIAN EDUCATION, INC.		
Ļ	ichar	Print or DBA EZELL HARDING CHRISTIAN SCHOOL		
Ļ	Nam char	uge Ucing Business As		7241505
<u> </u>	retur	n [See Number and street (or P.U. box if mail is not delivered to street address) Room/s	•	
Ļ	Tem	Instruc- 5/4 BELL ROAD	(61	<u>5)367-0532</u>
Ŀ	retur		G Gross receipts \$	5,129,778.
L	Appl tion pend	ANTIOCR, IN 37013	H(a) Is this a group	return
	par	F Name and address of principal officer: JIM MORRIS	for affiliates?	Yes X No
_		P.O. BOX 12, GOODLETTSVILLE, TN 37070-0012	H(b) Are all affiliates i	ncluded? Yes No
		xempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach	a list. (see instructions)
_		ite: ► WWW.EZELLHARDING.COM	H(c) Group exempt	ion number 🕨
		of organization; X Corporation	ear of formation: 1972	M State of legal domicile: TN
P	art i	Summary		
به	1	Briefly describe the organization's mission or most significant activities: CHRISTIA	N EDUCATION	PROVIDED FOR
Activities & Governance	1	THE BENEFIT OF HIGH SCHOOL, MIDDLE SCHOOL, A	ND ELEMENTAR	Y SCHOOL
Ë	2	Check this box if the organization discontinued its operations or disposed of n	nore than 25% of its net	assets.
ð	3			1
9	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	
Sa	5	Total number of employees (Part V, line 2a)	5	
ŧ	6	Total number of volunteers (estimate if necessary)		
5	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7.	
_	Ь	Net unrelated business taxable income from Form 990-T, line 34	71	0.
	}		Prior Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)	192,220	
Š	9	Program service revenue (Part VIII, line 2g)	4,850,802	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,485	
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	403,241	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,448,748	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,440,740	J,143,110.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	· · · · · · · · · · · · · · · · · · ·	
s	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,402,404	3,353,671.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	3,302,303	3,333,011.
Đ.	b	Total fundraising expenses (Part IX, column (D), line 25)		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,186,698	1,983,539.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,589,102	
	19	Revenue less expenses. Subtract line 18 from line 12		
28	_ 	TO HOLD BY A CONTROL BIRD TO HOLD BIRD TO	<140,354	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	
(Ba	21	Total liabilities (Part X, line 16)	4,550,204	
ĘĞ	22	Net assets or fund balances. Subtract line 21 from line 20	681,829. 3,868,375.	
	rt II	Signature Block	3,000,3/3	3,676,138.
		Under penalties of periory. I declare that I have examined this return, including accompanying schedules and statemen	its, and to the best of my knowle	doe and belief it is true correct
		and complete. Declaration of preserve (other than affigures based on all information of which preparer has any knowled	1ge.	
Sigr			1 10/3	29/10
g. -lere		Signature of Officer	Date	
		SAM YINGER, VP FOR FANANCIAL AFFAIRS	-	
		Type or print name and title		
		Preparer's Date,	Check if Prepa	rer's identifying number
aid		signature X MAI K	self- (see ii	nstructions)
. •	arer's	Firm's name (or PAVRITON PAMES & RIMES DATE D	employed	
lse (Only	self-employed). \$5200 MARYLAND WAY STITUE 300	EIN ►	
		BRENTWOOD, TN 37027	Dhans N	'C1E\CC1
/lav	the IF	S discuss this return with the preparer shown above? (see instructions)	i Frione no.	(615)661-7878
<u> </u>		(state in the proparer shows above (see listingtions)		X Yes No

CHRISTIAN EDUCATION, INC.

	rt IV Checklist of Required Schedules 23-724	150	15	<u>P</u>	age :
			_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?				
	If "Yes," complete Schedule A	. 1		X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	: 1	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		\neg		
	public office? If "Yes," complete Schedule C, Part I	. з			X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	. 4			X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		\neg		
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	. 5			
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	- -		· · ·	
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part	1 6			X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,				
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	. 7			X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete				
	Schedule D, Part III	. 8			X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide				
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	. <u>9</u>	╝		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	1			
	If "Yes," complete Schedule D, Part V	. 10	1		<u> </u>
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X		ı		
_	as applicable	. 11	Ц	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,				ş- 3-
_	Part VI.				
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		1		:
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.				
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total				
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		1		i.
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			- 5	
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			- 1	şî.
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		1		
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses				
12	the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X.			1.45	Ş.
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI. XII. and XIII.		1	_	
124	Nation the approximation included in appoint in the state of the state	12	4	X	
IZA					
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		+		
	Did the organization maintain an office, employees, or agents outside of the United States?	13	_	X	77
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	148	+		X
-	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	1	. 1		v
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14t	+	\dashv	<u>X</u>
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	45			v
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15	+	-	<u>_X_</u>
	located outside the United States? If "Yes," complete Schedule F, Part III	145			v
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16	+	\dashv	<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Ī	x
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 '''	+	$\overline{}$	A
	1c and 8a? If "Yes," complete Schedule G, Part II	18			x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u>"</u>	T		<u></u>
	complete Schedule G, Part III	19			x
n	Did the organization operate one or more hospitals? If "You " complete School II U	1	╅		 -

Form **990** (2009)

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Form 990 (2009) DBA_EZELL HARDING
Part IV | Checklist of Required Schedules (continued) DBA EZELL HARDING CHRISTIAN SCHOOL

•			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	 	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	 	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		+- +-	
_	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	_	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		i	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	X	

Page 5

Form 990 (2009) DBA EZELL HARDING CHRISTIAN SCHOOL 23-7241505 Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 1a b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. filed for the calendar year ending with or within the year covered by this return ______ 138 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X <u>3a</u> b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 36 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a b If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7c d If "Yes," indicate the number of Forms 8282 filed during the year _______ 7d Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? X h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ______ | 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders

Form 990 (2009)

b Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

<u>23-7241505</u>

Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

					Yes	No
1a	9	_1a	1	.3	1.00	1.00
b	Enter the number of voting members that are independent	1b		.3		-11
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with a	any other			
	officer, director, trustee, or key employee?			. 2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	supervision		-	
	of officers, directors or trustees, or key employees to a management company or other person?	•		. <u> </u>		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990	was filed?	_4-		-X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?	***************************************	. 5		X
6	Does the organization have members or stockholders?			. 6		X
7a	and the state of t					
	governing body?	•••••	•••••	. 7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons?		. 7b	<u> </u>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			
	by the following:					
a	The governing body?		••••••	. 8a	X	
b	Each committee with authority to act on behalf of the governing body?		•••••••	. <u>8b</u>	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched a	t the			l
C	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		····	. 9	<u> </u>	X
<u>sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)			
40-	Describe appointing how land about the start of the start			_	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		X
D	If "Yes," does the organization have written policies and procedures governing the activities of such	-	-	ľ		
44	and branches to ensure their operations are consistent with those of the organization?			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fill	ing the	form?	11		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		•	12a		X
	to conflicts?			12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes," a	escribe			
	in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		_X
14	Does the organization have a written document retention and destruction policy?		***************************************	14		X
15	Did the process for determining compensation of the following persons include a review and approva	l by inc	ependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	••••••		15a	X	
ь	Other officers or key employees of the organization	••••••		15b	X	
40	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements of the organization invest in a contribute assets to, or participate in a joint venture or similar arrangements.			•		ū.,
	taxable entity during the year?	•••••	***************************************	16a		<u> </u>
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval					7
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the orga	nizatio	n's	Ta i ii		
	exempt status with respect to such arrangements? ion C. Disclosure		······	16b		
	List the states with which a copy of this Form 990 is required to be filed >TN					
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(504(-)	(0)			
	public inspection. Indicate how you make these available. Check all that apply.	(5U1(C)	(3)s only) availabl	e for		
	Own website X Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	nflict c	f interest nelice	and Sa-	naict	
	statements available to the public.	a nact O	i interest policy,	ин ппа	iciai	
	State the name, physical address, and telephone number of the person who possesses the books an	d recor	ds of the organis	ation: 🕨		
	SAM YINGER - 615-366-6052	J . 6001	as or the organiz	auvii. 🏴		
	574 BELL ROAD, ANTIOCH, TN 37013	_				
				Form	990 (2	ZODO1

932006 02-04-10

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)					ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
HARRY R. HIX, JR. DIRECTOR										
BURCH ANDERSON	-	Н	_	-		\vdash	\dashv	0.	0.	0
DIRECTOR								0.	^	
JIM DILLINGHAM				\neg				<u> </u>	0.	0
VICE CHAIRMAN				ļ				0.	0.	0
JUNIOR GRIMES			一				一		0.	0
DIRECTOR			- 1					0.	0.	
DONALD JENKINS							\neg		•	
CHAIRMAN							- 1		ا. ٥ .	0
STEVE K. JOHNSTON										
DIRECTOR								0.	0.	0
SAM LEWIS							I			
DIRECTOR		_	\Box					0.	0.	0
DAVID R. SMITH					- 1]				
DIRECTOR		_	_	_	_	_	_	0.	0.	0
HAROLD G. SPARKS						i	ı			
SECRETARY			_	_	_		_	0.	0.	0
LYNN WILSON			-	-	ĺ		- 1			
DIRECTOR			-	\dashv	4	_		0.	0.	0
KERRY STILES DIRECTOR				- 1		i	- 1		_	
JIM MORRIS		-	\dashv	-	\dashv	-	+	0.	0.	0.
PRESIDENT	40.00				- 1			00 000		_
SAMUEL YINGER	40.00	\dashv	+		+	\dashv	+	90,000.	0.	0
CFO	40.00				-	- 1		85,779.	ا ۸	•
JOHNNY MITCHELL	20.00	-	\dashv	+	\dashv	ᆉ	-	05,119.	0.	0.
DIRECTOR								0.	o.	^
WALTER PRUITT		\dashv	\dashv	\dashv	十	\dashv	\dashv	<u> </u>		0.
DIRECTOR									0.	0.
		\top	\top	\neg	1		\top		- 0.	0.
		T		T	T	T	T			
	1			- 1	- 1				1	

932007 02-04-10

Part VII Section A. Officers, Directors, Tru (A) Name and title	(B) Average hours)) Posi	C) ition			(D) Reportable compensation	(E) Reportable compensation	1		(F) stimat mount	
	per week	individual trustee or director	Institutional trustee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	;	con f org an	other opens form the ganizated rela anizat	r ation ne tion ted
			_				-						
									<u>.</u>				
			-										
	/												
				-		\rfloor							
		_	4		_								
1b Total						<u> </u>		175,779.		0.			0.
Total number of individuals (including but no compensation from the organization	t limited to the	ose i	isted	dab	ove) wh	o re	ceived more than \$100	,000 in reportable				<u></u>
3 Did the organization list any former officer, of line 1a? If "Yes," complete Schedule J for su	ch individual										3	Yes	No X
4 For any individual listed on line 1a, is the sun and related organizations greater than \$150,	000? If "Yes,"	соп	nple	te S	che	dule	J fo	r such individual			4		x
5 Did any person listed on line 1a receive or ac the organization? If "Yes," complete Schedu Section B. Independent Contractors	crue compen le <i>J for such p</i>	satio erso	ח זרי מי	om 8	any	unre	late	d organization for servi	ces rendered to		5		X
Complete this table for your five highest corr the organization. NONE	pensated ind	epen	nden	t co	ntra	ctor	s th	at received more than \$	\$100,000 of comp	ensa	ation f	rom	
(A) Name and business a	ddress				-			(B) Description of se	ervices	С	(C omper		n
		_					+						
	_						+	<u></u>					
							+						
					<u> </u>		\dagger						
2 Total number of independent contractors (inc \$100,000 in compensation from the organiza	luding but no	t limi	ited	to th	hose	e list	ed a	bove) who received mo	re than		- 57	11	

CHRISTIAN EDUCATION, INC. Form 990 (2009) DBA EZELL HARDING CHRISTIAN SCHOOL 23-7241505 Page 9 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512 revenue revenue 513, or 514 1 a Federated campaigns Contributions, gifts, grants and other similar amounts b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f -All other contributions, gifts, grants, and similar amounts not included above 129,339. 9 Noncash contributions included in lines 1a-1f. \$ h Total, Add lines 1a-1f 129,339 **Business Code** 2 a E.S. TUITION 611600 718,086.1 718,086, b H.S. TUITION 611600 630,488.1,630,488. c M.S. TUITION 309,795,1,309,795 611600 d E.S. BOOK RENTAL 611600 55,600. 55,600. e H.S. BOOK RENTAL 611600 52,400. 52,400. 611600 <140,43<u>7.><140,437.</u> f All other program service revenue g Total, Add lines 2a-2f. 4,625,932 Investment income (including dividends, interest, and other similar amounts) 2,603 2,603. Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a All other revenue 611600 371,904 371,904 e Total. Add lines 11a-11d 371,904.

Total revenue. See instructions.

,129,778.4,625,932,

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	lete column (A) but are	e not required to compl	ete columns (B), (C), ar	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	• · · · · · · · · · · · · · · · · · · ·	=		
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	185 886		485 550	
_	trustees, and key employees	175,779.		175,779.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons (as defined under section 4950(1)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,778,437.	2,585,557.	192,880.	
8	Pension plan contributions (include section 401(k)	21110, 2310	2,303,337.	192,000.	
	and section 403(b) employer contributions)				
9	Other employee benefits	178,405.		178,405.	
10	Payroll taxes	221,050.	187,762.	33,288.	
11	Fees for services (non-employees):				
а	Management				
b	Legal	200.		200.	
c		14,900.		14,900.	
đ	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	32,495.		32,495.	
13	Office expenses	38,711.	24,935.	13,776.	
14	Information technology				
15	Royalties	644 650		17.01	
16	Occupancy	644,678.	629,618.	15,060.	
17	Travel	105.	105.		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings	7,598.	7 500		
21	Payments to affiliates	1,536.	7,598.		
22	Depreciation, depletion, and amortization	429,670.	429,670.		
<u></u> 23	Insurance	37,502.	425,070.	37,502.	
24	Other expenses. Itemize expenses not covered			37,302.	
	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)				
а	SCHOLARSHIPS AND DISCOU	288,538.	****	288,538.	
b	PRINTING & PUBLICATIONS	72,183.		72,183.	
C	DATA PROCESSING	56,758.		56,758.	
d	OTHER	43,995.		43,995.	
e	DEVELOPMENT	16,938.		16,938.	
f	All other expenses	299,268.	289,983.	9,285.	
<u> 25</u>	Total functional expenses. Add lines 1 through 24f	5,337,210.	4,155,228.	1,181,982.	0.
26	Joint costs. Check here if following	1			
	SOP 98-2. Complete this line only if the organization		Í		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

932010 02-04-10

Form 990 (2009)

Pa	rt X	Balance Sheet	,				
			-		(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		***************************************	291,431.	1	640,801.
	2	Savings and temporary cash investments			473,144.	2	73,912.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			6,434.	4	11,455.
	5	Receivables from current and former officers, di	rectors,	trustees, key		1	
		employees, and highest compensated employee	es. Con	plete Part II			
		of Schedule L				5	
	6		defined	under section			
		4958(f)(1)) and persons described in section 495					
	}	Part II of Schedule L		6			
S	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			118,026.	8	112,654.
ĕ	9	Prepaid expenses and deferred charges				9	
	10a						
		basis. Complete Part VI of Schedule D	10a	11,726,421.			
	b	Less: accumulated depreciation			3,511,672.	10c	3,296,578.
	11	Investments - publicly traded securities			103,492.		120,050.
	12	Investments - other securities. See Part IV, line 1			7,621.		7,621.
	13	Investments - program-related. See Part IV, line 1				13	. 7.5.5.
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	38,384.	15	54,078.		
	16	Total assets. Add lines 1 through 15 (must equa			4,550,204.		4,317,149.
	17	Accounts payable and accrued expenses			386,815.		338,969.
	18	Grants payable		18			
	19	Deferred revenue			127,805.		147,233.
	20	Tax-exempt bond liabilities				20	
Ŋ	21	Escrow or custodial account liability. Complete F				21	
Liabilities	22	Payables to current and former officers, directors					
abi	ļ	highest compensated employees, and disqualifie					
3	ĺ	of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ted thir	d parties	144,041.	23	115,083.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities. Complete Part X of Schedule D			23,168.	25	39,726.
	26_	Total liabilities. Add lines 17 through 25			681,829.		641,011.
		Organizations that follow SFAS 117, check he				45	
S		lines 27 through 29, and lines 33 and 34.		·			
E C	27	Unrestricted net assets			3,783,023.	27	3,590,786.
3ala	28	Temporarily restricted net assets	•••••		5,028.		5,028.
d E	29			·····	80,324.		80,324.
Fur		Organizations that do not follow SFAS 117, ch	eck he	re 🕨 🔲 and			
5		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds			·	30	100
155	31	Paid-in or capital surplus, or land, building, or equ	uipmen	t fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc				32	
Z	33	Total net assets or fund balances			3,868,375.	33	3,676,138.
	34	Total liabilities and net assets/fund balances			4,550,204.		4,317,149.

Form **990** (2009)

Form 990 (2009)

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

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Name of the organization

CHRISTIAN EDUCATION, INC.

23-7241505 DBA EZELL HARDING CHRISTIAN SCHOOL

Open to Public Inspection Employer identification number

Par	ŧΙ	Reason	for Public Char	ity Status (All organi	zations mu	ist comple	te this par	t.) See ins	tructions.		
he o	rgan	ization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)			
1 [A church, co	nvention of churche	s, or association of chu	rches desc	ribed in se	ction 170)(b)(1)(A)(i).		
2	$\overline{\mathbf{x}}$	A school des	scribed in section 17	70(b)(1)(A)(ii). (Attach So	chedule E.))					
з [-			ital service organization			170(b)(1)	(A)(iii). —	·		
آه	\exists	•	•	operated in conjunction					(b)(1)(A)(ii	i), Enter ti	he hospital's name.
		city, and stat		•		•					•
5	\neg	•		benefit of a college or u	niversity o	wned or or	perated by	a govern	mental uni	t describe	ed in
-		=	(b)(1)(A)(iv). (Compl	-		•					
6 [\neg			ent or governmental un	it describe	d in sectio	n 170/bV	1γαγώ			
7	Ħ		_	eives a substantial part					or from the	neneral c	nublic described in
•			(b)(1)(A)(vi), (Comple		or no oabt	JOIN 11 JULI 14	90.0	J. 1000 G. 111 1	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	90.10161	745#6 4066#B64#1
8 [\neg			section 170(b)(1)(A)(vi).	(Complete	Port II \					
9 [亏			eives: (1) more than 33			rom contri	ibutione n	namharchi	n faac an	d arose ropoints from
<i>3</i> L				nctions - subject to cert						-	- ,
				axable income (less sec							-
			509(a)(2). (Complete			LX) 110111 DU	311103303 (acquired L	y u le Orga	ii iizaliOi i a	inter ourie 30, 1975.
10 [\neg			perated exclusively to te	et for nubl	lic eafety S	Saa saatid	n 500/a)/	4\		
11 E	Ħ			perated exclusively for the perated exclusively for the perated exclusively for the perated exclusively for the perated exclusively to the perated exclusive	-	-			•	v out the	numnees of one or
•••				ations described in secti							-
				organization and compl				c). Occ 561	Jeoc non-	адој. Опе	ck die ook triat
		a Type				e III - Func		tearsted		-	Type III - Other
٦٦	\neg			at the organization is not					r more disc		* *
-				han one or more publich		-	-	•			
f				ten determination from						o(a)(1) Of S	section 505(a)(2).
•				nis box							
~				organization accepted a							
g				irectly controls, either a			_				Vac Na
				upported organization?							
		(ii) A family	member of a nerso	n described in (i) above?	······································	••••••	••••••	••••••	•••••	• • • • • • • • • • • • • • • • • • • •	11g(i)
		(iii) A 35% (controlled entity of a	person described in (i)	or (ii) above	 a?	••••••	••••••	•••••••	•••••••	11g(ii)
h				about the supported or			•••••	••••••	••••••		[11g(III)]
••		i rovido trio i		about the supported of	yai iizatioi ii	(3).					
/:\ AI	2000	of ournorted	(III) EIN	(iii) Type of	fiu) le tha c	organization	(v) Did voi	u notify the	(vi) Is	the	
(I) N		of supported nization	(ii) EIN	organization		sted in your		ion in coL	l organizátic	an in col l	(vii) Amount of
	orgu	i iizauo:i		(described on lines 1-9 above or IRC section		document?		r support?	(i) organiz U.S.	ea in the	support
				(see instructions))	Yes	No	Yes	No	Yes	No	
					 	110				''	
								i			
			,					1			
			_								
						l i					
						<u> </u>					
								1984			
otal						<u> </u>					
HA F	or P	rivacy Act and	d Paperwork Reduc	ction Act Notice, see th	he Instruct	tions for			Schedule	A (Form	990 or 990-EZ) 2009

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

P	Support Schedule for (Complete only if you checke				(b)(1)(A)(iv) an	d 170(b)(1)(A)(v	ri)
Se	ction A. Public Support	STATE BOX OIT IN C	5, 7, 01 0 01 Fait 1.)				
_	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(4) 2000	40 Tetal
	Gifts, grants, contributions, and	(4) 2000	(6) 2000	(6) 2001	(0) 2008	(e) 2009	(f) Total
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to			Ì]	1	
	or expended on its behalf					1	
- 3	The value of services or facilities -					·····	
	furnished by a governmental unit to				ľ		
	the organization without charge		1.				
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a				The state of the s		
	governmental unit or publicly	A. A. C. C. C. C.					
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2005	(ь) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on					ł	
	securities loans, rents, royalties						
_	and income from similar sources						
y	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10					Harajaja era era era era era era era era era er	
	Gross receipts from related activities,	etc (see instruction			24 N T.		
	First five years. If the Form 990 is for					12	
	organization, check this box and stor						. —
Sec	tion C. Computation of Publ	ic Support Per	centage		***************************************	***************************************	<u></u>
	Public support percentage for 2009 (I			olumn (f)		14	04
	Public support percentage from 2008						% %
	33 1/3% support test - 2009. If the o						
	stop here. The organization qualifies						
ь	33 1/3% support test - 2008. If the or						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test	- 2009.If the orga	nization did not ch	neck a box on line	13, 16a, or 16b. a	nd line 14 is 10% o	r more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a r	oublicly supported	organization		▶□
b	10% -facts-and-circumstances test	- 2008.If the orga	nization did not ch	eck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1(0% or
	more, and if the organization meets th	e "facts-and-circum	nstances" test, ch	eck this box and s	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ	umstances" test. 1	The organization q	ualifies as a public	ly supported orga	nization	▶□
18	Private foundation. If the organization	n did not check a b	ox on line 13, 16a	, 16b, 17a, or 17b	, check this box a	nd see instructions	▶□
					Caha	dule A (Form 990 d	

Par	t III Support Schedule for	Organizations	Described in	Section 509(a	(Complete onl	y if you checked th	e box on line 9 of Part I.
	tion A. Public Support		T		, 		
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that		-				
	are not an unrelated trade or bus- iness under section 513		:				
	Tax revenues levied for the organ-			·	 		
i	zation's benefit and either paid to or expended on its behalf						
5	The value of services or facilities					<u> </u>	
1	furnished by a governmental unit to		l				
	the organization without charge						1
	Total. Add lines 1 through 5		-				
	Amounts included on lines 1, 2, and					†	
. 3	3 received from disqualified persons						
ti e	Amounts included on lines 2 and 3 received rom other than disqualified persons that exceed the greater of \$5,000 or 1% of the emount on line 13 for the year						
¢ A	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)				A		
Sect	tion B. Total Support					•	<u> </u>
Calen	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6				13/	10,200	(7)10121
10a (Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ьl	Inrelated business taxable income						
(less section 511 taxes) from businesses						
à	cquired after June 30, 1975						
	Add lines 10a and 10b						
11 N a v	Net income from unrelated business activities not included in line 10b, whether or not the business is egularly carried on						
12 (Other income. Do not include gain or loss from the sale of capital						
13 T	ssets (Explain in Part IV.)otal support (Add lines 9, 10c, 11, and 12.)					 	
	irst five years. If the Form 990 is for	the organization's	first second third	fourth or fighte	V VAGE OF O COO*!	n 501/a\/2\	
	heck this box and stop here						
Sect	ion C. Computation of Publ	ic Sunnort Da	rcentage	••••••••••	• • • • • • • • • • • • • • • • • • • •	<u></u>	·····
				- (A)		T T	
10 F	Public support percentage for 2009 (ine 8, column (1) di	vided by line 13, co	oiumn (1))		15	%
ID F	bublic support percentage from 2008	Scredule A, Part	III, line 15			16	%
- 	ion D. Computation of Inves	unent income	e Percentage				
17 lr	nvestment income percentage for 20	09 (line 10c, colum	nn (f) divided by line	13, column (f))	••••••	17	%
18 lr	nvestment income percentage from 2	2008 Schedule A, F	Part III, line 17	••••	•••••••	18	%
19a 3	3 1/3% support tests - 2009. If the	organization did no	ot check the box o	n line 14, and line	15 is more than 3	33 1/3%, and lin	e 17 is not
n	nore than 33 1/3%, check this box a	nd stop here. The o	organization qualifi	es as a publicly su	upported organiza	ation	▶□
рЗ	3 1/3% support tests - 2008. If the	organization did no	ot check a box on I	ine 14 or line 19a,	, and line 16 is mo	ore than 33 1/3%	6, and
li	ne 18 is not more than 33 1/3% , che	ck this box and sto	p here. The organ	ization qualifies as	s a publicly suppo	orted organization	ın 🕨 🗔
20 P	rivate foundation. If the organization	n did not check a t	oox on line 14, 19a	or 19b, check th	is box and see ins	structions	▶ □
	-				-		990 or 990-EZ) 2009

Schedule B (Form 990, 990-EZ, 'or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Name of the	organization CHRISTIAN EDUCATION, INC.	Employer identification number				
	DBA EZELL HARDING CHRISTIAN SCHOOL	23-7241505				
Organization	type (check one):					
Filers of:	Section:					
Form 990 or 9	90-EZ					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	•				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
-	organization is covered by the General Rule or a Special Rule. section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.				
General Rule						
	n organization filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in mibutor. Complete Parts I and II.	ioney or property) from any one				
Special Rules						
509(a	section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the recal (1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the eamount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	-				
aggre	section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, revention of cruelty to children or animals. Complete Parts I, II, and III.					
contr If this purpo	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
but it must an:	organization that is not covered by the General Rule and/or the Special Rules does not file Schedule (swer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
	acy Act and Paperwork Reduction Act Notice, see the Instructions Schedule En 990, 990-EZ, or 990-PF.	3 (Form 990, 990-EZ, or 990-PF) (2009)				

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

CHRISTIAN EDUCATION, INC. Employer identification number Name of the organization DBA EZELL HARDING CHRISTIAN SCHOOL 23-7241505 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 - Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 _____ 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ☐ No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

b Assets included in Form 990, Part X ______ > \$___

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

3,296,578.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Other .

Part VII Investments - Other Securities.	See Form 990, Part X, line	12.	<u></u>	7241303 Tage	
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation: Cost or end-of-year market value		
Financial derivatives					
Closely-held equity interests					
Other					
				· · · · · · · · · · · · · · · · ·	
			-		
	_				
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 12.)			· · · · · · · · · · · · · · · · · · ·		
Part VIII Investments - Program Related.	See Form 990 Part Y lin			<u> </u>	
		e 13.	(c) Method of valuati	on:	
(a) Description of investment type	(b) Book value	Co	st or end-of-year marke	et value	
				-	
					
				·	
			-		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line	15	<u> </u>			
	ne 15. a) Description				
	a) Description			(b) Book value	
			 -		
	· ·		-		
otal. (Column (b) must equal Form 990, Part X, col (B) li	ne 15.)				
Part X Other Liabilities. See Form 990, Part)	(, line 25.				
. (a) Description of liability		(b) Amount			
ederal income taxes					
OTHER LIABILITIES(DETAIL)-990		39,726.			
otal. (Column (b) must equal Form 990, Part X, col (B) lin					
	10.251 <u>L</u>	39,726.			

uncertain tax positions under FIN 48.

02-01-10

Schedule D (Form 990) 2009

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2009

Open to Public Inspection

Schedule E (Form 990 or 990-EZ) 2009

Name of the organization CHRISTIAN EDUCATION, INC. Employer identification number DBA EZELL HARDING CHRISTIAN SCHOOL 23-7241505 YES NO 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? X 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Schedule O (Form 990) X LOCAL NEWSPAPERS Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? X d Copies of all material used by the organization or on its behalf to solicit contributions? X 4d If you answered "No" to any of the above, please explain. If you need more space, use Schedule O (Form 990), Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? X b Admissions policies? X c Employment of faculty or administrative staff? d Scholarships or other financial assistance? X 5d e Educational policies? f Use of facilities? 5f g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990). 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? X If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990). Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

932081 02-03-10

SCHÉDULE O

Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization		EDUCATION, HARDING CH	INC. <u>RISTIAN SCHOO</u> I		Employer identification number 23-7241505
FORM 990, PART	I, LINE 1,	DESCRIPTIO	N OF ORGANIZAT	ION MIS	SION:
STUDENTS.					
			····		
FORM 990, PART	VI, SECTIO	N A, LINE 2	: HARRY HIX IS	THE BR	OTHER-IN-LAW OF
SAM LEWIS					
FORM 990, PART	VI, SECTIO	N B, LINE 1	1: SAM YINGER	REVIEWS	THE FORM 990
BEFORE FILING.			,		
FORM 990, PART	VI, SECTION	N B, LINE 1	5: THE PRESIDE	NT UNDE	RGOES AN
INDEPENDENT REV	VIEW WHEN H	IRED BY THE	BOARD. OTHER	OFFICE	RS AND KEY
EMPLOYEES ARE F	REVIEWED BY	THE PRESID	ENT.		
FORM 990, PART	VI, SECTION	N C, LINE 1	9: THE ORGANIZ	ATION'S	FINANCIAL
INFORMATION BY	REQUEST THI	ROUGH THE SO	CHOOL DIRECTLY	•	
THERE HAS BEEN	NO CHANGE I	FROM THE PR	OR YEAR.		
				,	
			·		
				····	
			· · · · · · · · · · · · · · · · · · ·		

1

FOOTNOTES

STATEMENT

PART IV, LINE 57A: LAND BUILDINGS IMPROVEMENTS OTHER THAN BUILDINGS EQUIPMENT, FURNITURE, & LIBRARY

DEPRECIATION METHODS FOR PP&E ARE:

BUILDINGS- STRUCTURES 30 YRS., IMPROVEMENTS 10/15 YRS. IMPROVEMENTS- 10 YEARS

EQUIP, FURN- 5/7 YEARS

24