

**NON-PROFIT ORGANIZATION  
REQUEST FOR CITY OF FRANKLIN  
2019-20 FISCAL YEAR**

**Organization Name:** Gentry's Education Center **Phone:** 615-925-1033

**Contact Person & Title:** Evelyn Hickerson, Executive Director

**Mailing Address:** 4221 Warren Road, Franklin, TN 37067

**Federal Identification # (if applicable):** EIN: 27-1202003

**E-mail address:** hickersoneve@fssd.org

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**MAR 15**

*Invoice*

**Number of Active Participants in Organization:** 90 staff members; 460 students.

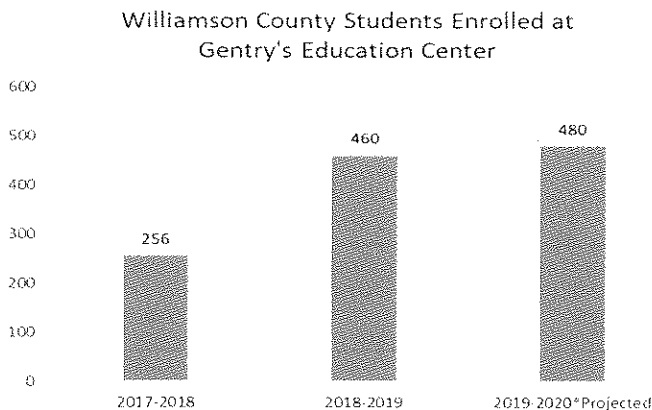
**If necessary, use a separate sheet to provide requested information.**

**Does this organization charge fees to participants?** Yes √ No     

**Yes:** Registration fees are \$30.00 per student. Pre-Kindergarten program fee is \$60.00/week. The afterschool tutoring program fee is \$20.00/week. The Summer Academy fee is \$50.00/week. Gentry's can receive vouchers from the Family First program to assist with fee payments. To ensure no child is excluded, scholarships are available to students from very-low income households to cover program participation.

**If No, please explain:**

**Please provide the approximate number of clients served by your program on a yearly basis: 200+. All funds provided by the Williamson County Commission must be used to provide assistance to Williamson County citizens only. Please provide documentation to show the expenses used for service to Williamson County citizens:**



For FY2018-19, Gentry's has provided programming to 460 students to date from Williamson County, a 76.9% increase from initial projections of 260. This year's enrollment is expected to be similar. Current programs are housed at Johnson Elementary School Freedom Intermediate School, and New Hope Academy. **(100% from Williamson County)**. Gentry's receives in-kind support from Williamson County with office space in the Williamson County Community Services Building.

**List ANY agency (or agencies) in Williamson County which you consider may directly, or indirectly, provide the same or similar services as those provided by your agency. If such an agency exists, please list the similarities (use additional sheets, if needed):**

The Boys and Girls Club and the Franklin Special School District's (FSSD) Morning and After School Care program (MAC) also provide students with child care and academic support during the school year and summer. FSSD also offers Young Scholars Institute, an interest-based summer enrichment program. Students may attend for one or two weeks. Gentry's services are data-driven, yet holistic. Our program is evaluated

based on academic and behavioral performance indicators; therefore, our program focus is to reduce achievement gaps and address the emotional health of students through ACEs services (adverse childhood experiences). We also provide more opportunities for student participation when families are unable to pay for programming.

**Unless prohibited by law, please provide documentation that your organization made a good faith effort to collect donation from private sources.**

Gentry's Education Center at the Storefront (Gentry's) engages in a multi-faceted, long-term focused fundraising program with diverse revenue sources. We have a balanced revenue stream of grants, fees, and donations. Gentry's uses program fees from participants whose families can pay as a revenue source to support tutoring and enrichment activities during the school year and summer. Gentry's requires the Board of Directors to adhere to a Give/Get Policy in which a specific amount of financial support is received from each Board member either from a personal contribution or in obtaining a specific amount of money from a funding source. The Executive Director and the Board Chair continue to build relationships with local industries and corporations that contribute to Gentry's mission and services either through monetary or in-kind support. Gentry's encourages online donations through a "Donate Now" tab on Giving Matters and on its web site. Gentry's utilizes a grant proposal writer to prospect research, write, and submit grant applications in focus areas that are deemed a suitable match for both the funder and Gentry's. Gentry's includes information about Giving Matters in its literature to direct donors to the "Donate Now" tab of our profile for those interested in donating online. Currently Gentry's uses Facebook and Twitter as social media tools to boost exposure thus generating funders. Gentry's has a systematic acknowledgement process, and we will continue that with the following schedule: Within 48 hours: Thank you call made by Executive director/staff; Within 1 week: Personal handwritten note sent; Monthly: Board Chair and Executive Director send thank you letter to donors at the \$500+ level.

Non-Profit Organization Request  
for City of Franklin – Page Two

**Organization: Gentry's Education Center**

<b>Expenditures:</b>	<b>Actual 2017-18</b>	<b>Projected Expended 2018-19</b>	<b>Requested 2019-20</b>
Grants & Other Assistance:			
Organizations & Governments			
Individuals	\$2,800.00	\$2,500.00	
Employee Salaries	\$314,810.00	\$356,695.00	\$402,688.00
Employee Benefits			
Payroll Taxes	\$11,644.00	\$12,000.00	\$15,000.00
Service Fees	\$38,177.00	\$35,000.00	\$35,000.00
Advertising & Promotion		\$1,500.00	\$2,000.00
Office Expenses	\$921.00	\$500.00	\$1,000.00
Information Technology (Admin.)		\$150.00	\$500.00
Program Supplies			\$20,000.00
Travel & Entertainment	\$1,929.00	\$1,500.00	\$1,500.00
Conferences & Meetings		\$1,000.00	\$1,000.00
Depreciation & Amortization	\$4,387.00	\$5,000.00	\$5,000.00
Insurance	\$3,946.00	\$3,946.00	\$5,000.00
All other expenses	\$6,056.00		
<b>Total</b>	<b>\$384,670.00</b>	<b>\$419,791.00</b>	<b>\$488,688.00</b>

<b>Revenues:</b>	<b>Actual 2017-18</b>	<b>Projected Expended 2018-19</b>	<b>Requested 2019-20</b>
<b>Williamson County Government</b>		\$	\$
<b>City of Franklin Government</b>	<b>\$10,000.00</b>	<b>\$15,000.00</b>	<b>\$25,000.00</b>
1. Contributions, Gifts & Grants:			
1a. United Way of Williamson County		\$4,000.00	
1b. Other United Ways			
1c. Membership dues			
1d. Government Grants	\$200,425.00	\$227,813.00	\$326,688.00
1e. All Other Contributions	\$157,032.00	\$108,022.00	\$108,022.00
<b>1f. TOTAL Contributions</b>	<b>\$367,457.00</b>	<b>\$354,835.00</b>	<b>\$459,710.00</b>
Program Services	\$50,558.00	\$50,000.00	\$50,000.00
Investment Income (Dividends & Interest)	\$47.00		
Net Income (Loss) from Fundraising Special Events	\$16,967.00	\$20,000.00	\$25,000.00
All other revenue			
<b>Total</b>	<b>\$435,029.00</b>	<b>\$424,835.00</b>	<b>\$534,710.00</b>

**Organization: Gentry's Education Center**

**Personnel & Salary Information**

<b>Personnel:</b>	<b>Actual 2017-18</b>	<b>Projected Expended 2018-19</b>	<b>Requested 2019-20</b>
Employee Salaries (Represents personnel and tutors for programming)	\$314,810.00	\$356,695.00	\$402,688.00
Payroll Taxes	\$11,644.00	\$12,000.00	\$15,000.00
<b>Total</b>	<b>\$326,454.00</b>	<b>\$368,695.00</b>	<b>\$417,688.00</b>

**List any equipment owned by this organization funded, in whole or in part, by Williamson County. Please indicate what it is used for, how it is maintained and where it is stored (use a separate sheet if necessary):**

Gentry's does not possess any equipment funded by Williamson County. However, previous funding from the City of Franklin FY2017-2018 allocation allowed Gentry's to leverage funds to purchase a Promethean board. This equipment is used for tutoring and enrichment activities with the students as well as workshops for parent, student, and teacher engagement. The board is located and maintained at Johnson Elementary School, 815 Glass Lane, Franklin, TN.

**City of Franklin  
APPLICATION ADDENDUM**

For the funding year, July 1, 2019 through June 30, 2020

Name of Agency: Gentry's Education Center at the Store Front Date: 03/11/2018

**Please provide a detailed description of the proposed use of funds that the City of Franklin might provide for Fiscal Year 2019-2020:**

**History and Services:**

For the past nine years, Gentry's Education Center at the Store Front (Gentry's), a community-based 501c3, has worked in partnership with parents and the school communities of Williamson County to provide quality after school programming to address some of the most pressing academic and social needs of our students.

Services are holistic, addressing academics and emotional health, targeting PreK-6<sup>th</sup> grade students, 12-15 hours per week, who are economically disadvantaged, at risk of academic failure, or present emotional/behavioral issues. Programming is aligned with the framework recommended by the Afterschool Alliance, 21<sup>st</sup> Century Community Learning Centers, the Tennessee Department of Education Common Core Standards, and ACEs (adverse childhood experiences) best practices. Certified staff execute program activities using instructional and counseling strategies that are engaging and student-centered to maximize participation and attendance. STEM-based enrichment activities provide another path to proficiency during the school year and in the Summer Academy (June) to enhance reading and math and encourage critical thinking and problem solving.

Students are assessed throughout the year using STAR Renaissance Math and Reading to determine progress and expected performance on the annual state standardized assessment. Students receiving ACEs services are assessed using the Strengths and Difficulties Questionnaire (SDQ) to determine need for services and gauge progress during program participation. Gentry's also utilizes parent participation to enhance students' academic and social development through day to day interactions and planned activities.

Program evaluation is essential for success; therefore, formative and summative data is collected regarding academic achievement, attendance, and behavior to share with stakeholders and guide program improvement.

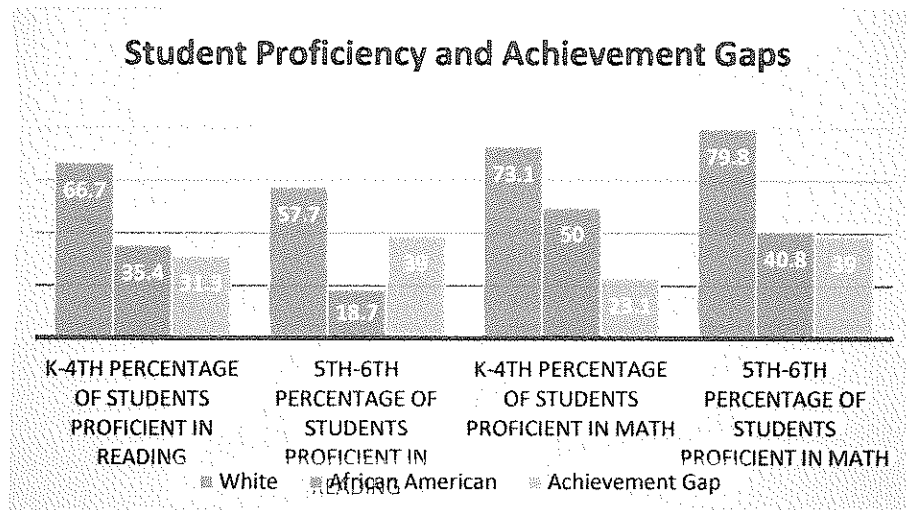
**Need and Funding Request:**

**Tutoring and Enrichment Achieving More Success (TEAMS).**

Gentry's students attend schools in the Franklin Special School District and reside in "inner-city" Franklin, where the poverty rate is a staggering 51.1% (American Census Bureau, 2010). Nearly all its students are eligible for the free and reduced lunch program; most are ethnic minorities; and currently seven students are experiencing homelessness. Gentry's serves a high proportion of students who have significant academic needs. These needs were further identified in students from New Hope Academy who participated in past summer programming upon the recommendation of their school day teachers due to academic challenges. Teachers and families were surveyed on needs they identified and programming they felt would be beneficial. Gentry's Community Board and Board members discussed how to incorporate these needs and

interventions in program expansion. Gentry's partnered with New Hope Academy this year to service academically at-risk students. To that end, Gentry's Education Center at the Store Front is requesting \$25,000 to be leveraged with additional funds to increase Gentry's capacity to serve these students with additional tutors and technology in addition to services offered at Johnson Elementary and Freedom Intermediate School. We project serving 480 students through tutoring and academic enrichment during the 2019/2020 academic year. TEAMS will help build a pipeline of college-ready talent focused on Science, Technology, Engineering and Math. It will provide students from low-income families with opportunities to practice STEM skills and will help eliminate barriers to academic proficiency.

65.2% of students served by Gentry's last year came from homes at or below the Federal Poverty Level. The schools we project to serve this year have large gaps in academic proficiency between White Students (W) and African American Students (AA) both in Math and Reading/Language Arts.



TEAMS programming will go from July 1, 2019 to June 30, 2020, encompassing after school and summer extended learning. TEAMS will target kindergarten through sixth grade students who are economically disadvantaged or at risk of academic failure. It is designed to help them unlock opportunities for their future as they develop and improve academic skills in Science, Technology, Engineering, and Math. This project was developed using frameworks recommended by the Afterschool Alliance and 21st Century Community Learning Centers, based on the curriculum framework designed by the Tennessee Department of Education and used by Franklin Special School District. Its outcomes and activities align with the school day instruction and the Tennessee state curriculum.

TEAMS will incorporate Tennessee Academic Standards for Computer Literacy while developing, remediating, and enriching Math and Reading/Language Arts skills. This can only be accomplished through the use of additional technology in the hands of students who would otherwise not have access.

TEAMS will provide extended learning time during the school year Monday through Friday from 3:00-6:00 pm. Certified teachers will tutor students to ensure mastery of STEM curriculum. Students will receive 45 minutes of homework assistance and up to two hours of intensive, targeted tutoring in reading and math. During the school year, the program begins by analyzing students' initial abilities and needs based on standardized testing along with information from current teachers. Tutors will work with students individually and in small groups of up to five for 12-15 hours per week. They provide homework assistance and teach students skills through

engaging project-based activities designed to meet students' academic needs while unlocking new opportunities.

The Summer Academy will be held from 8:00 am to 3:00 pm June 2020. Certified teachers will facilitate learning through combined reading and math tutoring with project-based STEM activities. They will study academics in new ways, such as reading carefully to engineer spectacular cupcakes, understand sports movements, and analyze and replicate design in the arts. Doing so, they will discover the value of reading nonfiction based on their own interests and real-life math applications. The Summer Academy builds on student success by continuing to use project-based learning driven by student interests while incorporating necessary instruction in reading and math. For the school year and summer programs, students' progress will be gauged through formative and summative assessments and survey data to guide program improvement.

Children will learn through project-based STEM activities as well as technology. They discover that STEM is all around them in art, design, sports, fitness, music and performing arts and realize they can be successful in a variety of areas, and they study academics in new ways and improve their reading and math skills through enhanced critical thinking and problem solving.

Funding from the City of Franklin will provide leverage for TEAMS to increase Gentry's capacity by providing two (2) additional tutors for the school year program and one additional (1) tutor for the Summer academy in June 2020. Adding additional tutors will allow for increased one-on-one intensive tutoring for students significantly below grade level (2 or more grades behind in reading) or not performing at proficient reading levels based on TN Department of Education Common Core standards. This also allows for increased focus on specific learning needs and produces quicker learning and mastery of skills in standards-aligned reading goals.

Funding will also provide access to technology via one computer for formative assessments and 20 iPads. Many students who attend the same schools as the children served by Gentry's live in more affluent, two-parent homes and have many advantages. Gentry's children are predominantly from low-income minority families and have difficulty keeping pace with them. They only have access to technology in the classroom. Then they still have limited access and must share computers. City of Franklin funding will help transform education for low-income children by providing them with a school supply they simply do not have: an iPad. Children will use them at Gentry's to address an underlying cause of education inequity as they are not able to complete some assignments without this technology. The access to technology and the additional support at Gentry's will provide the necessary bridge to improve their educational outcomes.

City of Franklin Request	Price	Number of Items	Total
Laptop computer	\$1,000.00	1	\$ 1,000.00
Apple iPads	\$ 500.00	20	\$10,000.00
Two Tutors (Reading/Math) @ \$20.00/hour x 2 hours/day x 155 days (School Year 2019-2020)	\$ 6,200.00	2	\$12,400.00
One Reading Tutor @ \$20.00/hour x 4 hours/day x 20 days (Summer 2020)	\$1,600.00	1	\$ 1,600.00

**Proposed Program Objectives/Expected Outcomes:**

- 90% of students will attend 70 days or more in program activities.
- 70% of students will demonstrate a .8 grade level growth/gain in reading and math by the final benchmark in May 2020.
- At least 85% of teachers surveyed will indicate that students benefitted from Gentry's interventions.
- At least 85% of parents surveyed will rate services provided by Gentry's as Helpful or Very Helpful and can name at least one academic strategy they plan to implement at home to improve reading/math abilities.

**Please provide information on any interaction that your agency has with the operations of City of Franklin departments (e.g., response to calls from Police after domestic incidents, provision of meals or lodging to displaced persons, etc.):**

Gentry's has not had any formal interactions with the City of Franklin departments as described above.



**Please answer completely the following questions using additional pages if necessary**

**1) Specifically, what services did your agency provide last year for which you are requesting funding this year? What were the objectives and results? (Include description capacity, intensity, and duration of services.)**

Last year the City of Franklin provided funding to Gentry's Tutoring and Enrichment Program. This investment allowed additional reading tutors for the afterschool program and Summer Academy. Gentry's served 460 students (a 76.9% increase from the projected 260 students) with a staff of 73 teachers Monday – Friday for at least 2.5-3.0 hours in the afterschool program and a full day summer program. Students were evaluated through STAR Renaissance Reading to determine academic gains.

**2018-2019 Proposed Program Objectives and Results:**

- 90% of students will attend 60 days or more in program activities. Objective met. 91% of students attended 60 or more days in program activities.
- 70% of students will demonstrate a .6 grade level growth/gain in reading and math by the final benchmark in May 2019. Objective met. 83% of students demonstrated .6 grade level gain as of February 2019.
- At least 85% of teachers surveyed will indicate that students benefitted from Gentry's interventions. Objective met. At least 95% of teachers surveyed indicated that students benefitted from Gentry's interventions.
- At least 85% of parents surveyed will rate services provided by Gentry's as Helpful or Very Helpful and can name at least one academic strategy they plan to implement at home to improve reading/math abilities. Objective met. 97% of parents surveyed rated Gentry's services as helpful/very helpful.

**2) Are there procedures in place for measuring the results achieved by your agency? If so, provide detailed data.**

A systematic procedure is in place to monitor student progress throughout the program and to assess the program's impact annually. Evaluation is conducted in conjunction with Franklin Special School District to ensure Gentry's program aligns with school district goals. Gentry's programming is data-driven, yet holistic. We aim to see children succeed academically and emotionally as behavior can influence a child's success level in school.

Attendance is recorded each program day to identify students who attend on a regular basis. Consistent attendance is necessary for students to receive a true benefit of supplemental instruction. Data is analyzed weekly to track absences and develop communication plans to parents/classroom teachers to encourage attendance.

Achievement is measured through formative and summative assessments.

Formative assessment monitors student learning to provide ongoing feedback that is used to modify learning intervention strategies for students who are not making expected progress. This data is analyzed to ensure students are meeting requirements for proficiency in math, reading, science, and social studies and identifies students that are not proficient. Information is used to improve test-taking skills and modify interventions. Gentry's primarily uses STAR Reading and Math research-based assessments to collect formative data throughout the year. They are student-centered as the student can see his/her strengths and weaknesses and target

areas that need work.

Summative assessments are the final measure of achievement designed to evaluate student learning at the end of the academic year and compare it to a standard. The TNReady assessment, the state standardized achievement test, is the summative assessment for Gentry's participants. Results are used to measure individual gains in performance as well as the entire group and scores of subgroups for economically disadvantaged and for minorities.

Surveys are used to inform our program of our impact. Surveys are given to teachers and parents/guardians to assist us in assessing program strengths and areas for further development.

**3) Does your agency receive any external quality review or accreditation? If so, provide a copy of certificate or license and please explain.**

The Tennessee Department of Human Services licenses after school programs along with child care centers to determine the quality of service they provide. Under Tennessee's Child Care Report Card System, every licensed child care agency must undergo an annual evaluation and post a report card of the results. Agencies are required to post their report card with their renewal license where parents can clearly see them. The Report Card system is mandatory for all licensed providers providing 15 or more hours of services per week. Gentry's meets the standards for Child Care Centers and School Age Programs per TN State Board of Education Chapter 0520-12-01.

**4) What percent of your local agency budget is your allocation request from the City of Franklin?**

Our request of \$25,000.00 represents 5.1% of our total agency budget of \$488,688.00.

**5) What other fundraising activities does your agency engage in during the year?**

Gentry's Education Center at the Storefront (Gentry's) engages in a multi-faceted, long-term focused fundraising program with diverse revenue sources. We have a balanced revenue stream of grants, fees, and donations. Gentry's uses program fees from participants whose families can pay as a revenue source to support tutoring and enrichment activities during the school year and summer. Gentry's requires the Board of Directors to adhere to a Give/Get Policy in which a specific amount of financial support is received from each Board member either from a personal contribution or in obtaining a specific amount of money from a funding source. Gentry's engages the staff and Board of Directors in the United Way's Taste of Williamson campaign in which each participant solicits at least five ticket purchases or sales to raise money in the spring. The Executive Director and the Board Chair continue to build relationships with local industries and corporations that contribute to Gentry's mission and services either through monetary or in-kind support. Gentry's encourages online donations through a "Donate Now" tab on Giving Matters and on its web site. Gentry's utilizes a grant proposal team to prospect research, write, and submit grant applications in focus areas that are deemed a suitable match for both the funder and Gentry's. Gentry's includes information about Giving Matters in its literature to direct donors to the "Donate Now" tab of our profile for those interested in donating online. Currently Gentry's uses Facebook and Twitter social media tools as an element in increased agency exposure and fundraising. Gentry's has a systematic acknowledgement process, and we will continue that with the following schedule: Within 48 hours: Thank you call made by Executive director/staff; Within 1 week: Personal handwritten

note sent; Monthly: Board Chair and Executive Director send thank you letter to donors at the \$500+ level.

**6) Do you charge any fees for your services?**

Registration fees are \$30.00 per student. Pre-Kindergarten program fee is \$60.00/week. The afterschool tutoring program fee is \$20.00/week. The Summer Academy fee is \$50.00/week. Gentry's can receive vouchers from the Family First program to assist with fee payments. To ensure no child is excluded, scholarships are available to students from very-low income households to cover program participation.

***GENTRY'S EDUCATION CENTER  
@ THE STORE FRONT, INC.  
(A Nonprofit Organization)***

**Financial Statements  
With Independent Accountants' Review  
Report Thereon  
For The Years Ended December 31, 2017 and 2016**



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*GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.*

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## Independent Accountants' Review Report

To the Board of Directors of  
Gentry's Education Center @ the Store Front, Inc.

We have reviewed the accompanying financial statements of Gentry's Education Center @ the Store Front, Inc., which comprise the statement of financial position as of December 31, 2017, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of company management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

### Accountants' Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

### Accountants' Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

### Other Matter

The financial statements of Gentry's Education Center @ the Store Front, Inc. for the year ended December 31, 2016 were reviewed by another accounting firm whose report dated February 13, 2017 stated that, based on their review, they are not aware of any material modifications that should be made to the financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

 CPA, PLLC

Miller CPA, PLLC  
January 23, 2018

GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.  
 STATEMENTS OF FINANCIAL POSITION  
 DECEMBER 31, 2017 AND 2016

	<u>2017</u>	<u>2016</u>
CURRENT ASSETS		
Cash and equivalents	\$ 133,463	\$ 79,502
Grants and accounts receivable	<u>18,707</u>	<u>13,698</u>
Total current assets	152,170	93,200
PROPERTY AND EQUIPMENT, NET	<u>8,068</u>	<u>8,198</u>
 TOTAL ASSETS	 <u>\$ 160,238</u>	 <u>\$ 101,398</u>
CURRENT LIABILITIES		
Accounts payable	\$ 7,605	\$ 10,002
Accrued liabilities	<u>27,906</u>	<u>17,028</u>
Total current liabilities	35,511	27,030
NET ASSETS		
Unrestricted	124,727	72,868
Temporarily Restricted	<u>-</u>	<u>1,500</u>
Total net assets	<u>124,727</u>	<u>74,368</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 160,238</u>	<u>\$ 101,398</u>

See accompanying notes to financial statements and independent accountants' review report.

**GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.**  
**STATEMENTS OF ACTIVITIES**  
**FOR THE YEARS ENDED DECEMBER 31, 2017 and 2016**

	2017		2016			
	Unrestricted	Temporarily Restricted	Totals	Unrestricted	Temporarily Restricted	Totals
PUBLIC SUPPORT AND REVENUE						
Public support						
Grant income	\$ 290,349	\$ -	\$ 290,349	\$ 201,671	\$ -	\$ 201,671
Contributions	77,108	-	77,108	82,237	1,500	83,737
Total public support	367,457	-	367,457	283,908	1,500	285,408
Revenue						
Program fees	50,558	-	50,558	58,440	-	58,440
Miscellaneous income	17,014	-	17,014	21,890	-	21,890
Total revenue	67,572	-	67,572	80,330	-	80,330
Released from restrictions	1,500	(1,500)	-	-	-	-
Total public support and revenue	436,529	(1,500)	435,029	364,238	1,500	365,738
EXPENSES						
Program services	308,341	-	308,341	303,720	-	303,720
Management and general	41,445	-	41,445	30,165	-	30,165
Fundraising	34,884	-	34,884	28,873	-	28,873
Total expenses	384,670	-	384,670	362,758	-	362,758
Increase in net assets	51,859	(1,500)	50,359	1,480	1,500	2,980
Net assets at beginning of year	72,868	1,500	74,368	71,388	-	71,388
Net assets at end of year	\$ 124,727	\$ -	\$ 124,727	\$ 72,868	\$ 1,500	\$ 74,368

See accompanying notes to financial statements and independent accountants' review report.



**GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.**  
**STATEMENTS OF FUNCTIONAL EXPENSES**  
**FOR THE YEARS ENDED DECEMBER 31, 2017 and 2016**

	2017				2016			
	Program Services	Management and General	Fund- raising	Total Expenses	Program Services	Management and General	Fund- raising	Total Expenses
Payroll and tutors	\$ 276,078	\$ 28,547	\$ 10,185	\$ 314,810	\$ 273,480	\$ 19,365	\$ 3,600	\$ 296,445
Payroll taxes	10,215	1,052	377	11,644	7,934	1,489	277	9,700
Total compensation	286,293	29,599	10,562	326,454	281,414	20,854	3,877	306,145
Contract services	250	-	-	250	950	-	18,103	19,053
Professional fees	-	6,410	5,770	12,180	-	5,376	5,375	10,751
Depreciation	4,495	-	-	4,495	5,198	-	-	5,198
Class materials and supplies	1,630	-	-	1,630	2,858	-	-	2,858
Special events	999	-	-	999	2,489	-	-	2,489
Food and nutrition	33	-	-	33	2,421	-	-	2,421
Travel	-	1,929	-	1,929	2,104	-	-	2,104
Staff and volunteer	20	1,394	-	1,414	674	675	674	2,023
Conferences & meetings	1,423	-	-	1,423	1,902	-	-	1,902
Enrichment and educational	2,725	-	-	2,725	1,327	-	-	1,327
Grants made - individuals	2,800	-	-	2,800	1,241	-	-	1,241
Meals and entertainment	-	229	-	229	-	1,141	-	1,141
Office supplies	-	201	-	201	-	913	-	913
Fundraising	-	-	-	-	-	-	844	844
Insurance	3,946	-	-	3,946	352	352	-	704
Seed program	-	-	-	-	690	-	-	690
Licenses and permits	-	200	-	200	-	292	-	292
Postage and delivery	-	-	-	-	-	129	-	129
Incentives and rewards	-	-	-	-	100	-	-	100
Interest	-	-	-	-	-	54	-	54
Grant writing	-	-	17,790	17,790	-	-	-	-
Weekend mentoring	3,600	-	-	3,600	-	-	-	-
Miscellaneous	127	1,483	762	2,372	-	379	-	379
Total Expenses	\$ 308,341	\$ 41,445	\$ 34,884	\$ 384,670	\$ 303,720	\$ 30,165	\$ 28,873	\$ 362,758

See accompanying notes to financial statements and independent accountants' review report.

**GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.**  
**STATEMENTS OF CASH FLOWS**  
**FOR THE YEARS ENDED DECEMBER 31, 2017 and 2016**

CASH FLOWS FROM OPERATING ACTIVITIES	2017	2016
Increase in net assets	\$ 50,359	\$ 2,980
Adjustments to reconcile increase in net assets to net cash provided by operating activities:		
Depreciation	4,495	5,198
Decrease (increase) in operating assets:		
Grants and accounts receivable	(5,009)	3,018
Increase (decrease) in operating liabilities:		
Accounts payable	(2,397)	(2,287)
Accrued liabilities	10,878	6,331
NET CASH PROVIDED BY OPERATING ACTIVITIES	58,326	15,240
CASH FLOWS USED FOR INVESTING ACTIVITIES		
Purchases of property and equipment	(4,365)	(999)
NET INCREASE IN CASH AND EQUIVALENTS	53,961	14,241
CASH AND EQUIVALENTS AT BEGINNING OF YEAR	79,502	65,261
CASH AND EQUIVALENTS AT END OF YEAR	\$ 133,463	\$ 79,502

See accompanying notes to financial statements and independent accountants' review report.

**GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2017 AND 2016**

**NOTE A—NATURE OF ACTIVITIES, BASIS OF ACCOUNTING AND SIGNIFICANT ACCOUNTING PRINCIPLES**

Nature of Operations

Gentry's Education Center @ the Store Front, Inc. (the "Organization") is a nonprofit tutoring and enrichment afterschool and summer camp program serving students in the Franklin Special School District in Williamson County, Tennessee. Services are provided to students for an affordable registration fee. Enrichment classes are provided for an additional nominal fee.

Basis of Accounting

The financial statements of the Organization have been prepared on the accrual basis.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and other support and expenses during the reporting period. Actual results could differ from those estimates.

Financial Statement Presentation

The Organization presents its financial statements in accordance with Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 958, *Financial Statements for Not-for-Profit Organizations*. Accordingly, the Organization reports information regarding its financial position and activities according to the three classes of net assets: unrestricted, temporarily restricted and permanently restricted.

Unrestricted Net Assets

Unrestricted net assets include unrestricted resources which represent the portion of funds that are available for the operating objectives of the Organization.

Temporarily Restricted Net Assets

Temporarily restricted net assets consist of donor restricted contributions and grants. Amounts restricted by donors for a specific purpose are deemed to be earned and reported as temporarily restricted revenue, when received, and such unexpended amounts are reported as temporarily restricted net assets at year-end. When the donor restriction expires, that is, when a stipulated time or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as "net assets released from restrictions".

Permanently Restricted Net Assets

Permanently restricted net assets consist of donor restricted contributions, which are required to be held in perpetuity. Income from the assets held is available for either general operations or specific purposes, in accordance with donor stipulations. The Organization had no permanently restricted net assets as of December 31, 2017 and 2016.

**GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2017 AND 2016**

**NOTE A—NATURE OF ACTIVITIES, BASIS OF ACCOUNTING AND SIGNIFICANT ACCOUNTING PRINCIPLES (CONTINUED)**

Contributions

Contributions are recognized as revenue when received or unconditionally pledged. All contributions are available for unrestricted use unless specifically restricted by the donor. Contributions that are restricted by the donor are reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted contributions are reported as an increase in temporarily restricted net assets depending on the nature of the restriction. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets.

Cash and Equivalents

Cash and equivalents include cash on hand and any short-term investments with original maturities of three months or less.

Grants and Accounts Receivable

Grants and accounts receivable consist of accounts and grants due in less than one year, recorded at their realizable value upon receipt. Accounts with balances greater than 30 days old are considered past due. Uncollectible receivables are charged off through the allowance for doubtful accounts when management determines the accounts receivable will not be collected and all methods of collection have been exhausted. An allowance for doubtful collectability is provided based on management's evaluation of potential uncollectible grants and accounts receivable at year-end. As of December 31, 2017 and 2016, management has estimated the allowance for doubtful collectability to be \$-0-.

Property and Equipment

The Organization capitalizes all property and equipment expenditures with a cost of \$500 or more and having estimated useful lives of more than one year. Property and equipment are recorded at cost or, for donated items, at fair value as of the date received. Expenditures for major additions and improvements are capitalized and minor replacements, maintenance and repairs are charged to expense when incurred.

When property and equipment are retired or otherwise disposed of, the cost and accumulated depreciation are removed from the accounts and any resulting gain or loss is included in the statement of activities for the respective period. Depreciation is computed using the straight-line method over the estimated useful lives of 5 years.

Functional Expenses

Presentation of operating expenses includes production costs directly incurred for program activities and supporting expense activity classifications of management and general as well as fundraising.

Income Taxes

The Organization is exempt from federal income taxes under Section 501 (c) (3) of the Internal Revenue Code and did not conduct unrelated business activities. Therefore, the Organization has made no provision for federal income taxes in the accompanying financial statements. The Organization has been determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509 (a) (2) of the Internal Revenue Code.

**GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2017 AND 2016**

**NOTE A—NATURE OF ACTIVITIES, BASIS OF ACCOUNTING AND SIGNIFICANT ACCOUNTING PRINCIPLES (CONTINUED)**

Income Taxes (continued)

The Organization has evaluated its tax positions for all open tax years. Currently, the tax years of December 31, 2016, 2015 and 2014 remain open and subject to examination by the Internal Revenue Service. However, the Organization is not currently under audit nor has the Organization been contacted by any jurisdiction. Based on the evaluation of the Organization's tax positions, management believes all tax positions taken would be upheld under an examination. Therefore, no provision for the effects of uncertain tax positions has been recorded for the years ended December 31, 2017 and 2016.

**NOTE B—GRANTS AND ACCOUNTS RECEIVABLE**

For the years ended December 31, 2017 and 2016, grants and accounts receivable consisted of funds due from separate grants from the Tennessee Department of Education totaling \$18,707 and \$13,698.

**NOTE C—PROPERTY AND EQUIPMENT, NET**

As of December 31, 2017 and 2016 property and equipment consist of computers and video equipment with a total cost of \$26,582 and \$22,217, respectively, and the related accumulated depreciation totaling \$18,514 and \$14,019, respectively.

During the years ended December 31, 2017 and 2016 depreciation expense totaled \$4,495 and \$5,198 respectively.

**NOTE D—FUNCTIONAL EXPENSES**

The costs of providing the various programs and activities have been summarized on a functional basis in the statements of activities and functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

For the years ended December 31, 2017 and 2016 the Organization incurred program service expenses of \$308,341 and \$303,720, respectively, management and general expenses of \$41,445 and \$30,165, respectively, and fundraising expenses of \$34,884 and \$28,873, respectively.

**NOTE E—TEMPORARILY RESTRICTED NET ASSETS**

Net assets were released from donor restrictions by incurring expenses satisfying the purpose restrictions specified by donors for the year ended December 31, 2017 totaled \$1,500. No funds were released from donor restrictions during the year ended December 31, 2016.

As of December 31, 2017 and 2016 the temporarily restricted net assets was \$-0- and \$1,500, respectively, and included contributions received for the use of a homeless family.

**NOTE F—RISK CONCENTRATION**

At times throughout the year, the Organization may maintain cash balances in certain accounts in excess of Federal Deposit Insurance Corporation ("FDIC") limits which have been established to be \$250,000 for substantially all depository accounts. The Organization as of December 31, 2017 and 2016 had no cash balances in excess of the FDIC limit.

**GENTRY'S EDUCATION CENTER @ THE STORE FRONT, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**DECEMBER 31, 2017 AND 2016**

**NOTE F—RISK CONCENTRATION (CONTINUED)**

For the year ended December 31, 2017, approximately 34% and 12%, respectively, of the Organization's revenue came from the LEAPS program and the 21<sup>st</sup> Century Community Learning Centers Grant Program with the Tennessee Department of Education.

For the year ended December 31, 2016, approximately 44% of the Organization's revenue came from the 21<sup>st</sup> Century Community Learning Centers Grant Program with the Tennessee Department of Education.

**NOTE G—CASH FLOW INFORMATION**

During the years ended December 31, 2017 and 2016 net cash provided by operating activities includes cash payments of interest of \$-0- and \$54, respectively.

**NOTE H—SUBSEQUENT EVENTS**

Subsequent events have been evaluated through January 23, 2018 which is the date the financial statements were available to be issued. There have been no adjustments to the financial statements to include any subsequent transactions or events.

INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: APR 12 2011

GENTRYS EDUCATION CENTER AT THE  
STORE FRONT INC  
2226 HENPECK LN  
FRANKLIN, TN 37064

Employer Identification Number:  
27-1202003  
DLN:  
401080085  
Contact Person:  
JEFFERY A CULLEN ID# 31215  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
December 30, 2009  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

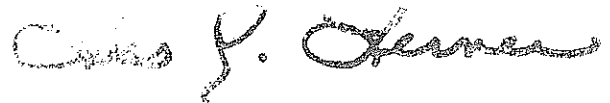
Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,



Lois G. Lerner  
Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)

## Forms 990 / 990-EZ Return Summary

For calendar year 2017, or tax year beginning

, and ending

27-1202003

## GENTRY'S EDUCATION CENTER AT THE ST

Net Asset / Fund Balance at Beginning of Year 74,370

## Revenue

Contributions	<u>367,457</u>	
Program service revenue	<u>50,558</u>	
Investment income	<u>47</u>	
Capital gain / loss		
Fundraising / Gaming:		
Gross revenue	<u>16,928</u>	
Direct expenses		
Net income	<u>16,928</u>	
Other income	<u>39</u>	
<b>Total revenue</b>		<u>435,029</u>

## Expenses

Program services	<u>308,341</u>	
Management and general	<u>41,445</u>	
Fundraising	<u>34,884</u>	
<b>Total expenses</b>		<u>384,670</u>
<b>Excess / (deficit)</b>		<u>50,359</u>

Changes -2Net Asset / Fund Balance at End of Year 124,727

## Reconciliation of Revenue

Total revenue per financial statements	
Less:	
Unrealized gains	
Donated services	
Recoveries	
Other	
Plus:	
Investment expenses	
Other	
<b>Total revenue per return</b>	<u>435,029</u>

## Reconciliation of Expenses

Total expenses per financial statements	
Less:	
Donated services	
Prior year adjustments	
Losses	
Other	
Plus:	
Investment expenses	
Other	
<b>Total expenses per return</b>	<u>384,670</u>

## Balance Sheet

	Beginning	Ending	Differences
Assets	<u>101,398</u>	<u>160,238</u>	
Liabilities	<u>27,028</u>	<u>35,511</u>	
Net assets	<u>74,370</u>	<u>124,727</u>	<u>50,357</u>

## Miscellaneous Information

Amended return

Return / extended due date 05/15/18

Failure to file penalty



Form **8879-EO****IRS e-file Signature Authorization  
for an Exempt Organization**

OMB No. 1545-1878

Department of the Treasury  
Internal Revenue Service

For calendar year 2017, or fiscal year beginning ..... 2017, and ending ..... 20 .....

▶ Do not send to the IRS. Keep for your records.  
▶ Go to [www.irs.gov/Form8879EO](http://www.irs.gov/Form8879EO) for the latest information.**2017**

Name of exempt organization

**GENTRY'S EDUCATION CENTER AT THE ST**

Employer identification number

**27-1202003**

Name and title of officer

**EVELYN HICKERSON  
EXECUTIVE DIRECTOR****Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	1b <b>435,029</b>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9) .....	2b
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22) .....	3b
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5) .....	4b
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c) .....	5b

**Part II Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize **REVOLUTION FINANCIAL SOLUTIONS, LLC** to enter my PIN **12474** as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Date ▶ **05/10/18****Part III Certification and Authentication**

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

**58384956299**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ **SANDY JOHNS, CPA**Date ▶ **05/10/18****ERO Must Retain This Form — See Instructions****Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2017)

Form **990**  
Department of the Treasury  
Internal Revenue Service

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

OMB No. 1545-0047  
**2017**  
**Open to Public Inspection**

**A** For the 2017 calendar year, or tax year beginning , and ending

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <div style="text-align: center;"><b>GENTRY'S EDUCATION CENTER AT THE ST</b></div> Doing business as <b>GENTRY FOUNDATION</b> Number and street (or P.O. box if mail is not delivered to street address) <b>4221 WARREN ROAD</b> City or town, state or province, country, and ZIP or foreign postal code <div style="display: flex; justify-content: space-between;"><b>FRANKLIN</b> <b>TN 37067</b></div>	<b>D</b> Employer identification number <b>27-1202003</b> <b>E</b> Telephone number <b>615-925-1033</b> <b>G</b> Gross receipts \$ <b>435,029</b>
<b>F</b> Name and address of principal officer: <b>EVELYN HICKERSON</b> <b>4221 WARREN RD</b> <b>FRANKLIN TN 37064</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: <b>WWW.GENTRYEDUCATIONFOUNDATION.COM</b> <b>H(c)</b> Group exemption number ▶		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>2010</b> <b>M</b> State of legal domicile: <b>TN</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>7</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>7</b>
	<b>5</b> Total number of individuals employed in calendar year 2017 (Part V, line 2a)	<b>5</b>	<b>10</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>40</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0</b>
<b>Revenue</b>		<b>Prior Year</b>	<b>Current Year</b>
	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>285,481</b>	<b>367,457</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>58,440</b>	<b>50,558</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>31</b>	<b>47</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>20,942</b>	<b>16,967</b>
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>364,894</b>	<b>435,029</b>
<b>Expenses</b>			
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<b>1,241</b>	<b>2,800</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		<b>0</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>306,145</b>	<b>326,454</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		<b>0</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>34,884</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<b>54,053</b>	<b>55,416</b>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>361,439</b>	<b>384,670</b>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>3,455</b>	<b>50,359</b>
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	<b>101,398</b>	<b>160,238</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>27,028</b>	<b>35,511</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>74,370</b>	<b>124,727</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <b>EVELYN HICKERSON</b> Type or print name and title	Date <b>EXECUTIVE DIRECTOR</b>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>SANDY JOHNS, CPA</b> Preparer's signature <b>SANDY JOHNS, CPA</b> Date <b>05/10/18</b> Check <input type="checkbox"/> if self-employed <input type="checkbox"/> PTIN <b>P00878474</b>	Firm's name ▶ <b>REVOLUTION FINANCIAL SOLUTIONS, LLC</b> Firm's EIN ▶ <b>80-0949289</b> Firm's address ▶ <b>1 W COURT SQ STE 750</b> <b>DECATUR, GA 30030-2545</b> Phone no. <b>678-883-2721</b>

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

**Part III Statement of Program Service Accomplishments**

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

☒

1 Briefly describe the organization's mission:

**SEE SCHEDULE O**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ **186,734** including grants of \$ ) (Revenue \$ **30,482** )**AFTER-SCHOOL TUTORING AT JOHNSON ELEMENTARY**

**AFTER-SCHOOL TUTORING IS OFFERED IN BOTH THE FALL AND THE SPRING AT JOHNSON ELEMENTARY SCHOOL. WE SERVE APPROXIMATELY 130 CHILDREN IN GRADES PRE-K THROUGH 4. DURING TUTORING, STUDENTS RECEIVE HOMEWORK HELP, INDIVIDUALIZED READING AND MATH TUTORING WITH STATE-CERTIFIED TEACHERS, MENTORING WITH CARING ADULTS AND ARE ABLE TO PARTICIPATE IN VARIOUS ENRICHMENT ACTIVITIES SUCH AS MUSIC, PHYSICAL EDUCATION, COOKING, SCIENCE AND CODING. OUR REGULAR ATTENDEES AVERAGED OVER A YEAR OF GROWTH IN BOTH MATH AND READING ACCORDING TO THE RESEARCH-BASED STAR TEST.**

4b (Code: ) (Expenses \$ **81,097** including grants of \$ ) (Revenue \$ **19,586** )**AFTER-SCHOOL TUTORING AT FREEDOM INTERMEDIATE SCHOOL**

**AFTER-SCHOOL TUTORING IS OFFERED IN BOTH THE FALL AND THE SPRING AT FREEDOM INTERMEDIATE SCHOOL. WE SERVE APPROXIMATELY 70 CHILDREN IN GRADES 5 AND 6. DURING TUTORING, STUDENTS RECEIVE HOMEWORK HELP, INDIVIDUALIZED READING AND MATH TUTORING WITH STATE-CERTIFIED TEACHERS, MENTORING WITH CARING ADULTS AND ARE ABLE TO PARTICIPATE IN VARIOUS ENRICHMENT ACTIVITIES SUCH AS MUSIC, PHYSICAL EDUCATION, COOKING, SCIENCE AND CODING. OUR REGULAR ATTENDEES AVERAGED OVER A YEAR OF GROWTH IN BOTH MATH AND READING ACCORDING TO THE RESEARCH-BASED STAR TEST.**

4c (Code: ) (Expenses \$ **37,710** including grants of \$ ) (Revenue \$ **490** )**SUMMER TUTORING CAMP-JUNE 2017**

**THE SUMMER TUTORING CAMP WAS A 2-WEEK CAMP FROM 8:00-3:00 WITH AVAILABLE AFTER-CARE FROM 3:00-5:30. THERE WERE 56 ATTENDEES. THE FOCUS OF THIS CAMP WAS INTENSIVE MATH AND READING INSTRUCTION, BUT STUDENTS ALSO PARTICIPATED IN PHYSICAL EDUCATION, CODING, ART, SCIENCE AND TOOK GUITAR AND PIANO LESSONS. MANY OF THE STUDENTS RECEIVED ONE-ON-ONE TUTORING IN EITHER READING OR MATH FOR AT LEAST 30 MINUTES EACH DAY OF THE CAMP.**

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

(Expenses \$ **2,800** including grants of \$ **2,800** ) (Revenue \$ )4e Total program service expenses **308,341**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>X</b>	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<b>X</b>	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<b>X</b>
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		<b>X</b>
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		<b>X</b>
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		<b>X</b>
<b>7</b> 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		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		<b>X</b>
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>X</b>	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		<b>X</b>
<b>c</b> 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		<b>X</b>
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>X</b>	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		<b>X</b>
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		<b>X</b>
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		<b>X</b>
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		<b>X</b>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		<b>X</b>
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		<b>X</b>
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<b>X</b>	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<b>X</b>

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		<b>X</b>
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		<b>X</b>
<b>23</b> 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		<b>X</b>
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		<b>X</b>
<b>b</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		<b>X</b>
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		<b>X</b>
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		<b>X</b>
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		<b>X</b>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		<b>X</b>
<b>33</b> 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		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<b>X</b>
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		<b>X</b>
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	<b>X</b>	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<b>1a</b> 78		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>		
<b>2a</b> 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	<b>2a</b> 10		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<b>3b</b>		
<b>4a</b> 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)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> 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?	<b>7a</b>		
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>		

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

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **TN**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **▶**

**REVOLUTION FINANCIAL SOLUTIONS, LLC1 W CT SQ STE 750  
 DECATUR**

GA 30030

678-883-2721

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <b>EVELYN HICKERSON</b>	30.00									
<b>EXECUTIVE DIRECTOR</b>	0.00	X		X				48,083	0	0
(2) <b>ERIN LEFKOVITZ</b>	20.00									
<b>ASSISTANT DIRECTOR</b>	0.00	X		X				14,400	0	0
(3) <b>VICTORIA CARTER</b>	5.00									
<b>DIRECTOR</b>	0.00	X						4,500	0	0
(4) <b>JORGE DOMINICIS</b>	0.50									
<b>DIRECTOR</b>	0.00	X						0	0	0
(5) <b>LOUIS UPKINS</b>	0.50									
<b>DIRECTOR</b>	0.00	X						0	0	0
(6) <b>EDWARD SMITH</b>	0.50									
<b>DIRECTOR</b>	0.00	X						0	0	0
(7) <b>JERRY BOYLE</b>	0.50									
<b>DIRECTOR</b>	0.00	X						0	0	0
(8) <b>BENJAMIN SOHR</b>	7.00									
<b>CHAIR</b>	0.00	X		X				0	0	0
(9) <b>CARY MCCLURE</b>	0.50									
<b>DIRECTOR</b>	0.00	X						0	0	0
(10)										
(11)										





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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>	200,425			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	167,032			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h</b> Total. Add lines 1a-1f		367,457			
<b>Program Service Revenue</b>	<b>2a</b> PROGRAM SERVICE FEES	Busn. Code 611710	50,558	50,558		
	<b>b</b>					
	<b>c</b>					
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
	<b>g</b> Total. Add lines 2a-2f		50,558			
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		47	47	
<b>4</b> Income from investment of tax-exempt bond proceeds						
<b>5</b> Royalties						
<b>6a</b> Gross rents		(i) Real (ii) Personal				
<b>b</b> Less: rental exps.						
<b>c</b> Rental inc. or (loss)						
<b>d</b> Net rental income or (loss)						
<b>7a</b> Gross amount from sales of assets other than inventory		(i) Securities (ii) Other				
<b>b</b> Less: cost or other basis & sales exps.						
<b>c</b> Gain or (loss)						
<b>d</b> Net gain or (loss)						
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		<b>a</b>	16,967			
<b>b</b> Less: direct expenses	<b>b</b>					
<b>c</b> Net income or (loss) from fundraising events		16,967				
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
<b>b</b> Less: direct expenses	<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
<b>b</b> Less: cost of goods sold	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>		<b>Busn. Code</b>				
<b>11a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e</b> Total. Add lines 11a-11d						
<b>12</b> Total revenue. See instructions.			435,029	50,605	0	0

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,800	2,800		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	314,810	276,078	28,547	10,185
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,644	10,215	1,052	377
11 Fees for services (non-employees):				
a Management				
b Legal	640		640	
c Accounting	11,647		5,877	5,770
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	25,890	6,575	763	18,552
12 Advertising and promotion				
13 Office expenses	921		921	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	1,929		1,929	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,387	4,387		
23 Insurance	3,946	3,946		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>CLASS MATERIALS/SUPPLIES</b>	1,630	1,630		
b <b>CONFERENCES &amp; MEETINGS</b>	1,423	1,423		
c <b>VOLUNTEER APPRECIATION</b>	1,414	20	1,394	
d <b>CAMP SUPPLIES</b>	1,000	1,000		
e All other expenses	589	267	322	
25 <b>Total functional expenses.</b> Add lines 1 through 24e	384,670	308,341	41,445	34,884
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest bearing	<b>79,502</b>	<b>1</b>	<b>133,463</b>
	<b>2</b> Savings and temporary cash investments		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net	<b>13,698</b>	<b>3</b>	<b>18,707</b>
	<b>4</b> Accounts receivable, net		<b>4</b>	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> <b>26,582</b>		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> <b>18,514</b>	<b>8,198</b>	<b>10c</b> <b>8,068</b>
	<b>11</b> Investments—publicly traded securities		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11		<b>13</b>	
	<b>14</b> Intangible assets		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11		<b>15</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		<b>101,398</b>	<b>16</b>	<b>160,238</b>
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	<b>10,000</b>	<b>17</b>	<b>7,605</b>
	<b>18</b> Grants payable		<b>18</b>	
	<b>19</b> Deferred revenue		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	<b>17,028</b>	<b>25</b>	<b>27,906</b>
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25	<b>27,028</b>	<b>26</b>	<b>35,511</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	<b>72,870</b>	<b>27</b>	<b>124,727</b>
	<b>28</b> Temporarily restricted net assets	<b>1,500</b>	<b>28</b>	
	<b>29</b> Permanently restricted net assets		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33</b> <b>Total net assets or fund balances</b>	<b>74,370</b>	<b>33</b>	<b>124,727</b>
<b>34</b> <b>Total liabilities and net assets/fund balances</b>	<b>101,398</b>	<b>34</b>	<b>160,238</b>	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>435,029</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>384,670</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>50,359</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	<b>74,370</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	<b>-2</b>
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	<b>124,727</b>

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	<b>X</b>	
<b>3a</b> 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?		<b>X</b>
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

**SCHEDULE A**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017****Open to Public  
Inspection**

Name of the organization

**GENTRY'S EDUCATION CENTER AT THE ST**

Employer identification number

**27-1202003****Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations:
- g Provide the following information about the supported organization(s).

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

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

Schedule A (Form 990 or 990-EZ) 2017

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 <b>Total support.</b> Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions)	12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ► <input type="checkbox"/>		

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	%
16a <b>33 1/3% support test—2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b <b>33 1/3% support test—2016.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2017.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test—2016.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.  
If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	105,606	171,238	300,322	285,481	367,457	1,230,104
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	113,099	104,641	94,887	80,257	67,533	460,417
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	218,705	275,879	395,209	365,738	434,990	1,690,521
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						1,690,521

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6	218,705	275,879	395,209	365,738	434,990	1,690,521
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	42					42
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	218,747	275,879	395,209	365,738	434,990	1,690,563
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	100.00 %
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15	<b>16</b>	100.00 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2016 Schedule A, Part III, line 17	<b>18</b>	%
<b>19a 33 1/3% support tests—2017.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
<b>b 33 1/3% support tests—2016.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ <input type="checkbox"/>		



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

**Part IV Supporting Organizations (continued)**

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally-Integrated Supporting Organizations**

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

**2 Activities Test. Answer (a) and (b) below.**

	Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 <b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d <b>Total</b> (add lines 1a, 1b, and 1c)	1d		
e <b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 <b>Minimum Asset Amount</b> (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

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

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in <b>Part VI</b> ). See instructions.		
7	<b>Total annual distributions.</b> Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.		
9	Distributable amount for 2017 from Section C, line 6		
10	Line 8 amount divided by line 9 amount		

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2017:			
a				
b	From 2013			
c	From 2014			
d	From 2015			
e	From 2016			
f	<b>Total</b> of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
7	<b>Excess distributions carryover to 2018.</b> Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014			
c	Excess from 2015			
d	Excess from 2016			
e	Excess from 2017			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**PART III, LINE 12 - OTHER INCOME DETAIL**

<b>MISCELLANEOUS</b>	<b>\$</b>	<b>42</b>
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**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

**2017**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

Employer identification number

GENTRY'S EDUCATION CENTER AT THE ST

27-1202003

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

## General Rule

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

## Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ .....

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

GENTRY'S EDUCATION CENTER AT THE ST

Employer identification number

27-1202003

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 12,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 200,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

GENTRY'S EDUCATION CENTER AT THE ST

Employer identification number

27-1202003

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 7,660	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes" on Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**Open to Public  
Inspection

Name of the organization

Employer identification number

**GENTRY'S EDUCATION CENTER AT THE ST****27-1202003****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

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

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

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

**Part II Conservation Easements.**

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

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

☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ .....

4 Number of states where property subject to conservation easement is located ▶ .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ .....

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ..... ▶ \$ .....

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ..... ▶ \$ .....

b Assets included in Form 990, Part X ..... ▶ \$ .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** ☐ Public exhibition  
**b** ☐ Scholarly research  
**c** ☐ Preservation for future generations  
**d** ☐ Loan or exchange programs  
**e** ☐ Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance .....  
**d** Additions during the year .....  
**e** Distributions during the year .....  
**f** Ending balance .....

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance					

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ ..... %  
**b** Permanent endowment ▶ ..... %  
**c** Temporarily restricted endowment ▶ ..... %

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations .....  
**(ii)** related organizations .....

**b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? .....

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

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

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		26,582	18,514	8,068
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				8,068

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments—Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) <b>ACCRUED WAGES</b>	<b>27,906</b>	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>27,906</b>	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐





**SCHEDULE G  
(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest instructions.

OMB No. 1545-0047

**2017**Open to Public  
Inspection

Name of the organization

**GENTRY'S EDUCATION CENTER AT THE ST**

Employer identification number

**27-1202003****Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☐ Mail solicitations                      **e** ☐ Solicitation of non-government grants  
**b** ☐ Internet and email solicitations      **f** ☐ Solicitation of government grants  
**c** ☐ Phone solicitations                      **g** ☐ Special fundraising events  
**d** ☐ In-person solicitations

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>1</b>						
<b>2</b>						
<b>3</b>						
<b>4</b>						
<b>5</b>						
<b>6</b>						
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						
<b>Total</b>		▶				

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 <b>TASTE OF WILLIA</b> (event type)	(b) Event #2 (event type)	(c) Other events <b>NONE</b> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts .....	16,928			16,928
	2 Less: Contributions ..				
	3 Gross income (line 1 minus line 2) .....	16,928			16,928
Direct Expenses	4 Cash prizes .....				
	5 Noncash prizes .....				
	6 Rent/facility costs .....				
	7 Food and beverages ..				
	8 Entertainment .....				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) .....				
11 Net income summary. Subtract line 10 from line 3, column (d) .....				16,928	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue .....				
Direct Expenses	2 Cash prizes .....				
	3 Noncash prizes .....				
	4 Rent/facility costs .....				
	5 Other direct expenses				
	6 Volunteer labor .....	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) .....				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) .....				

9 Enter the state(s) in which the organization conducts gaming activities: .....

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: .....

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: .....

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ .....

Address ▶ .....

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ ..... and the amount of gaming revenue retained by the third party ▶ \$ .....
- c If "Yes," enter name and address of the third party:

Name ▶ .....

Address ▶ .....

16 Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ .....

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.



**SCHEDULE O**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service

Name of the organization

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017****Open to Public  
Inspection****GENTRY'S EDUCATION CENTER AT THE ST**

Employer identification number

**27-1202003****FORM 990 - ORGANIZATION'S MISSION**

WE ASSIST AND PREPARE YOUNG PEOPLE IN OUR COMMUNITY FOR SCHOOL, WORK AND LIFE. WE PROVIDE RESEARCH-BASED, INDIVIDUALIZED ACADEMIC SUPPORT WITH STATE-CERTIFIED TEACHERS, MENTORING AND POSITIVE CHARACTER DEVELOPMENT, WHILE ENCOURAGING FAMILY ENGAGEMENT. OUR PARTICIPANTS CONSISTENTLY MAKE OVER A YEAR'S WORTH OF GROWTH IN READING AND MATH EACH YEAR ACCORDING TO RESEARCH BASED ASSESSMENTS, AND EXHIBIT POSITIVE CHANGES IN BEHAVIOR.

**FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT**

GRANTS MADE TO INDIVIDUALS - HOUSING SUPPORT FOR FAMILIES OF STUDENTS TO WHOM SERVICES DESCRIBED IN THE PRIMARY EXEMPT PURPOSE ACCOMPLISHMENTS ARE DELIVERED.

**FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS****JERRY BOYLE****ERIN LEFKOVITZ****DIRECTOR****ASST DIRECTO****FAMILY RELATIONSHIP****JORGE DOMINICUS****JERRY BOYLE****DIRECTOR****DIRECTOR****BUSINESS RELATIONSHIP****BENJAMIN SOHR****JERRY BOYLE****CHAIR****DIRECTOR****BUSINESS RELATIONSHIP**

Name of the organization

GENTRY'S EDUCATION CENTER AT THE ST

Employer identification number

27-1202003

CARY MCCLURE

JERRY BOYLE

DIRECTOR

DIRECTOR

BUSINESS RELATIONSHIP

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

FORM 990 IS MADE AVAILABLE TO BOARD MEMBERS AFTER FILING. EXECUTIVE

DIRECTOR AND ASSISTANT DIRECTOR REVIEW THE FORM BEFORE FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

EXECUTIVE DIRECTOR - SALARY WAS APPROVED BY THE BOARD AFTER DOING RESEARCH

ABOUT FAIR COMPENSATION FOR THE POSITION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

FORM 990 IS MADE AVAILABLE TO THE PUBLIC VIA THE WEBSITE, GUIDESTAR.ORG.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

IMMATERIAL RECONCILIATION ADJUSTMENT \$ -2

Form **4562**Department of the Treasury  
Internal Revenue Service (99)**Depreciation and Amortization**  
(Including Information on Listed Property)

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

**2017**Attachment  
Sequence No. **179**

Name(s) shown on return

**GENTRY'S EDUCATION CENTER AT THE ST**

Identifying number

**27-1202003**

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 instructions)	1	<b>510,000</b>
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	<b>2,030,000</b>
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2016 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12	13	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	<b>1,996</b>

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

17	MACRS deductions for assets placed in service in tax years beginning before 2017	17	<b>1,518</b>
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B—Assets Placed in Service During 2017 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		<b>4,365</b>	<b>5.0</b>	<b>HY</b>	<b>200DB</b>	<b>873</b>
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2017 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 instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	<b>4,387</b>
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** (2017)**THERE ARE NO AMOUNTS FOR PAGE 2**

Year Ended: December 31, 2017

27-1202003

GENTRY'S EDUCATION CENTER AT THE ST  
4221 WARREN ROAD  
FRANKLIN, TN 37067

**Electing out of Bonus Depreciation Allowance  
for 5-Year Property**

The above named taxpayer elects out of the first-year bonus depreciation allowance under IRC Section 168(k)(7) for all eligible 5-year depreciable property placed in service during the tax year.

Year Ended: December 31, 2017

27-1202003

GENTRY'S EDUCATION CENTER AT THE ST  
4221 WARREN ROAD  
FRANKLIN, TN 37067

**Electing out of Bonus Depreciation Allowance for  
All Eligible Depreciable Property**

The above named taxpayer elects out of the first-year bonus depreciation allowance under IRC Section 168(k)(7) for all eligible depreciable property placed in service during the tax year.

GENTRYSEDUC GENTRY'S EDUCATION CENTER AT THE ST  
27-1202003  
FYE: 12/31/2017

05/10/2018 7:50 AM

**Federal Asset Report**

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>5-year GDS Property:</b>									
11	PROMETHEAN BOARD	5/18/17	4,365			4,365	5 HY 200DB	0	873
			<u>4,365</u>			<u>4,365</u>		<u>0</u>	<u>873</u>
<b>Prior MACRS:</b>									
6	APPLE COMPUTER	1/11/15	1,199			1,199	5 HY 200DB	623	231
7	PROMETHEAN BOARD	4/21/15	2,972			2,972	5 HY 200DB	1,545	571
8	COMPUTER - SITE DIRECTOR	8/09/15	1,552			1,552	5 HY 200DB	807	298
9	PROTECH ELMO PROJECTOR	12/14/15	514			514	5 HY 200DB	267	99
10	APPLE COMPUTER	2/06/16	999			999	5 HY 200DB	200	319
			<u>7,236</u>			<u>7,236</u>		<u>3,442</u>	<u>1,518</u>
<b>Other Depreciation:</b>									
1	COMPUTERS	7/01/11	4,000			4,000	5 MO S/L	4,000	0
2	COMPUTERS	7/28/12	2,401			2,401	5 MO S/L	2,121	280
3	COMPUTER	1/31/14	3,440			3,440	5 MO S/L	2,007	688
4	APPLE COMPUTER	2/01/14	1,999			1,999	5 MO S/L	1,166	400
5	MAC COMPUTER	12/15/14	3,141			3,141	5 MO S/L	1,283	628
	<b>Total Other Depreciation</b>		<u>14,981</u>			<u>14,981</u>		<u>10,577</u>	<u>1,996</u>
	<b>Total ACRS and Other Depreciation</b>		<u>14,981</u>			<u>14,981</u>		<u>10,577</u>	<u>1,996</u>
	<b>Grand Totals</b>		26,582			26,582		14,019	4,387
	<b>Less: Dispositions and Transfers</b>		0			0		0	0
	<b>Less: Start-up/Org Expense</b>		0			0		0	0
	<b>Net Grand Totals</b>		<u>26,582</u>			<u>26,582</u>		<u>14,019</u>	<u>4,387</u>

**TN Asset Report**  
**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Basis for Depr	TN Prior	TN Current	Federal Current	Difference Fed - TN
<b>5-year GDS Property:</b>								
11	PROMETHEAN BOARD	5/18/17	4,365	4,365	0	873	873	0
			<u>4,365</u>	<u>4,365</u>	<u>0</u>	<u>873</u>	<u>873</u>	<u>0</u>
<b>Prior MACRS:</b>								
6	APPLE COMPUTER	1/11/15	1,199	1,199	623	231	231	0
7	PROMETHEAN BOARD	4/21/15	2,972	2,972	1,545	571	571	0
8	COMPUTER - SITE DIRECTOR	8/09/15	1,552	1,552	807	298	298	0
9	PROTECH ELMO PROJECTOR	12/14/15	514	514	267	99	99	0
10	APPLE COMPUTER	2/06/16	999	999	200	319	319	0
			<u>7,236</u>	<u>7,236</u>	<u>3,442</u>	<u>1,518</u>	<u>1,518</u>	<u>0</u>
<b>Other Depreciation:</b>								
1	COMPUTERS	7/01/11	4,000	4,000	4,000	0	0	0
2	COMPUTERS	7/28/12	2,401	2,401	2,121	280	280	0
3	COMPUTER	1/31/14	3,440	3,440	2,007	688	688	0
4	APPLE COMPUTER	2/01/14	1,999	1,999	1,166	400	400	0
5	MAC COMPUTER	12/15/14	3,141	3,141	1,283	628	628	0
	<b>Total Other Depreciation</b>		<u>14,981</u>	<u>14,981</u>	<u>10,577</u>	<u>1,996</u>	<u>1,996</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>14,981</u>	<u>14,981</u>	<u>10,577</u>	<u>1,996</u>	<u>1,996</u>	<u>0</u>
	<b>Grand Totals</b>		26,582	26,582	14,019	4,387	4,387	0
	<b>Less: Dispositions</b>		0	0	0	0	0	0
	<b>Less: Start-up/Org Expense</b>		0	0	0	0	0	0
	<b>Net Grand Totals</b>		<u>26,582</u>	<u>26,582</u>	<u>14,019</u>	<u>4,387</u>	<u>4,387</u>	<u>0</u>

27-1202003

**AMT Asset Report**

FYE: 12/31/2017

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
<b>5-year GDS Property:</b>									
11	PROMETHEAN BOARD	5/18/17	4,365			4,365	5 HY 150DB	0	655
			<u>4,365</u>			<u>4,365</u>		<u>0</u>	<u>655</u>
<b>Prior MACRS:</b>									
1	COMPUTERS	7/01/11	4,000		X	0	5 HY 200DB	4,000	0
2	COMPUTERS	7/28/12	2,401		X	1,200	5 HY 200DB	2,332	69
3	COMPUTER	1/31/14	3,440		X	1,720	5 HY 200DB	2,944	199
4	APPLE COMPUTER	2/01/14	1,999		X	999	5 HY 200DB	1,711	116
6	APPLE COMPUTER	1/11/15	1,199			1,199	5 HY 150DB	486	214
7	PROMETHEAN BOARD	4/21/15	2,972			2,972	5 HY 150DB	1,204	530
8	COMPUTER - SITE DIRECTOR	8/09/15	1,552			1,552	5 HY 150DB	629	277
9	PROTECH ELMO PROJECTOR	12/14/15	514			514	5 HY 150DB	208	92
10	APPLE COMPUTER	2/06/16	999			999	5 HY 150DB	150	255
			<u>19,076</u>			<u>11,155</u>		<u>13,664</u>	<u>1,752</u>
<b>Other Depreciation:</b>									
5	MAC COMPUTER	12/15/14	0			0	0 HY	0	0
	<b>Total Other Depreciation</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Grand Totals</b>		23,441			15,520		13,664	2,407
	<b>Less: Dispositions and Transfers</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>23,441</u>			<u>15,520</u>		<u>13,664</u>	<u>2,407</u>



GENTRYSEDUC GENTRY'S EDUCATION CENTER AT THE ST  
 27-1202003  
 FYE: 12/31/2017

**Depreciation Adjustment Report**  
**All Business Activities**

05/10/2018 7:50 AM

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
<b>MACRS Adjustments:</b>						
Page 1	1	6	APPLE COMPUTER	231	214	17
Page 1	1	7	PROMETHEAN BOARD	571	530	41
Page 1	1	8	COMPUTER - SITE DIRECTOR	298	277	21
Page 1	1	9	PROTECH ELMO PROJECTOR	99	92	7
Page 1	1	10	APPLE COMPUTER	319	255	64
Page 1	1	11	PROMETHEAN BOARD	873	655	218
				<u>2,391</u>	<u>2,023</u>	<u>368</u>

27-1202003

**Future Depreciation Report****FYE: 12/31/18**

FYE: 12/31/2017

**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<b><u>Prior MACRS:</u></b>					
6	APPLE COMPUTER	1/11/15	1,199	138	199
7	PROMETHEAN BOARD	4/21/15	2,972	342	495
8	COMPUTER - SITE DIRECTOR	8/09/15	1,552	179	258
9	PROTECH ELMO PROJECTOR	12/14/15	514	59	86
10	APPLE COMPUTER	2/06/16	999	192	178
11	PROMETHEAN BOARD	5/18/17	4,365	1,397	1,113
			<u>11,601</u>	<u>2,307</u>	<u>2,329</u>
<b><u>Other Depreciation:</u></b>					
1	COMPUTERS	7/01/11	4,000	0	0
2	COMPUTERS	7/28/12	2,401	0	0
3	COMPUTER	1/31/14	3,440	688	198
4	APPLE COMPUTER	2/01/14	1,999	400	115
5	MAC COMPUTER	12/15/14	3,141	628	0
	<b>Total Other Depreciation</b>		<u>14,981</u>	<u>1,716</u>	<u>313</u>
	<b>Total ACRS and Other Depreciation</b>		<u>14,981</u>	<u>1,716</u>	<u>313</u>
	<b>Grand Totals</b>		<u>26,582</u>	<u>4,023</u>	<u>2,642</u>

27-1202003

**TN Future Depreciation Report****FYE: 12/31/18**

FYE: 12/31/2017

**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>TN</u>
--------------	--------------------	------------------------	-------------	-----------

**Prior MACRS:**

6	APPLE COMPUTER	1/11/15	1,199	138
7	PROMETHEAN BOARD	4/21/15	2,972	342
8	COMPUTER - SITE DIRECTOR	8/09/15	1,552	179
9	PROTECH ELMO PROJECTOR	12/14/15	514	59
10	APPLE COMPUTER	2/06/16	999	192
11	PROMETHEAN BOARD	5/18/17	4,365	1,397
			<u>11,601</u>	<u>2,307</u>

**Other Depreciation:**

1	COMPUTERS	7/01/11	4,000	0
2	COMPUTERS	7/28/12	2,401	0
3	COMPUTER	1/31/14	3,440	688
4	APPLE COMPUTER	2/01/14	1,999	400
5	MAC COMPUTER	12/15/14	3,141	628

**Total Other Depreciation**14,981 1,716**Total ACRS and Other Depreciation**14,981 1,716**Grand Totals**26,582 4,023

Form <b>990</b>	<b>Two Year Comparison Report</b>	<b>2016 &amp; 2017</b>
For calendar year 2017, or tax year beginning _____, ending _____		

Name

Taxpayer Identification Number

**GENTRY'S EDUCATION CENTER AT THE ST****27-1202003**

		2016	2017	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	1. 125,810	167,032	41,222
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3. 159,671	200,425	40,754
	4. Program service revenue	4. 58,440	50,558	-7,882
	5. Investment income	5. 31	47	16
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7.		
	8. Net income or (loss) from fundraising events	8. 20,942	16,967	-3,975
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11.		
	12. <b>Total revenue.</b> Add lines 1 through 11	12. 364,894	435,029	70,135
<b>Expenses</b>	13. Grants and similar amounts paid	13. 1,241	2,800	1,559
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 306,145	326,454	20,309
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 29,804	38,177	8,373
	19. Occupancy, rent, utilities, and maintenance	19.		
	20. Depreciation and Depletion	20. 4,726	4,387	-339
	21. Other expenses	21. 19,523	12,852	-6,671
	22. <b>Total expenses.</b> Add lines 13 through 21	22. 361,439	384,670	23,231
	23. <b>Excess or (Deficit).</b> Subtract line 22 from line 12	23. 3,455	50,359	46,904
<b>Other Information</b>	24. Total exempt revenue	24. 364,894	435,029	70,135
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 58,471	50,605	-7,866
	27. Total assets	27. 101,398	160,238	58,840
	28. Total liabilities	28. 27,028	35,511	8,483
	29. Retained earnings	29. 74,370	124,727	50,357
	30. Number of voting members of governing body	30. 7	7	
	31. Number of independent voting members of governing body	31. 7	7	
	32. Number of employees	32. 9	10	
	33. Number of volunteers	33.	40	

Form **990**

## Tax Return History

**2017**

Name

**GENTRY'S EDUCATION CENTER AT THE ST**

Employer Identification Number

**27-1202003**

	2013	2014	2015	2016	2017	2018
Contributions, gifts, grants .....	105,606	168,828	300,322	285,481	367,457	
Membership dues .....						
Program service revenue .....	113,099	102,231	89,044	58,440	50,558	
Capital gain or loss .....						
Investment income .....				31	47	
Fundraising revenue (income/loss) .....			5,416	20,942	16,967	
Gaming revenue (income/loss) .....						
Other revenue .....	42	2,410				
<b>Total revenue</b> .....	<b>218,747</b>	<b>273,469</b>	<b>394,782</b>	<b>364,894</b>	<b>435,029</b>	
Grants and similar amounts paid .....				1,241	2,800	
Benefits paid to or for members .....						
Compensation of officers, etc. ....						
Other compensation .....	41,046	214,564	68,256	306,145	326,454	
Professional fees .....	149,333	19,901	248,703	29,804	38,177	
Occupancy costs .....						
Depreciation and depletion .....	1,279	2,305	4,242	4,726	4,387	
Other expenses .....	10,744	23,832	31,921	19,523	12,852	
<b>Total expenses</b> .....	<b>202,402</b>	<b>260,602</b>	<b>353,122</b>	<b>361,439</b>	<b>384,670</b>	
<b>Excess or (Deficit)</b> .....	<b>16,345</b>	<b>12,867</b>	<b>41,660</b>	<b>3,455</b>	<b>50,359</b>	
<b>Total exempt revenue</b> .....	<b>218,747</b>	<b>273,469</b>	<b>394,782</b>	<b>364,894</b>	<b>435,029</b>	
Total unrelated revenue .....						
Total excludable revenue .....	113,141	104,641	89,044	58,471	50,605	
Total Assets .....	34,249	48,236	93,901	101,398	160,238	
Total Liabilities .....	17,863	18,983	22,986	27,028	35,511	
Net Fund Balances .....	16,386	29,253	70,915	74,370	124,727	

Form **990T**

## Tax Return History

**2017**

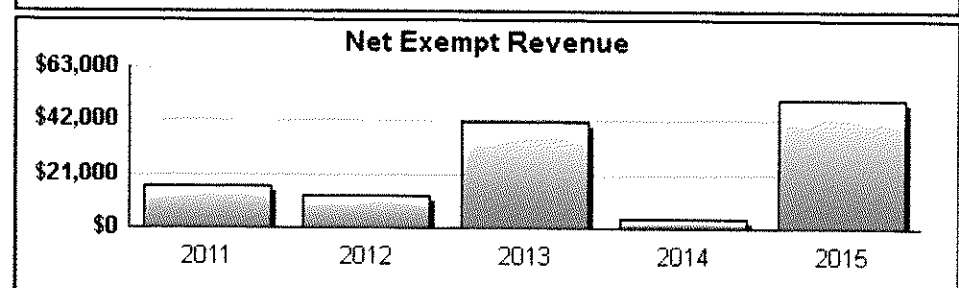
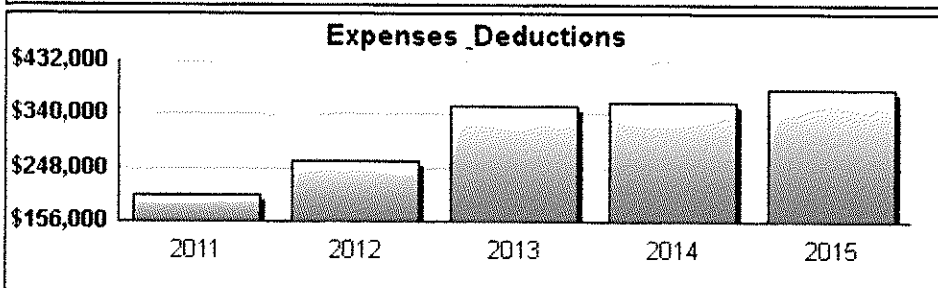
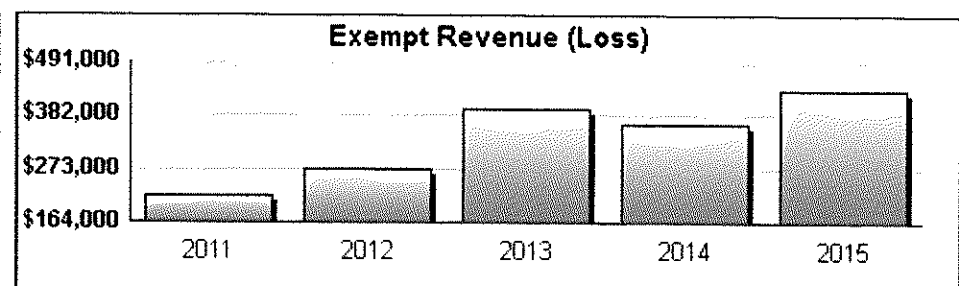
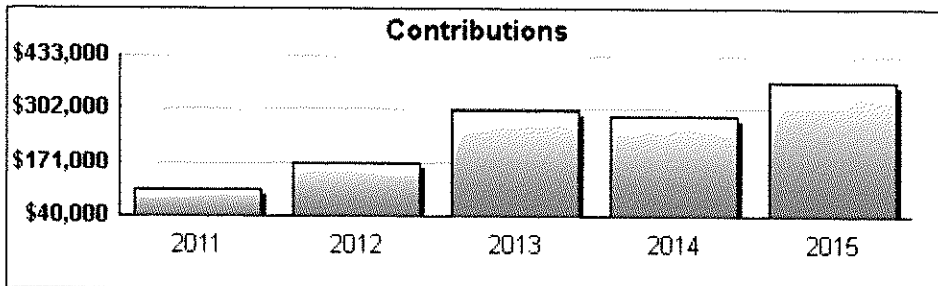
Name

**GENTRY'S EDUCATION CENTER AT THE ST**

Employer Identification Number

**27-1202003**

	2013	2014	2015	2016	2017	2018
Business activity profit/loss .....						
Capital gains/losses .....						
Partner and S Corp gain/loss .....						
Rental income* .....						
Debt-financed income* .....						
Controlled organizations income/interest* .....						
Investment income, specific organizations* .....						
Exploited exempt activity income* .....						
Other income .....						
<b>Total trade or business income.</b> .....						
Compensation of officers, ect. ....						
Other salaries and wages .....						
Repairs and maintenance .....						
Bad debts .....						
Interest .....						
Taxes and licenses .....						
Charitable contributions .....						
Depreciation and Depletion .....						
Deferred compensation plans .....						
Employee benefit programs .....						



Form **990T**

## Tax Return History

**2017**

Name

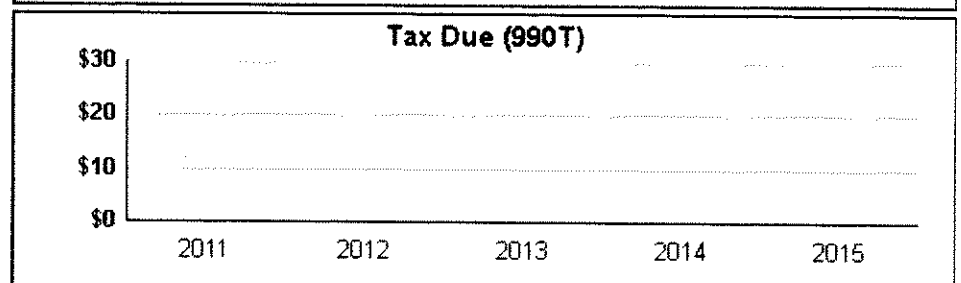
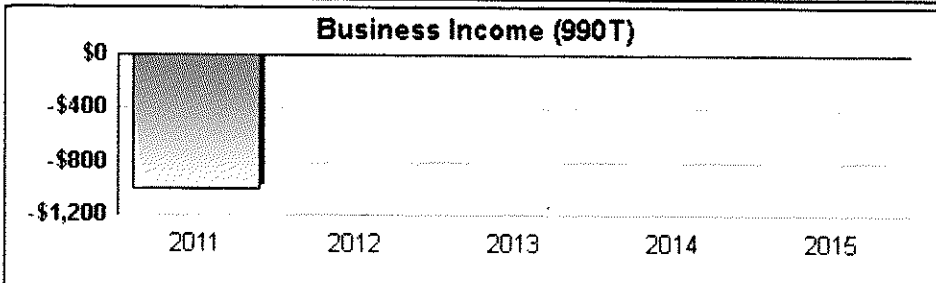
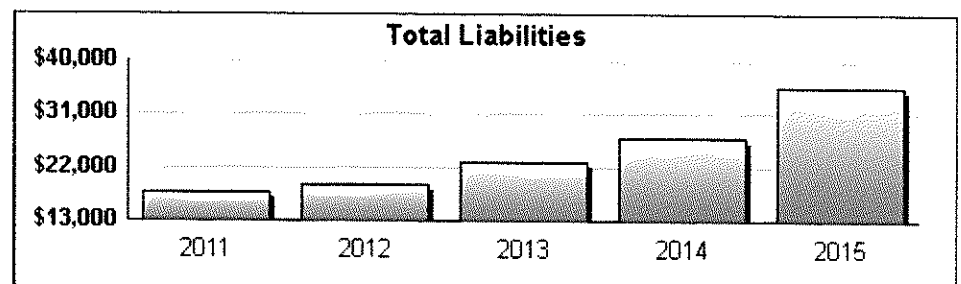
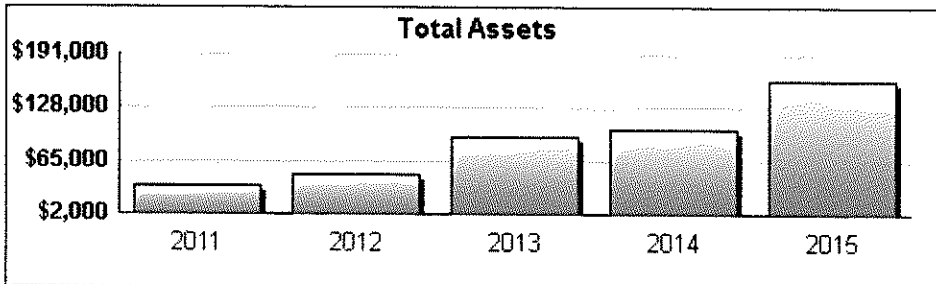
**GENTRY'S EDUCATION CENTER AT THE ST**

Employer Identification Number

**27-1202003**

	2013	2014	2015	2016	2017	2018
Other deductions .....						
Net operating loss deduction .....						
Specific deduction .....	<b>1,000</b>					
Income after expense and deductions .....	<b>-1,000</b>					
Income tax (corporate or trust) .....						
Other taxes .....						
<b>Total taxes</b> .....						
General business credit .....						
Other credits .....						
<b>Net tax after credits</b> .....						
Estimated tax payments .....						
Other payments .....						
<b>Balance due/Overpayment</b> .....						

\* Income shown net of expenses



**Taxable Interest on Investments**

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
INTEREST INCOME	\$ 47					
TOTAL	\$ 47					

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACT SERVICES	\$ 25,890	\$ 6,575	\$ 763	\$ 18,552
TOTAL	\$ 25,890	\$ 6,575	\$ 763	\$ 18,552

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
MEALS & ENTERTAINMENT	\$ 229	\$	\$ 229	\$
LICENSES & PERMITS	200	107	93	
FIELD TRIPS	127	127		
FOOD & NUTRITION	33	33		
TOTAL	\$ 589	\$ 267	\$ 322	\$ 0



**Schedule A, Part III, Line 2(e)**

Description	Amount
PROGRAM SERVICE FEES	\$ 50,558
INTEREST INCOME	47
TASTE OF WILLIAMSON	16,928
TOTAL	\$ <u>67,533</u>

Tennessee Secretary of State  
Tre Hargett



Division of Charitable Solicitations, Fantasy Sports, and Gaming  
312 Rosa L. Parks Avenue, 8<sup>th</sup> Floor  
Nashville, Tennessee 37243-1102

Mona Hart  
Director

615-741-2555  
Mona.Hart@tn.gov

July 30, 2018

Evelyn Hickerson  
Gentry's Education Center @ the Store Front, Inc.  
4221 Warren Road  
Franklin, TN 37067

RE: **APPROVAL** - Registration to Solicit Funds for Charitable Purposes  
Gentry's Education Center @ the Store Front, Inc. - CO20587  
Registration Expiration Date: **June 30, 2019**

Dear Evelyn Hickerson:

Pursuant to Tenn. Code Ann. § 48-101-501, *et seq.*, the Division of Charitable Solicitations and Gaming has reviewed your submitted application and is pleased to announce your organization's registration to solicit contributions has been **approved**.

With this approval, your organization has new responsibilities for maintaining statutory compliance, including submission of the proper documents and required fees on an annual basis. The required filings include:

- Completed *Application to Renew Registration* form
- Completed *Summary of Financial Activities* form
- IRS determination letter granting tax-exempt status, if not previously filed
- IRS *Form 990*, *Form 990EZ*, or *990N* for the most recently completed accounting year, if the organization qualifies as tax-exempt
- An audited financial statement if the organization grossed more than \$500,000 in revenue
- Any amendments to the organization's governing documents

The *Application to Renew Registration* and *Summary of Financial Activities* forms are available on our website at <http://sos.tn.gov/charitable>. Additionally, the "CO" number listed above will serve as your organization's identification number specific to this division and should be included on all correspondence.

Please also be advised that if the organization's application or other provided information includes false, misleading or deceptive statements, appropriate action will be taken. Pursuant to the Tennessee Charitable Solicitations Act, a civil penalty of up to five thousand dollars (\$5,000) may be assessed for any violation.

Thank you for registering your organization and please do not hesitate to contact us with any questions.

Sincerely,

Tre Hargett  
Secretary of State

ERD:CO20587