Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public 1

A	For the	e 2011 calendar year, or tax year beginning JUL 1, 2011 and	ending	JUN 30, 2012							
В	Check if applicable	c Name of organization		D Employer identif	ication number						
	Addre	PRAIRIE CREEK COMMUNITY SCHOOL			E20416						
L	Name chang			530416							
	Initial return Termin ated	Tibilibol alla oli oct (Tibilibol alla oli oct (Tibili	ite E Telephone numbe 507 -	645-9640							
	Amen			G Gross receipts \$	1,761,622.						
	Applic	NORTHFIELD, MN 55057	H(a) Is this a group r	eturn							
	pendi	F Name and address of principal officer: SIMON TYLER		for affiliates?							
		SAME AS C ABOVE		H(b) Are all affiliates in	cluded? Yes No						
T	Tax-ex	empt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) c	or 5	27 If "No," attach a	a list. (see instructions)						
J	Websi	e: WWW.PRAIRIECREEK.ORG		H(c) Group exemption							
K	orm of	organization: X Corporation	L Ye	ar of formation: 2002	M State of legal domicile; MN						
	art I	Summary									
-	1	Briefly describe the organization's mission or most significant activities: DEDIC	CATEI	TO PROVIDIN	rG						
Activities & Governance		IMAGINATIVE TEACHING IN AN ATMOSPHERE OF	MUTU	JAL RESPECT.							
rna	2	Check this box if the organization discontinued its operations or dispos			ssets.						
ove		Number of voting members of the governing body (Part VI, line 1a)		The second secon	9						
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)		4	7						
SS		Total number of individuals employed in calendar year 2011 (Part V, line 2a)			40						
iţi		Total number of volunteers (estimate if necessary)			90						
ई		Total unrelated business revenue from Part VIII, column (C), line 12									
Þ	Sec. 22.20	Net unrelated business taxable income from Form 990-T, line 34			0.						
_				Prior Year	Current Year						
A)	8	Contributions and grants (Part VIII, line 1h)	1,547,496.								
nu	4	Program service revenue (Part VIII, line 2g)	11 17	157,959.	152,710.						
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,159.	3,052.						
ŭ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		21,943.	20,524.						
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,730,557.	1,756,073.						
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.						
		Benefits paid to or for members (Part IX, column (A), line 4)									
s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,022,011.	1,063,177.						
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
ber		Total fundraising expenses (Part IX, column (D), line 25)	0.								
й		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		590,123.	630,790.						
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	200000000000000000000000000000000000000	1,612,134.							
	277000	Revenue less expenses. Subtract line 18 from line 12		118,423.	62,106.						
ros Ses				Beginning of Current Year							
Assets or Balances	20	Total assets (Part X, line 16)		1,065,612.							
ASB	21	Total liabilities (Part X, line 26)		108,953.							
荖	22	Net assets or fund balances, Subtract line 21 from line 20		956,659.	1,018,765.						
15	art II	Signature Block									
		lties of perjury, I declare that I have examined this return, including accompanying schedules			ly knowledge and belief, it is						
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich prepa	rer has any knowledge.							
Sig	n	Signature of officer		Date							
Her	e	SIMON TYLER, SCHOOL DIRECTOR									
		Type or print name and title									
		Print/Type preparer's name Preparer's pignature		Date Check	PTIN						
Pai	d	XIAOYAN LUO		04/29/13 self-emplo	P01305207						
Pre	parer	Firm's name CLIFTONLARSONALLEN LLP		Firm's EIN ▶	41-0746749						
Use	Only	Firm's address 220 SOUTH SIXTH STREET, SVITE 30	00		40 000 4000						
		MINNEAPOLIS, MN 55402		Phone no. 6	12-376-4500						
May	y the II	as discuss this return with the preparer shown above? (see instructions)			X Yes No						

Form	1000 [2011]	42-1530416	Page 2
Pai	rt III Statement of Program Service Accomplishments		[37]
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission: THE SCHOOL IS DEDICATED TO PROVIDING IMAGINATIVE TEACHING	IN AN	
	ATMOSPHERE OF MUTUAL RESPECT.		
2	Did the organization undertake any significant program services during the year which were not listed on		[37]
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.	<u> </u>	V
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	LA No
	If "Yes," describe these changes on Schedule O.	WW 1072104 1082506	
4	Describe the organization's program service accomplishments for each of its three largest program services, as m		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of gra	ants and allocations to	3
-	others, the total expenses, and revenue, if any, for each program service reported.	152	710.)
4a	(Code:)(Expanses \$ 1,455,934. including grants of \$ 0.) (Revenue SPRAIRIE CREEK (PCCS) IS A COMMUNITY SCHOOL. PARENTS, TEAC		
	AND STUDENTS COOPERATE WITH ONE ANOTHER, AND WITH OTHERS	OUTSTDE TH	E .
	SCHOOL TO CREATE A JOYFUL AND CHALLENGING CLIMATE FOR LES	DNING DCC	g Tg
	A CHILD-CENTERED SCHOOL. WE HELP CHILDREN DISCOVER THE PO	MED AND	0 10
	EXCITEMENT OF THEIR MINDS, THEIR FEELINGS AND BODIES, THE	TIE ENCOUR	ACE
	RELATIONSHIPS, THEIR ART. WE ASSURE CHILDREN OF THEIR VAI	TIMO COULT	ME
	THEIR ACCOMPLISHMENTS, AND RESPECT THEIR INDIVIDUAL LEARN	ATMG STITES	• ME
	VALUE DIVERSITY. PCCS IS A PROGRESSIVE SCHOOL. WE EMPHASI		
	COOPERATION, PROMOTE SELF-REFLECTION, SUPPORT INNOVATION,		
	CHANGE. WE SHARE OUR PHILOSOPHY AND PRACTICE WITH OTHERS		FROM
	THEM. PCCS AIMS TO MAKE THE WORLD A BETTER PLACE. WE VALUE	JE JUSTICE,	
	GENDER-FAIRNESS, AND CONFLICT RESOLUTION. WE EDUCATE CHIL		VE
4b	(Code:) (Expenses \$) (Revenue \$	·)
	MANAGEMENT AND ADMINISTRATION OF THE PROPERTY		
	THE RESERVE OF THE PROPERTY OF		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	3)
		\ 	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 1,455,934.		
132002	ann assente a non committee at a		0 (2011)
02-09-	SEE SCHEDULE O FOR CONTINUATION(S)	1	

Form	1990 (2011) PRAIRIE CREEK COMMUNITY SCHOOL 42-1530	416	Р	age 3
Pa	tt V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			٠
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. 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	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			177
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	_	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			١,,
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			\ _v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	1.0		1 37
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			177
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	_	Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			1,7
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1/1/45/8/8	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	100		
	as applicable.	SELECTION OF SELEC	333	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	name:	,	
	Part VI	11a	Х	_
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	11b		Х
C	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 167 If "Yes," complete Schedule D, Part VIII	11c	-	X
d	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	l		- V
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	-	Α.
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	l		- v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	-	Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		- v	
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	l		l 🕶
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Х	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	A	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	Λ.
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	445		х
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	_	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4.5		х
72.72	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	-	1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	100		x
nanaz	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	_	Λ.
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	_	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	х	
1444	1c and 8a? If "Yes," complete Schedule G, Part II	18	Λ	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	,,		x
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	2011)
		rom	JJU (2011)

11000	The Checking of Fieduned Concadios Contained	_		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	0.4		х
00	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	-	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	22		х
-00	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23		х
٠.	Schedule J	23		- 22
24	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			ĺ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		x
	Schedule K. If "No", go to line 25	24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		-
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
	any tax-exempt bonds?	24c		-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	_	_
258	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		x
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Λ.
ŧ	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	055		х
	Schedule L, Part I	25b	-	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			x
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	-	Δ.
27	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			x
1212	of any of these persons? If "Yes," complete Schedule L, Part III	27	CHOINS	A
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):		X	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	_	
•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			- v
5721	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Λ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			х
	contributions? If "Yes," complete Schedule M	30		Λ.
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Х
	If "Yes," complete Schedule N, Part I	31	_	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			Х
	Schedule N, Part II	32		Α_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			х
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		Λ
34	Was the organization related to any tax-exempt or taxable entity?			х
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	Λ
Ŀ	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			v
2.2.	section 512(b)(13)? If 'Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			х
29/20	and that is treated as a partnership for federal income tax purposes? If "Yes, ' complete Schedule R, Part VI	37		Λ.
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	х	
	Note. All Form 990 filers are required to complete Schedule O	38 Form		3044)
		1 1 1 1 1 1 1 1		

Form 990 (2011)

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. V

	Check if Schedule O contains a response to any question in this Part VI					Δ							
Sec	tion A. Governing Body and Management				iso-	133							
			T	OFFICE	Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		9									
	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.			7									
b	Enter the number of voting members included in line 1a, above, who are independent												
2	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?												
3	Did the organization delegate control over management duties customarily performed by or under the					٦,							
	of officers, directors, or trustees, or key employees to a management company or other person? \dots				-	X							
4													
5	et descrives de la companya de la villaga de la companya del companya del companya de la company												
6													
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or	936	37								
	more members of the governing body?			. 7a	Х								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			,,,							
	persons other than the governing body?			. 7b	I F Soles	X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	ie following:										
а	The governing body?				X								
b	Each committee with authority to act on behalf of the governing body?			. 8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re				1	٦,							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			. 9	-	Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	e Code.)		-								
*					Yes	_							
	Did the organization have local chapters, branches, or affiliates?			. 10a	├	Х							
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?												
	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?												
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.												
12a					77	_							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	ifficts?	. 12b	X								
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escribe	1.2	v								
	in Schedule O how this was done			. 12c	X	v							
13	Did the organization have a written whistleblower policy?			- VY 61	-	X							
14	Did the organization have a written document retention and destruction policy?			. 14	S SECTION S	A							
15	Did the process for determining compensation of the following persons include a review and approve		ndependent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			200	V								
	The organization's CEO, Executive Director, or top management official			. 15a	X	₩							
b	Other officers or key employees of the organization			. 15b	100.042	X							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		2021										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange					X							
	taxable entity during the year?			. 16a	3 Sense	Λ							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			12.2									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	anizatio	n's			arai							
_	exempt status with respect to such arrangements?			. 16b									
	tion C. Disclosure												
17	List the states with which a copy of this Form 990 is required to be filed MN	T /0	Non- 504/-1/0\ 1	A a	ble	_							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	I (Sec	tion 501(c)(3)s only) avalla	DIO								
	for public inspection. Indicate how you made these available. Check all that apply.												
	Own website Another's website X Upon request	(4)			1-1								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	onflict	of interest policy,	and tina	ncial								
	statements available to the public during the tax year.												
20	State the name, physical address, and telephone number of the person who possesses the books a	and rec	ords of the organi	zation: J									
	ONA SHEETS - 507-645-9640												
132000	27695 DENMARK AVE., NORTHFIELD, MN 55057			-	. 000	0044							

01-23-12

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

Check if Schedule O contains a response to any question in this Part VII

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		orga	aniza			mpei	nsat			
(A)	(B)			Pos	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	heck	more	than	one	Reportable	Reportable	Estimated
4	hours per	box, unless person is both officer and a director/truste			is bot or/trus	tee)	compensation	compensation from related	amount of other	
	week	\vdash	Γ			Г	_	from the	organizations	compensation
	(describe hours for	individual trustee or director				_		organization	(W-2/1099-MISC)	from the
	related	10 67	otto			sate		(W-2/1099-MISC)	111 21 1000 1110 01	organization
	organizations	truste	Institutional trustoe		yee	mper		,,,		and related
	in Schedule	qual	ution	h.	Key employee	sst co	19			organizations
	0)	Indiv	Instit	Officer	Key e	Highest compensated employee	Бот			
(1) DANIEL KELLEY									_	
BOARD CHAIR	1.00	Х	_	X				0.	0.	0.
(2) PAUL HAGER	1 2 2 2									_
BOARD TREASURER	1.00	X		X	_	_		0.	0.	0.
(3) ROZ EATON NEEB		000								0
BOARD SECRETARY/FACULTY	1.00	X	_	X	_	_		0.	0.	0.
(4) RANDY CLAY	1 00	١.,							0.	0.
TRUSTEE	1.00	X.	-	_	_	-		0.	0.	0.
(5) TRISH FERRETT	1 1 00	١,,						0.	0.	0.
TRUSTEE	1.00	Х	_	_	_	-	_	0.	0.	<u></u>
(6) BONNIE JEAN FLOM	1 00	\ _v						0.	0.	0.
TRUSTEE	1.00	X	-	-		-		0.	0.	0.
(7) LAURA MEDWETZ	40.00	x						47,080.	0.	2,707.
TRUSTRE/FACULTY (8) CATHY OEHMKE	40.00	^	-	-	-	-	-	47,000.		2,707.
TRUSTEE/FACULTY	40.00	x						45,054.	0.	2,590.
(9) HEIDI WELSCH	40.00	Λ	\vdash	-	-	-		45,054.	•	27000
TRUSTEE	1.00	х						0.	0.	0.
(10) SIMON TYLER	2.00		-	-	-	-				
SCHOOL DIRECTOR	40.00			х				29,284.	0.	5,508.
(11) KEITH JOHNSON	10,00				\vdash					
CFO	4.00			х				0.	0.	0.
										207
					Г					
					_					
City is a second of the second		_		_	_		_			
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Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mple	oyee	s, a	nd I	High	est	Compensated Employ	ees (continued)			
(A)	(B)	Γ	(C)					(D)	(E)		(F)	
Name and title	Average	145		Pos				Reportable	Reportable	,	Estimated	
	hours per	(do not check more than one box, unless person is both ar					h an	compensation	compensation		amount of	
	week	_	cer ar	d a d	irecto	or/trus	tee)	from	from related	i	other	
	(describe	ndividual trustee or director						the	organization	57 Telescope	compensation	
	hours for	F	_			ted		organization	(W-2/1099-MI	3C)	from the	
	related	a a a a	uster			ensa		(W-2/1099-MISC)			organization	
	organizations	Ē	nal to		oyee	amp a					and related	
	in Schedule O)	Indu	institutional trustee	Officer	Key employee	hest	iğ.				organizations	
F	related organizations in Schedule O) Figure 1 Figure 2 Figure 2 Figure 3 Figur											
											20.	
										- 1	1	
(a)		\vdash	\vdash	_	┝	\vdash			*	\neg		
	8											
		\vdash	Н	\vdash	\vdash		\vdash			-		
	6											
P = 10 = 10 = 10 = 10 = 10 = 10 = 10 = 1		-			\vdash		_					
						1						
**************************************		L	_	_	_	_	_		-	-		
	,											
									Live in the second			
1b Sub-total						•		121,418.		0.	10,805.	
c Total from continuation sheets to Part VI	I. Section A		******		•••••	>		0.		0.	0.	
d Total (add lines 1b and 1c)						200		121,418.		0.	10,805.	
Total number of individuals (including but n							00 10		000 of reportab	le.		
compensation from the organization	or invited to the	030	norc	u a	3041	-, ····		sesived more triair proc	,ooo or repertue		. 0	
compensation non the organization		-			_	_	_			2.0	Yes No	
0 034	and the same of the same		2 122		2212					- 1		
3 Did the organization list any former officer,	director, or tru	stee	e, ke	y en	npio	yee,	OI I	nignest compensated ei	inployee on		3 X	
line 1a? If "Yes," complete Schedule J for s												
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150											4 X	
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes," com				ıch j	oers	on .					5 X	
Section B. Independent Contractors												
1 Complete this table for your five highest con	mpensated inc	iepe	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of com	pens	ation from	
the organization. Report compensation for t	the calendar ye	ear e	endl	ng w	ith (or wi	ithir	the organization's tax y	/ear.			
(A)								(B)			(C)	
Name and business	address	NC	ONE	C				Description of s	ervices	С	ompensation	
							\neg			5 7		
							1					
					_		7					
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											20	
			115-1				\perp			TERRITORIA		
2 Total number of independent contractors (in		ot lir	nite	of to	thos	se lis	ted	above) who received m	ore than			
\$100,000 of compensation from the organiz	ration 🕨				_()				制造		
											Form 990 (2011)	

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respon-			78:	L
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				ренициональный п
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	120 202	07 421	24 702	
	trustees, and key employees	132,223.	97,431.	34,792.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	107 750	107 750		
	persons described in section 4958(c)(3)(B)	127,758.	127,758.	82,419.	
7	Other salaries and wages	633,015.	550,596.	04,419.	
8	Pension plan accruals and contributions (include	40 400	41,892.	7 606	
	section 401(k) and section 403(b) employer contributions)	49,498. 59,308.	37,805.	7,606. 21,503.	
9	Other employee benefits	61,375.	53,731.	7,644.	
0	Payroll taxes	01,3/5.	33,731.	7,044.	
1	Fees for services (non-employees):				
	Management	4,900.		4,900.	
	Legal	16,243.		16,243.	
	Accounting	10,243.		10,243.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	83,787.	49,713.	34,074.	
g	Other	05,707.	47,713.	31,071	
2	Advertising and promotion	121,219.	109,268.	11,951.	
3	Office expenses	141,419.	100,200.	11,551.	
4	Information technology				
5	Royalties	259,520.	257,296.	2,224.	
6	Occupancy	12,391.	12,391.	2,221	
7	Travel Payments of travel or entertainment expenses	14,351.	24,552.		
8					
	for any federal, state, or local public officials	9,735.	8,075.	1,660.	
9	Conferences, conventions, and meetings	5,755.	0,0,5.	27000	
0	Interest Payments to affiliates				
1		40,276.	39,522.	754.	
22	Depreciation, depletion, and amortization	8,069.	8,069.		
4	Other expenses, Iternize expenses not covered	7,005			
.4	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.)				
а	SPECIAL EDUCATION	33,102.	33,102.		
b	CAPITAL EXPENDITURES	28,806.	28,806.		
C	DUES AND MEMBERSHIPS	12,742.	479.	12,263.	
d		, , , , , , ,			
e	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	1,693,967.	1,455,934.	238,033.	0
6	Joint costs. Complete this line only if the organization		201 1 2020 50 50 50 50 50 50 50 50 50 50 50 50 50		
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Part X Balance Sheet (A) Beginning of year (B) End of year 107,265. 155,280. Cash - non-interest-bearing 2 Savings and temporary cash investments Pledges and grants receivable, net 418,566. 564,358. Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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) Notes and loans receivable, net Inventories for sale or use 17,618. 4,592. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 606,237 basis. Complete Part VI of Schedule D _____ 10a 459,300. 146,937. 487,174. b Less: accumulated depreciation ______ 10b 10c Investments - publicly traded securities 11 Investments · other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 1,065,612. 1,148,541. 16 Total assets. Add lines 1 through 15 (must equal line 34) ... 94,132. 119,883. Accounts payable and accrued expenses 17 18 Grants payable _____ 14,821. 9,893. 19 Deferred revenue _____ 19 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 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 108,953. 129,776. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets 27 Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 💹 and complete lines 30 through 34. 410,867. 506,854. Capital stock or trust principal, or current funds 30 459,300. 487,174. Paid-in or capital surplus, or land, building, or equipment fund 31 58,618. 52,611. Retained earnings, endowment, accumulated income, or other funds 32 1,018,765. 956,659. Total net assets or fund balances 1,148,541. 065,612. Total liabilities and net assets/fund balances

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Form 990 (2011) PRAIRIE CREEK COMMUNITY SCHOOL 42-153										
Pa	rt XI Reconciliation of Net Assets				-3-00					
	Check if Schedule O contains a response to any question in this Part XI									
1	Total revenue (must equal Part VIII, column (A), line 12)	1				$\frac{73.}{67.}$				
2	P. Total expenses (must equal Part IX, column (A), line 25)									
3	Revenue less expenses. Subtract line 2 from line 1	3		62,3						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	956,						
5	Other changes in net assets or fund balances (explain in Schedule O)	5								
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,(18	,7	65.				
Pa	Financial Statements and Reporting					[]				
	Check if Schedule O contains a response to any question in this Part XII				res l	No				
1	Accounting method used to prepare the Form 990: Cash Accrual X Other SEE SCH O If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.									
2a										
b	Were the organization's financial statements audited by an independent accountant?			b	Х	_				
¢	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,									
d	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. If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a									
	separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis									
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Au	dit			22				
	Act and OMB Circular A-133?			Ba	_	_X_				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			ь						
			Fo	m 9	90 (2	2011)				