

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2014, or fiscal year beginning 7/01, 2014, and ending 6/30, 20 15

2014

Department of the Treasury
Internal Revenue Service

u Do not send to the IRS. Keep for your records.
u Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Name of exempt organization

BARTLETT LEARNING CENTER, INC.

Employer identification number

36-2778655

Name and title of officer

**MICHAEL KELLY
PRESIDENT**

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 1 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	4,758,787
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, Part I, line 3c or Part II, line 8c)	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 2014 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 _____ to enter my PIN as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2014 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 2014 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 } **10/29/15**

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.

36115260187

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 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 } _____

Date } **10/29/15**

**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** (2014)

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.
Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning 07/01/14, and ending 06/30/15

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
BARTLETT LEARNING CENTER, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
125 E. SEMINARY AVENUE

City or town, state or province, country, and ZIP or foreign postal code
WHEATON IL 60187

D Employer identification number
36-2778655

E Telephone number
630-289-4221

G Gross receipts \$ **4,786,107**

F Name and address of principal officer:
MICHAEL KELLY
125 E. SEMINARY AVENUE
WHEATON IL 60187

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () **t** (insert no.) 4947(a)(1) or 527

J Website: **WWW.BLCINC.ORG** **H(c)** Group exemption number **u**

K Form of organization: Corporation Trust Association Other **u** **L** Year of formation: **1987** **M** State of legal domicile: **IL**

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
AN EDUCATIONAL FACILITY LICENSED TO PROVIDE ASSISTANCE TO STUDENTS WITH LEARNING DISABILITIES, HANDICAPS AND BEHAVIORAL DISORDERS. THE CENTER ALSO PROVIDES AN INDEPENDENT LIVING FACILITY FOR MENTALLY HANDICAPPED ADULTS.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) **3 13**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4 13**

5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) **5 146**

6 Total number of volunteers (estimate if necessary) **6 20**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a 0**

b Net unrelated business taxable income from Form 990-T, line 34 **7b 0**

Revenue		Prior Year	Current Year
		8 Contributions and grants (Part VIII, line 1h)	466,627
9 Program service revenue (Part VIII, line 2g)	3,912,721	4,376,320	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,262	24	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-5,556	-4,853	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,372,530	4,758,787	

Expenses		Prior Year	Current Year
		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)		0	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,289,295	3,964,563	
16a Professional fundraising fees (Part IX, column (A), line 11e)		0	
b Total fundraising expenses (Part IX, column (D), line 25) u 80,329			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	744,907	666,029	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,034,202	4,630,592	
19 Revenue less expenses. Subtract line 18 from line 12	-661,672	128,195	

Net Assets or Fund Balances		Beginning of Current Year	End of Year
		20 Total assets (Part X, line 16)	3,729,453
21 Total liabilities (Part X, line 26)	2,136,940	2,293,916	
22 Net assets or fund balances. Subtract line 21 from line 20	1,592,513	1,755,603	

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.

Sign Here

Signature of officer: **MICHAEL KELLY** Date: **PRESIDENT**

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **MICHAEL A. MOYSKI** Preparer's signature: _____ Date: _____ Check if self-employed PTIN: **P00107801**

Firm's name: **Mathieson, Moyski, Austin & Co., LLP** Firm's EIN: **36-3480013**

Firm's address: **211 South Wheaton Avenue Suite 300 Wheaton, IL 60187** Phone no.: **630-653-1616**

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:

AN EDUCATIONAL FACILITY LICENSED TO PROVIDE ASSISTANCE TO STUDENTS WITH LEARNING DISABILITIES, HANDICAPS AND BEHAVIORAL DISORDERS. THE CENTER ALSO PROVIDES AN INDEPENDENT LIVING FACILITY FOR MENTALLY HANDICAPPED ADULTS.

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 \$ **4,077,413** including grants of \$) (Revenue \$ **4,283,676**)
CLARE WOODS ACADEMY - DAY SCHOOL EDUCATIONAL FACILITY LICENSED TO PROVIDE ASSISTANCE TO STUDENTS WITH LEARNING DISABILITIES, HANDICAPS, AND BEHAVIORAL DISORDERS

4b (Code:) (Expenses \$ **430,343** including grants of \$) (Revenue \$ **92,644**)
CUPERTINO HOME - PROVIDES AN INDEPENDENT LIVING FACILITY FOR MENTALLY HANDICAPPED ADULTS

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **u 4,507,756**

Part IV 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	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		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		X
5	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		X
6	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	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		X
10	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		X
11	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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
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 16? If "Yes," complete Schedule D, Part VIII		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 Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f	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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
15	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		X
16	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		X
17	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)		X
18	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	X	
19	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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

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

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

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

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
1b	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?		X
3	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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	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		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?		X
15	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?		
a	The organization's CEO, Executive Director, or top management official		X
b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u IL**
- 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: **u**

SHARYL FAGANEL **125 E. SEMINARY AVENUE** **IL 60187** **630-289-4221**
WHEATON

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) MICHAEL KELLY	1.00									
PRESIDENT	0.00	X		X			0	0	0	
(2) DR. RICHARD NEY	1.00									
VICE PRESIDENT	0.00	X		X			0	0	0	
(3) SR. ANN MARY WUNDRACH	1.00									
SECRETARY	0.00	X		X			0	0	0	
(4) SR. JEANNE CONZEMIUS	1.00									
TREASURER	0.00	X		X			0	0	0	
(5) SR. DOLORES FISHER	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(6) DEREK JOHNSON	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(7) TONY LANGFELD	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(8) SR. ROSEMARIE MOROWCZYNSKI	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(9) REESE PECK	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(10) GINO PERONTI	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(11) JEFF PIPER	1.00									
BOARD MEMBER	0.00	X					0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(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			
(12) DREW SANDLER BOARD MEMBER	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
(13) VERONICA SOLTYSIAK BOARD MEMBER	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
(14) JOHN UTTERBACK EXECUTIVE DIRECTOR	40.00 0.00			<input checked="" type="checkbox"/>				91,444	0	8,743
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total								91,444		8,743
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								91,444		8,743

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u 0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u 0**

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	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	33,584			
	d Related organizations	1d				
	e Government grants (contributions)	1e	271,319			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	82,393			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f	u	387,296			
Program Service Revenue	2a TUITION AND FEES	Busn. Code	4,253,883	4,253,883		
	b ROOM AND BOARD		92,644	92,644		
	c LUNCH REVENUE		26,768	26,768		
	d SCHOOL ACTIVITIES		3,025	3,025		
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f	u	4,376,320			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	24		24	
	4 Income from investment of tax-exempt bond proceeds	u				
	5 Royalties	u				
	6a Gross rents	(i) Real				
		(ii) Personal				
	b Less: rental exps.					
	c Rental inc. or (loss)					
	d Net rental income or (loss)	u				
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	b Less: cost or other basis & sales exps.					
	c Gain or (loss)					
	d Net gain or (loss)	u				
	8a Gross income from fundraising events (not including \$ 33,584 of contributions reported on line 1c). See Part IV, line 18	a	18,266			
		b Less: direct expenses	b	27,320		
c Net income or (loss) from fundraising events		u	-9,054			
9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	u				
10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	u				
Miscellaneous Revenue		Busn. Code				
11a MISCELLANEOUS		4,201	4,201			
b						
c						
d All other revenue						
e Total. Add lines 11a-11d	u	4,201				
12 Total revenue. See instructions.	u	4,758,787	4,380,521	0	24	

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				
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	105,000	105,000		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	6,589	6,589		
7 Other salaries and wages	3,098,943	3,012,773	29,170	57,000
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	75,970	74,260		1,710
9 Other employee benefits	428,458	426,943		1,515
10 Payroll taxes	249,603	245,241		4,362
11 Fees for services (non-employees):				
a Management				
b Legal	6,935	6,935		
c Accounting	50,790	50,790		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
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.)	93,913	93,913		
12 Advertising and promotion				
13 Office expenses	26,417	11,151	9,585	5,681
14 Information technology	9,696	9,542		154
15 Royalties				
16 Occupancy	113,755	113,755		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	67,528	67,528		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	105,751	105,751		
23 Insurance	59,610	59,610		
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 SUPPORT PROGRAMS	44,793	44,793		
b OUTSIDE SERVICES	14,586	13,942		644
c TELEPHONE	12,946	12,257		689
d MISCELLANEOUS	12,500	9,588	2,912	
e All other expenses	46,809	37,395	840	8,574
25 Total functional expenses. Add lines 1 through 24e	4,630,592	4,507,756	42,507	80,329
26 Joint costs. 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	
Assets	1	Cash—non-interest bearing	40,451	1	521,096
	2	Savings and temporary cash investments	36,474	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	463,729	4	359,045
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	21,021	9	52,001
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,204,243		
	b	Less: accumulated depreciation	10b 1,095,395	10c 3,167,238	3,108,848
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	540	15	8,529
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,729,453	16	4,049,519	
Liabilities	17	Accounts payable and accrued expenses	315,642	17	518,797
	18	Grants payable		18	
	19	Deferred revenue	210,932	19	223,524
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	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		22	
	23	Secured mortgages and notes payable to unrelated third parties	1,254,810	23	1,196,039
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	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	355,556	25	355,556
	26	Total liabilities. Add lines 17 through 25	2,136,940	26	2,293,916
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,592,513	27	1,755,603
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	1,592,513	33	1,755,603	
34	Total liabilities and net assets/fund balances	3,729,453	34	4,049,519	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,758,787
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,630,592
3	Revenue less expenses. Subtract line 2 from line 1	3	128,195
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,592,513
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	34,895
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,755,603

Part XII Financial Statements and Reporting

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

		Yes	No
1	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.		
2a	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 type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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.	X	
3a	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?		X
3b	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)

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.
u Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

u Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

BARTLETT LEARNING CENTER, INC.

Employer identification number

36-2778655

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 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - 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 1-9 above or IRC section (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)						
Total						

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

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First five years. 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 stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 %
15 Public support percentage from 2013 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test—2013. 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 stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test—2014. 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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test—2013. 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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 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

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First five years. 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 stop here

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Value, Percentage. Row 15: Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2013 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Value, Percentage. Row 17: Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2013 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests—2014. 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 stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2013. 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 stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
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 11a or 11b 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 (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
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).		
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 9(a)) 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 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) 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.)		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	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	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

		Yes	No
1	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 Part VI 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.		
2	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 Part VI 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
1	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 Part VI 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
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	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 Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	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 Part VI 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	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> 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.		
a	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 Part VI 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	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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	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 Part VI .		
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 Part VI 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. 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	Adjusted Net Income (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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount 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	Minimum Asset Amount (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	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 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 Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 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-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

u Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

2014

Name of the organization

Employer identification number

BARTLETT LEARNING CENTER, INC.

36-2778655

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 foundation

Check 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 33¹/₃ % 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization BARTLETT LEARNING CENTER, INC.	Employer identification number 36-2778655
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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	MR. AND MRS. KEITH CARMAN 507 NORTH TOMAH PROSPECT HEIGHTS IL 60007	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	FRED J. BRUNNER FOUNDATION 9300 KING AVENUE FRANKLIN PARK IL 60131	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	HANOVER TOWNSHIP 250 SOUTH ILLINOIS ROUTE 59 BARTLETT IL 60103	\$ 7,111	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	ILLINOIS STATE COUNCIL KNIGHTS OF COLUMBUS 187 S. INDIANA AVENUE KANKAKEE IL 60901	\$ 14,028	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	ILLINOIS DEPARTMENT OF HUMAN SERVICE 401 SOUTH CLINTON CHICAGO IL 60607	\$ 271,319	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.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. u Attach to Form 990.

u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

Employer identification number

BARTLETT LEARNING CENTER, INC.

36-2778655

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-8 regarding conservation easements.

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1a-1b regarding collections of art and historical treasures.

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" to 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
1c	
1d	
1e	
1f	

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 in Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g 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 **u** %
 - b** Permanent endowment **u** %
 - c** Temporarily restricted endowment **u** %
- The percentages in 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

	Yes	No
3a(i)		
3a(ii)		
3b		

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

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" to 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
1a Land		267,000		267,000
b Buildings		3,145,607	387,546	2,758,061
c Leasehold improvements				
d Equipment		494,333	469,769	24,564
e Other		297,303	238,080	59,223
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)		u		3,108,848

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to 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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) u		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to 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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) u		

Part IX Other Assets.

Complete if the organization answered "Yes" to 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)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) u	

Part X Other Liabilities.

Complete if the organization answered "Yes" to 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) DUE TO SISTERS OF ST. JOSEPH	355,556	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) u	355,556	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	4,786,107
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	27,320
e	Add lines 2a through 2d	2e	27,320
3	Subtract line 2e from line 1	3	4,758,787
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	4,758,787

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	4,657,912
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	27,320
e	Add lines 2a through 2d	2e	27,320
3	Subtract line 2e from line 1	3	4,630,592
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	4,630,592

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X - FIN 48 Footnote

THE CENTER FILES TAX RETURNS IN THE US FEDERAL JURISDICTION AND ILLINOIS WITH FEW EXCEPTIONS. THE CENTER IS NO LONGER SUBJECT TO US FEDERAL AND STATE INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2011. THE CENTER DOES NOT EXPECT A MATERIAL NET CHANGE IN UNRECOGNIZED TAX BENEFITS IN THE NEXT TWELVE MONTHS.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

FUNDRAISING EXPENSES \$ 27,320

Part XII, Line 2d - Expense Amounts Included in Financials - Other

FUNDRAISING EXPENSES \$ 27,320

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Schools

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

u Attach to Form 990 or Form 990-EZ.

u Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public
Inspection

BARTLETT LEARNING CENTER, INC.

Employer identification number

36-2778655

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	X	
NON-DISCRIMINATION POLICY IS PUBLISHED IN THE DAILY HERALD		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency?	X	
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered "Yes" to either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	X	

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).

Sch E - Financial Aid or Government Assistance Explanation

**ALL TUITION IS PAID TO BARTLETT LEARNING CENTER BY THE STATE OF ILLINOIS
AND LOCAL SCHOOL DISTRICTS. THE STUDENTS DO NOT PAY FOR THEIR TUITION.**

**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2014

Department of the Treasury
Internal Revenue Service

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

U Attach to Form 990 or Form 990-EZ.

U Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

BARTLETT LEARNING CENTER, INC.

Employer identification number

36-2778655

Part I

Fundraising Activities. Complete if the organization answered "Yes" to 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
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

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 ten 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			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

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" to 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) Event #2	(c) Other events	(d) Total events
		<u>GOLF OUTING</u> (event type)	<u>GALA</u> (event type)	<u>None</u> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	29,265	22,585	51,850
	2	Less: Contributions	15,535	18,049	33,584
	3	Gross income (line 1 minus line 2)	13,730	4,536	18,266
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	10,293		10,293
	7	Food and beverages	12,075	4,751	16,826
	8	Entertainment			
	9	Other direct expenses		201	201
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-9,054

Part III Gaming. Complete if the organization answered "Yes" to 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: _____

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Transactions With Interested Persons

u Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

u Attach to Form 990 or Form 990-EZ.

u Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open To Public Inspection

Employer identification number

36-2778655

BARTLETT LEARNING CENTER, INC.

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 **u** \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization **u** \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total **u** \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues?	
					Yes	No
(1)	PHIL KELLY	SON OF PRES	3,829	PARAPROFESSIONAL		X
(2)	MARY UTTERBACK	DAUGHTER OF ED	2,760	TEACHER		X
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (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.

u Attach to Form 990 or 990-EZ.

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

**Open to Public
Inspection**

Employer identification number

BARTLETT LEARNING CENTER, INC.

36-2778655

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

FORM 990 IS EMAILED TO ALL BOARD MEMBERS FOR THEIR REVIEW PRIOR TO FILING

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

THE CORPORATION MONITORS THE POLICY AND UPDATES ON A REGULAR BASIS

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

ALL GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Form 990, Part XI, Line 9 - Reconciliation of Changes - Other

FUNDRAISING EXPENSES **\$ 27,320**

FUNDRAISING EXPENSES **\$ -27,320**

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

u Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

u Attach to Form 990.

u Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

BARTLETT LEARNING CENTER, INC.

Employer identification number

36-2778655

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) SISTERS OF ST. JOSEPH OF THE THIRD 1300 MARIA DRIVE 35-0873343 STEVENS POINT WI 54481	RELIGIOUS	IN	501c3	1	N/A		X
(2)							
(3)							
(4)							
(5)							

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispro- portionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SISTERS OF ST JOSEPH OF THE THIRD	e	355,556	VALUE AT TIME OF LOAN
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2014

Attachment Sequence No. **179**

BARTLETT LEARNING CENTER, INC.

Identifying number

36-2778655

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	500,000
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	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see 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 2013 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (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	105,751

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2014	17	0
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 <input checked="" type="checkbox"/>		

Section B—Assets Placed in Service During 2014 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						
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	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2014 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	105,751
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.

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other Depreciation:									
1	Business Card	8/31/13	1,302			1,302	5 MO S/L	217	260
2	Laminator	10/31/13	950			950	5 MO S/L	127	190
3	Business Card	11/23/13	1,368			1,368	5 MO S/L	160	273
4	Grainger	1/14/14	1,687			1,687	5 MO S/L	169	337
5	Metro Professional	1/31/14	555			555	5 MO S/L	46	111
6	American Pride	5/31/14	1,524			1,524	5 MO S/L	25	305
7	Dell	9/03/13	562			562	5 MO S/L	94	112
8	Dell	10/27/13	2,808			2,808	5 MO S/L	374	562
9	Dell	2/06/14	1,254			1,254	5 MO S/L	105	250
10	Automobile - Wheaton	7/01/14	9,954			9,954	5 MO S/L	0	1,991
11	Current Technology	7/12/13	12,216			12,216	10 MO S/L	1,222	1,221
12	HSInc	7/30/13	31,492			31,492	39 MO S/L	740	808
13	Current Technology	8/06/13	12,215			12,215	10 MO S/L	1,120	1,221
14	HSInc	8/31/13	51,882			51,882	39 MO S/L	1,109	1,330
15	HSInc	8/31/13	81,543			81,543	39 MO S/L	1,742	2,091
16	HSInc	10/21/13	9,694			9,694	39 MO S/L	166	248
17	HSInc	10/31/13	70,279			70,279	39 MO S/L	1,201	1,802
18	CTI	11/30/13	10,233			10,233	10 MO S/L	597	1,023
19	HSInc	11/30/13	4,400			4,400	39 MO S/L	66	113
20	Am Drapery	11/30/13	1,523			1,523	10 MO S/L	89	152
21	Security Service	11/30/13	2,191			2,191	10 MO S/L	128	219
22	HSInc	4/01/14	14,376			14,376	39 MO S/L	92	369
23	Automobile - Wheaton	9/03/09	78,112			78,112	5 MO S/L	78,112	0
24	Ford E350 2006 - Wheaton	10/01/06	14,746			14,746	5 MO S/L	14,746	0
25	2007 Vans - Wheaton	1/01/08	36,936			36,936	5 MO S/L	36,936	0
26	2009 Ford E350 - Warrenville	5/31/11	18,188			18,188	5 MO S/L	18,188	0
27	Minivan - Warrenville	1/16/13	20,211			20,211	5 MO S/L	15,402	4,042
28	Wheaton Building	4/08/13	2,469,054			2,469,054	39 MO S/L	76,498	63,310
29	Building Improvement	8/31/12	9,062			9,062	39 MO S/L	436	232
30	Warrenville Building	9/15/90	166,506			166,506	32 MO S/L	125,653	5,204
31	Carpet	3/05/93	670			670	10 MO S/L	670	0
32	Remodeled Bath	3/31/96	5,060			5,060	39 MO S/L	2,379	129
33	Bathroom Fixture	10/10/95	2,000			2,000	15 MO S/L	2,000	0
34	Flooring	8/22/96	687			687	10 MO S/L	687	0
35	Remodeling	3/31/97	10,491			10,491	15 MO S/L	9,966	525
36	Furnace	12/05/96	9,118			9,118	15 MO S/L	8,864	254
37	Improvements	5/05/03	24,951			24,951	10 MO S/L	24,951	0
38	Concrete Work	11/30/03	4,269			4,269	27 MO S/L	1,499	158
39	Shower Surrounding	8/13/04	1,770			1,770	27 MO S/L	591	66
40	Improvements	6/30/06	2,243			2,243	7 MO S/L	2,243	0
41	Improvements	6/30/07	3,848			3,848	5 MO S/L	3,848	0
42	Equipment	12/31/07	3,912			3,912	7 MO S/L	3,633	279
43	Equipment	12/31/07	1,743			1,743	5 MO S/L	1,743	0
44	Sprinkler Systems	12/31/08	5,375			5,375	7 MO S/L	4,223	768
45	Dynamic Fire	1/31/10	11,550			11,550	7 MO S/L	6,600	1,650
46	Building Permit	7/31/11	1,115			1,115	10 MO S/L	325	112
47	Washing Machine	8/31/11	716			716	5 MO S/L	406	143
48	Remodeling	10/18/11	99,145			99,145	39 MO S/L	6,779	2,542
49	Remodeling	3/31/12	4,690			4,690	39 MO S/L	271	120
50	Stove	5/31/12	703			703	5 MO S/L	293	141
51	New Window	5/31/12	1,385			1,385	10 MO S/L	289	138
52	Computer Equipment (01-08)	1/15/08	126,740			126,740	5 MO S/L	126,740	0
53	Computer Equipment	6/30/09	2,053			2,053	5 MO S/L	2,053	0
54	Dell Computer	1/31/10	1,587			1,587	5 MO S/L	1,270	317
55	ADPA, Inc.	7/31/10	535			535	5 MO S/L	535	0
56	Dell Commercial	7/31/10	3,205			3,205	5 MO S/L	3,205	0
57	Dell Commercial	12/31/10	667			667	5 MO S/L	667	0
58	Apple Computer	3/31/11	4,489			4,489	5 MO S/L	4,489	0
59	Projector	8/31/11	2,606			2,606	5 MO S/L	1,477	521
60	Computer	8/31/11	618			618	5 MO S/L	350	124
61	Laptop	12/15/11	727			727	5 MO S/L	376	145
62	High Resolution	4/30/12	639			639	5 MO S/L	277	128
63	Server	5/31/12	2,061			2,061	5 MO S/L	859	412
64	Computer Security	8/23/12	572			572	5 MO S/L	488	84
65	Equipment (00-08)	6/30/08	201,464			201,464	10 MO S/L	201,464	0
66	Capital Telecom	1/31/10	6,725			6,725	5 MO S/L	6,053	672
67	Carpeting	11/30/10	2,234			2,234	5 MO S/L	2,234	0
68	Business Card	11/30/10	930			930	5 MO S/L	930	0

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
69	Air Conditioner	6/30/11	2,600			2,600	5 MO S/L	2,600	0
70	Equipment Kare	1/31/11	2,125			2,125	5 MO S/L	2,125	0
71	Carpeting	7/31/11	1,850			1,850	5 MO S/L	1,079	370
72	Vacuum	8/31/11	546			546	5 MO S/L	309	109
73	Folding Chairs	4/30/12	10,495			10,495	7 MO S/L	3,249	1,499
74	Carpeting	8/31/11	1,850			1,850	5 MO S/L	1,048	370
75	Printer	5/30/13	800			800	5 MO S/L	640	160
76	Partitions	5/31/13	933			933	7 MO S/L	666	134
77	2 Mattress Sets	11/30/12	699			699	7 MO S/L	500	99
78	Dresser	1/31/13	620			620	7 MO S/L	443	88
79	Dryer	3/31/13	964			964	7 MO S/L	689	137
80	Outside Somers	6/28/04	1,626			1,626	7 MO S/L	1,626	0
81	Computer Lab	11/30/03	1,324			1,324	7 MO S/L	1,324	0
82	25 Chairs	6/30/05	2,497			2,497	7 MO S/L	2,497	0
83	Land - Wheaton	4/08/13	267,000			267,000	0 -- Land	0	0
84	Various Land Improvements	6/30/92	31,928			31,928	10 MO S/L	28,477	3,192
85	BLC Sign	10/31/97	1,520			1,520	20 MO S/L	1,267	76
86	Spotlights	12/15/98	1,168			1,168	20 MO S/L	910	58
87	Driveway Repair	12/08/99	1,399			1,399	10 MO S/L	1,399	0
88	Driveway Repair	12/13/99	2,801			2,801	5 MO S/L	2,801	0
89	Landscaping	1/18/00	1,463			1,463	10 MO S/L	1,463	0
90	Landscaping	10/22/99	1,420			1,420	10 MO S/L	1,420	0
91	Retaining Wall	8/27/04	4,300			4,300	10 MO S/L	4,228	72
92	Driveway	9/10/04	1,750			1,750	10 MO S/L	1,721	29
93	Remodeling	6/30/12	1,395			1,395	20 MO S/L	98	69
94	Front Door	10/05/12	916			916	10 MO S/L	643	91
95	Bathroom Remodel	8/31/12	918			918	39 MO S/L	44	24
96	Various Software	6/28/05	19,376			19,376	3 MO S/L	19,376	0
97	2011 Dodge Caravan - Wheaton	4/27/15	14,383			14,383	5 MO S/L	0	479
98	Ford E350 Van 2014 - Warrenville	6/08/15	23,067			23,067	5 MO S/L	0	384
99	John's Laptop	2/26/15	700			700	5 MO S/L	0	47
100	A/C Compressor	11/07/14	2,345			2,345	5 MO S/L	0	313
101	Burnisher	7/01/14	1,232			1,232	5 MO S/L	0	246
103	Laptops	6/30/15	2,140			2,140	5 MO S/L	0	0
104	Roofing repairs	6/30/15	3,500			3,500	39 MO S/L	0	0
105	F&F (00-08)	6/30/08	88,207			88,207	10 MO S/L	88,207	0
106	Land Improvements Reallocation	3/31/97	7,667			7,667	15 MO S/L	7,284	383
107	#95 Remodel Reallocation	8/31/12	4,602			4,602	39 MO S/L	221	118
Total Other Depreciation			<u>4,204,242</u>			<u>4,204,242</u>		<u>989,641</u>	<u>105,751</u>
Total ACRS and Other Depreciation			<u>4,204,242</u>			<u>4,204,242</u>		<u>989,641</u>	<u>105,751</u>
Grand Totals			4,204,242			4,204,242		989,641	105,751
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>4,204,242</u>			<u>4,204,242</u>		<u>989,641</u>	<u>105,751</u>

Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
Other Depreciation:								
1	Business Card	8/31/13	1,302	1,302	217	260	260	0
2	Laminator	10/31/13	950	950	127	190	190	0
3	Business Card	11/23/13	1,368	1,368	160	273	273	0
4	Grainger	1/14/14	1,687	1,687	169	337	337	0
5	Metro Professional	1/31/14	555	555	46	111	111	0
6	American Pride	5/31/14	1,524	1,524	25	305	305	0
7	Dell	9/03/13	562	562	94	112	112	0
8	Dell	10/27/13	2,808	2,808	374	562	562	0
9	Dell	2/06/14	1,254	1,254	105	250	250	0
10	Automobile - Wheaton	7/01/14	9,954	9,954	0	1,991	1,991	0
11	Current Technology	7/12/13	12,216	12,216	1,222	1,221	1,221	0
12	HSInc	7/30/13	31,492	31,492	740	808	808	0
13	Current Technology	8/06/13	12,215	12,215	1,120	1,221	1,221	0
14	HSInc	8/31/13	51,882	51,882	1,109	1,330	1,330	0
15	HSInc	8/31/13	81,543	81,543	1,742	2,091	2,091	0
16	HSInc	10/21/13	9,694	9,694	166	248	248	0
17	HSInc	10/31/13	70,279	70,279	1,201	1,802	1,802	0
18	CTI	11/30/13	10,233	10,233	597	1,023	1,023	0
19	HSInc	11/30/13	4,400	4,400	66	113	113	0
20	Am Drapery	11/30/13	1,523	1,523	89	152	152	0
21	Security Service	11/30/13	2,191	2,191	128	219	219	0
22	HSInc	4/01/14	14,376	14,376	92	369	369	0
23	Automobile - Wheaton	9/03/09	78,112	78,112	75,508	2,604	0	-2,604
24	Ford E350 2006 - Wheaton	10/01/06	14,746	14,746	14,746	0	0	0
25	2007 Vans - Wheaton	1/01/08	36,936	36,936	36,936	0	0	0
26	2009 Ford E350 - Warrenville	5/31/11	18,188	18,188	11,216	3,638	0	-3,638
27	Minivan - Warrenville	1/16/13	20,211	20,211	5,726	4,043	4,042	-1
28	Wheaton Building	4/08/13	2,469,054	2,469,054	79,136	63,309	63,310	1
29	Building Improvement	8/31/12	9,062	9,062	426	232	232	0
30	Warrenville Building	9/15/90	166,506	166,506	124,012	5,204	5,204	0
31	Carpet	3/05/93	670	670	670	0	0	0
32	Remodeled Bath	3/31/96	5,060	5,060	2,368	130	129	-1
33	Bathroom Fixture	10/10/95	2,000	2,000	2,000	0	0	0
34	Flooring	8/22/96	687	687	687	0	0	0
35	Remodeling	3/31/97	10,491	10,491	10,491	0	525	525
36	Furnace	12/05/96	9,118	9,118	9,118	0	254	254
37	Improvements	5/05/03	24,951	24,951	24,951	0	0	0
38	Concrete Work	11/30/03	4,269	4,269	1,673	158	158	0
39	Shower Surrounding	8/13/04	1,770	1,770	650	66	66	0
40	Improvements	6/30/06	2,243	2,243	2,243	0	0	0
41	Improvements	6/30/07	3,848	3,848	3,848	0	0	0
42	Equipment	12/31/07	3,912	3,912	3,633	279	279	0
43	Equipment	12/31/07	1,743	1,743	1,743	0	0	0
44	Sprinkler Systems	12/31/08	5,375	5,375	4,223	768	768	0
45	Dynamic Fire	1/31/10	11,550	11,550	7,288	1,650	1,650	0
46	Building Permit	7/31/11	1,115	1,115	325	112	112	0
47	Washing Machine	8/31/11	716	716	406	143	143	0
48	Remodeling	10/18/11	99,145	99,145	6,779	2,542	2,542	0
49	Remodeling	3/31/12	4,690	4,690	271	120	120	0
50	Stove	5/31/12	703	703	293	141	141	0
51	New Window	5/31/12	1,385	1,385	289	138	138	0
52	Computer Equipment (01-08)	1/15/08	126,740	126,740	126,740	0	0	0
53	Computer Equipment	6/30/09	2,053	2,053	2,053	0	0	0
54	Dell Computer	1/31/10	1,587	1,587	1,402	185	317	132
55	ADPA, Inc.	7/31/10	535	535	419	107	0	-107
56	Dell Commercial	7/31/10	3,205	3,205	2,511	641	0	-641
57	Dell Commercial	12/31/10	667	667	467	133	0	-133
58	Apple Computer	3/31/11	4,489	4,489	2,918	898	0	-898
59	Projector	8/31/11	2,606	2,606	1,477	521	521	0
60	Computer	8/31/11	618	618	350	124	124	0
61	Laptop	12/15/11	727	727	376	145	145	0
62	High Resolution	4/30/12	639	639	277	128	128	0
63	Server	5/31/12	2,061	2,061	859	412	412	0
64	Computer Security	8/23/12	572	572	210	114	84	-30
65	Equipment (00-08)	6/30/08	201,464	201,464	120,878	20,147	0	-20,147
66	Capital Telecom	1/31/10	6,725	6,725	5,940	785	672	-113
67	Carpeting	11/30/10	2,234	2,234	1,601	447	0	-447
68	Business Card	11/30/10	930	930	666	186	0	-186

BARTLETTLC BARTLETT LEARNING CENTER, INC.

36-2778655

IL Asset Report

FYE: 6/30/2015

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Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
69	Air Conditioner	6/30/11	2,600	2,600	1,560	520	0	-520
70	Equipment Kare	1/31/11	2,125	2,125	1,452	425	0	-425
71	Carpeting	7/31/11	1,850	1,850	1,079	370	370	0
72	Vacuum	8/31/11	546	546	309	109	109	0
73	Folding Chairs	4/30/12	10,495	10,495	3,249	1,499	1,499	0
74	Carpeting	8/31/11	1,850	1,850	1,048	370	370	0
75	Printer	5/30/13	800	800	173	160	160	0
76	Partitions	5/31/13	933	933	144	134	134	0
77	2 Mattress Sets	11/30/12	699	699	158	100	99	-1
78	Dresser	1/31/13	620	620	125	89	88	-1
79	Dryer	3/31/13	964	964	172	138	137	-1
80	Outside Somers	6/28/04	1,626	1,626	1,626	0	0	0
81	Computer Lab	11/30/03	1,324	1,324	1,324	0	0	0
82	25 Chairs	6/30/05	2,497	2,497	2,497	0	0	0
83	Land - Wheaton	4/08/13	267,000	267,000	0	0	0	0
84	Various Land Improvements	6/30/92	31,928	31,928	31,928	0	3,192	3,192
85	BLC Sign	10/31/97	1,520	1,520	1,267	76	76	0
86	Spotlights	12/15/98	1,168	1,168	910	58	58	0
87	Driveway Repair	12/08/99	1,399	1,399	1,399	0	0	0
88	Driveway Repair	12/13/99	2,801	2,801	2,801	0	0	0
89	Landscaping	1/18/00	1,463	1,463	1,463	0	0	0
90	Landscaping	10/22/99	1,420	1,420	1,420	0	0	0
91	Retaining Wall	8/27/04	4,300	4,300	4,228	72	72	0
92	Driveway	9/10/04	1,750	1,750	1,721	29	29	0
93	Remodeling	6/30/12	1,395	1,395	140	69	69	0
94	Front Door	10/05/12	916	916	160	92	91	-1
95	Bathroom Remodel	8/31/12	918	918	43	24	24	0
96	Various Software	6/28/05	19,376	19,376	19,376	0	0	0
97	2011 Dodge Caravan - Wheaton	4/27/15	14,383	14,383	0	479	479	0
98	Ford E350 Van 2014 - Warrenville	6/08/15	23,067	23,067	0	384	384	0
99	John's Laptop	2/26/15	700	700	0	47	47	0
100	A/C Compressor	11/07/14	2,345	2,345	0	313	313	0
101	Burnisher	7/01/14	1,232	1,232	0	246	246	0
103	Laptops	6/30/15	2,140	2,140	0	0	0	0
104	Roofing repairs	6/30/15	3,500	3,500	0	0	0	0
105	F&F (00-08)	6/30/08	88,207	88,207	52,924	8,821	0	-8,821
106	Land Improvements Reallocation	3/31/97	7,667	7,667	7,667	0	383	383
107	#95 Remodel Reallocation	8/31/12	4,602	4,602	216	118	118	0
Total Other Depreciation			<u>4,204,242</u>	<u>4,204,242</u>	<u>852,967</u>	<u>139,980</u>	<u>105,751</u>	<u>-34,229</u>
Total ACRS and Other Depreciation			<u>4,204,242</u>	<u>4,204,242</u>	<u>852,967</u>	<u>139,980</u>	<u>105,751</u>	<u>-34,229</u>
Grand Totals			4,204,242	4,204,242	852,967	139,980	105,751	-34,229
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>4,204,242</u>	<u>4,204,242</u>	<u>852,967</u>	<u>139,980</u>	<u>105,751</u>	<u>-34,229</u>

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:											
1	Business Card	8/31/13	0				0 0	HY		0	0
2	Laminator	10/31/13	0				0 0	HY		0	0
3	Business Card	11/23/13	0				0 0	HY		0	0
4	Grainger	1/14/14	0				0 0	HY		0	0
5	Metro Professional	1/31/14	0				0 0	HY		0	0
6	American Pride	5/31/14	0				0 0	HY		0	0
7	Dell	9/03/13	0				0 0	HY		0	0
8	Dell	10/27/13	0				0 0	HY		0	0
9	Dell	2/06/14	0				0 0	HY		0	0
10	Automobile - Wheaton	7/01/14	0				0 0	HY		0	0
11	Current Technology	7/12/13	0				0 0	HY		0	0
12	HSInc	7/30/13	0				0 0	HY		0	0
13	Current Technology	8/06/13	0				0 0	HY		0	0
14	HSInc	8/31/13	0				0 0	HY		0	0
15	HSInc	8/31/13	0				0 0	HY		0	0
16	HSInc	10/21/13	0				0 0	HY		0	0
17	HSInc	10/31/13	0				0 0	HY		0	0
18	CTI	11/30/13	0				0 0	HY		0	0
19	HSInc	11/30/13	0				0 0	HY		0	0
20	Am Drapery	11/30/13	0				0 0	HY		0	0
21	Security Service	11/30/13	0				0 0	HY		0	0
22	HSInc	4/01/14	0				0 0	HY		0	0
23	Automobile - Wheaton	9/03/09	0				0 0	HY		0	0
24	Ford E350 2006 - Wheaton	10/01/06	0				0 0	HY		0	0
25	2007 Vans - Wheaton	1/01/08	0				0 0	HY		0	0
26	2009 Ford E350 - Warrenville	5/31/11	0				0 0	HY		0	0
27	Minivan - Warrenville	1/16/13	0				0 0	HY		0	0
28	Wheaton Building	4/08/13	0				0 0	HY		0	0
29	Building Improvement	8/31/12	0				0 0	HY		0	0
30	Warrenville Building	9/15/90	0				0 0	HY		0	0
31	Carpet	3/05/93	0				0 0	HY		0	0
32	Remodeled Bath	3/31/96	0				0 0	HY		0	0
33	Bathroom Fixture	10/10/95	0				0 0	HY		0	0
34	Flooring	8/22/96	0				0 0	HY		0	0
35	Remodeling	3/31/97	0				0 0	HY		0	0
36	Furnace	12/05/96	0				0 0	HY		0	0
37	Improvements	5/05/03	0				0 0	HY		0	0
38	Concrete Work	11/30/03	0				0 0	HY		0	0
39	Shower Surrounding	8/13/04	0				0 0	HY		0	0
40	Improvements	6/30/06	0				0 0	HY		0	0
41	Improvements	6/30/07	0				0 0	HY		0	0
42	Equipment	12/31/07	0				0 0	HY		0	0
43	Equipment	12/31/07	0				0 0	HY		0	0
44	Sprinkler Systems	12/31/08	0				0 0	HY		0	0
45	Dynamic Fire	1/31/10	0				0 0	HY		0	0
46	Building Permit	7/31/11	0				0 0	HY		0	0
47	Washing Machine	8/31/11	0				0 0	HY		0	0
48	Remodeling	10/18/11	0				0 0	HY		0	0
49	Remodeling	3/31/12	0				0 0	HY		0	0
50	Stove	5/31/12	0				0 0	HY		0	0
51	New Window	5/31/12	0				0 0	HY		0	0
52	Computer Equipment (01-08)	1/15/08	0				0 0	HY		0	0
53	Computer Equipment	6/30/09	0				0 0	HY		0	0
54	Dell Computer	1/31/10	0				0 0	HY		0	0
55	ADPA, Inc.	7/31/10	0				0 0	HY		0	0
56	Dell Commercial	7/31/10	0				0 0	HY		0	0
57	Dell Commercial	12/31/10	0				0 0	HY		0	0
58	Apple Computer	3/31/11	0				0 0	HY		0	0
59	Projector	8/31/11	0				0 0	HY		0	0
60	Computer	8/31/11	0				0 0	HY		0	0
61	Laptop	12/15/11	0				0 0	HY		0	0
62	High Resolution	4/30/12	0				0 0	HY		0	0
63	Server	5/31/12	0				0 0	HY		0	0
64	Computer Security	8/23/12	0				0 0	HY		0	0
65	Equipment (00-08)	6/30/08	0				0 0	HY		0	0
66	Capital Telecom	1/31/10	0				0 0	HY		0	0
67	Carpeting	11/30/10	0				0 0	HY		0	0
68	Business Card	11/30/10	0				0 0	HY		0	0

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
69	Air Conditioner	6/30/11	0				0	0	HY	0	0
70	Equipment Kare	1/31/11	0				0	0	HY	0	0
71	Carpeting	7/31/11	0				0	0	HY	0	0
72	Vacuum	8/31/11	0				0	0	HY	0	0
73	Folding Chairs	4/30/12	0				0	0	HY	0	0
74	Carpeting	8/31/11	0				0	0	HY	0	0
75	Printer	5/30/13	0				0	0	HY	0	0
76	Partitions	5/31/13	0				0	0	HY	0	0
77	2 Mattress Sets	11/30/12	0				0	0	HY	0	0
78	Dresser	1/31/13	0				0	0	HY	0	0
79	Dryer	3/31/13	0				0	0	HY	0	0
80	Outside Somers	6/28/04	0				0	0	HY	0	0
81	Computer Lab	11/30/03	0				0	0	HY	0	0
82	25 Chairs	6/30/05	0				0	0	HY	0	0
83	Land - Wheaton	4/08/13	0				0	0	HY	0	0
84	Various Land Improvements	6/30/92	0				0	0	HY	0	0
85	BLC Sign	10/31/97	0				0	0	HY	0	0
86	Spotlights	12/15/98	0				0	0	HY	0	0
87	Driveway Repair	12/08/99	0				0	0	HY	0	0
88	Driveway Repair	12/13/99	0				0	0	HY	0	0
89	Landscaping	1/18/00	0				0	0	HY	0	0
90	Landscaping	10/22/99	0				0	0	HY	0	0
91	Retaining Wall	8/27/04	0				0	0	HY	0	0
92	Driveway	9/10/04	0				0	0	HY	0	0
93	Remodeling	6/30/12	0				0	0	HY	0	0
94	Front Door	10/05/12	0				0	0	HY	0	0
95	Bathroom Remodel	8/31/12	0				0	0	HY	0	0
96	Various Software	6/28/05	0				0	0	HY	0	0
97	2011 Dodge Caravan - Wheaton	4/27/15	0				0	0	HY	0	0
98	Ford E350 Van 2014 - Warrenville	6/08/15	0				0	0	HY	0	0
99	John's Laptop	2/26/15	0				0	0	HY	0	0
100	A/C Compressor	11/07/14	0				0	0	HY	0	0
101	Burnisher	7/01/14	0				0	0	HY	0	0
103	Laptops	6/30/15	0				0	0	HY	0	0
104	Roofing repairs	6/30/15	0				0	0	HY	0	0
105	F&F (00-08)	6/30/08	0				0	0	HY	0	0
106	Land Improvements Reallocation	3/31/97	0				0	0	HY	0	0
107	#95 Remodel Reallocation	8/31/12	0				0	0	HY	0	0
	Total Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Grand Totals		0				0			0	0
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>

BARTLETTLC BARTLETT LEARNING CENTER, INC.

36-2778655

FYE: 6/30/2015

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
1	Business Card	8/31/13	1,302	261	0
2	Laminator	10/31/13	950	190	0
3	Business Card	11/23/13	1,368	274	0
4	Grainger	1/14/14	1,687	338	0
5	Metro Professional	1/31/14	555	111	0
6	American Pride	5/31/14	1,524	305	0
7	Dell	9/03/13	562	112	0
8	Dell	10/27/13	2,808	562	0
9	Dell	2/06/14	1,254	251	0
10	Automobile - Wheaton	7/01/14	9,954	1,991	0
11	Current Technology	7/12/13	12,216	1,222	0
12	HSInc	7/30/13	31,492	807	0
13	Current Technology	8/06/13	12,215	1,222	0
14	HSInc	8/31/13	51,882	1,330	0
15	HSInc	8/31/13	81,543	2,091	0
16	HSInc	10/21/13	9,694	249	0
17	HSInc	10/31/13	70,279	1,802	0
18	CTI	11/30/13	10,233	1,024	0
19	HSInc	11/30/13	4,400	112	0
20	Am Drapery	11/30/13	1,523	152	0
21	Security Service	11/30/13	2,191	219	0
22	HSInc	4/01/14	14,376	368	0
23	Automobile - Wheaton	9/03/09	78,112	0	0
24	Ford E350 2006 - Wheaton	10/01/06	14,746	0	0
25	2007 Vans - Wheaton	1/01/08	36,936	0	0
26	2009 Ford E350 - Warrenville	5/31/11	18,188	0	0
27	Minivan - Warrenville	1/16/13	20,211	767	0
28	Wheaton Building	4/08/13	2,469,054	63,309	0
29	Building Improvement	8/31/12	9,062	232	0
30	Warrenville Building	9/15/90	166,506	5,203	0
31	Carpet	3/05/93	670	0	0
32	Remodeled Bath	3/31/96	5,060	130	0
33	Bathroom Fixture	10/10/95	2,000	0	0
34	Flooring	8/22/96	687	0	0
35	Remodeling	3/31/97	10,491	0	0
36	Furnace	12/05/96	9,118	0	0
37	Improvements	5/05/03	24,951	0	0
38	Concrete Work	11/30/03	4,269	158	0
39	Shower Surrounding	8/13/04	1,770	65	0
40	Improvements	6/30/06	2,243	0	0
41	Improvements	6/30/07	3,848	0	0
42	Equipment	12/31/07	3,912	0	0
43	Equipment	12/31/07	1,743	0	0
44	Sprinkler Systems	12/31/08	5,375	384	0
45	Dynamic Fire	1/31/10	11,550	1,650	0
46	Building Permit	7/31/11	1,115	111	0
47	Washing Machine	8/31/11	716	143	0
48	Remodeling	10/18/11	99,145	2,543	0
49	Remodeling	3/31/12	4,690	120	0
50	Stove	5/31/12	703	141	0
51	New Window	5/31/12	1,385	139	0
52	Computer Equipment (01-08)	1/15/08	126,740	0	0
53	Computer Equipment	6/30/09	2,053	0	0
54	Dell Computer	1/31/10	1,587	0	0
55	ADPA, Inc.	7/31/10	535	0	0
56	Dell Commercial	7/31/10	3,205	0	0
57	Dell Commercial	12/31/10	667	0	0
58	Apple Computer	3/31/11	4,489	0	0
59	Projector	8/31/11	2,606	521	0
60	Computer	8/31/11	618	124	0
61	Laptop	12/15/11	727	146	0
62	High Resolution	4/30/12	639	128	0
63	Server	5/31/12	2,061	412	0
64	Computer Security	8/23/12	572	0	0
65	Equipment (00-08)	6/30/08	201,464	0	0
66	Capital Telecom	1/31/10	6,725	0	0
67	Carpeting	11/30/10	2,234	0	0

Asset	Description	Date In Service	Cost	Tax	AMT
68	Business Card	11/30/10	930	0	0
69	Air Conditioner	6/30/11	2,600	0	0
70	Equipment Kare	1/31/11	2,125	0	0
71	Carpeting	7/31/11	1,850	370	0
72	Vaccuum	8/31/11	546	109	0
73	Folding Chairs	4/30/12	10,495	1,499	0
74	Carpeting	8/31/11	1,850	370	0
75	Printer	5/30/13	800	0	0
76	Partitions	5/31/13	933	133	0
77	2 Mattress Sets	11/30/12	699	100	0
78	Dresser	1/31/13	620	89	0
79	Dryer	3/31/13	964	138	0
80	Outside Somers	6/28/04	1,626	0	0
81	Computer Lab	11/30/03	1,324	0	0
82	25 Chairs	6/30/05	2,497	0	0
83	Land - Wheaton	4/08/13	267,000	0	0
84	Various Land Improvements	6/30/92	31,928	259	0
85	BLC Sign	10/31/97	1,520	76	0
86	Spotlights	12/15/98	1,168	59	0
87	Driveway Repair	12/08/99	1,399	0	0
88	Driveway Repair	12/13/99	2,801	0	0
89	Landscaping	1/18/00	1,463	0	0
90	Landscaping	10/22/99	1,420	0	0
91	Retaining Wall	8/27/04	4,300	0	0
92	Driveway	9/10/04	1,750	0	0
93	Remodeling	6/30/12	1,395	70	0
94	Front Door	10/05/12	916	92	0
95	Bathroom Remodel	8/31/12	918	23	0
96	Various Software	6/28/05	19,376	0	0
97	2011 Dodge Caravan - Wheaton	4/27/15	14,383	2,877	0
98	Ford E350 Van 2014 - Warrenville	6/08/15	23,067	4,614	0
99	John's Laptop	2/26/15	700	140	0
100	A/C Compressor	11/07/14	2,345	469	0
101	Burnisher	7/01/14	1,232	247	0
103	Laptops	6/30/15	2,140	428	0
104	Roofing repairs	6/30/15	3,500	90	0
105	F&F (00-08)	6/30/08	88,207	0	0
106	Land Improvements Reallocation	3/31/97	7,667	0	0
107	#95 Remodel Reallocation	8/31/12	4,602	118	0
	Total Other Depreciation		<u>4,204,242</u>	<u>103,789</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>4,204,242</u>	<u>103,789</u>	<u>0</u>
	Grand Totals		<u>4,204,242</u>	<u>103,789</u>	<u>0</u>

Asset	Description	Date In Service	Cost	IL
Other Depreciation:				
1	Business Card	8/31/13	1,302	261
2	Laminator	10/31/13	950	190
3	Business Card	11/23/13	1,368	274
4	Grainger	1/14/14	1,687	338
5	Metro Professional	1/31/14	555	111
6	American Pride	5/31/14	1,524	305
7	Dell	9/03/13	562	112
8	Dell	10/27/13	2,808	562
9	Dell	2/06/14	1,254	251
10	Automobile - Wheaton	7/01/14	9,954	1,991
11	Current Technology	7/12/13	12,216	1,222
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13	Current Technology	8/06/13	12,215	1,222
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17	HSInc	10/31/13	70,279	1,802
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20	Am Drapery	11/30/13	1,523	152
21	Security Service	11/30/13	2,191	219
22	HSInc	4/01/14	14,376	368
23	Automobile - Wheaton	9/03/09	78,112	0
24	Ford E350 2006 - Wheaton	10/01/06	14,746	0
25	2007 Vans - Wheaton	1/01/08	36,936	0
26	2009 Ford E350 - Warrenville	5/31/11	18,188	3,334
27	Minivan - Warrenville	1/16/13	20,211	4,042
28	Wheaton Building	4/08/13	2,469,054	63,309
29	Building Improvement	8/31/12	9,062	233
30	Warrenville Building	9/15/90	166,506	5,203
31	Carpet	3/05/93	670	0
32	Remodeled Bath	3/31/96	5,060	129
33	Bathroom Fixture	10/10/95	2,000	0
34	Flooring	8/22/96	687	0
35	Remodeling	3/31/97	10,491	0
36	Furnace	12/05/96	9,118	0
37	Improvements	5/05/03	24,951	0
38	Concrete Work	11/30/03	4,269	159
39	Shower Surrounding	8/13/04	1,770	65
40	Improvements	6/30/06	2,243	0
41	Improvements	6/30/07	3,848	0
42	Equipment	12/31/07	3,912	0
43	Equipment	12/31/07	1,743	0
44	Sprinkler Systems	12/31/08	5,375	384
45	Dynamic Fire	1/31/10	11,550	1,650
46	Building Permit	7/31/11	1,115	111
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48	Remodeling	10/18/11	99,145	2,543
49	Remodeling	3/31/12	4,690	120
50	Stove	5/31/12	703	141
51	New Window	5/31/12	1,385	139
52	Computer Equipment (01-08)	1/15/08	126,740	0
53	Computer Equipment	6/30/09	2,053	0
54	Dell Computer	1/31/10	1,587	0
55	ADPA, Inc.	7/31/10	535	9
56	Dell Commercial	7/31/10	3,205	53
57	Dell Commercial	12/31/10	667	67
58	Apple Computer	3/31/11	4,489	673
59	Projector	8/31/11	2,606	521
60	Computer	8/31/11	618	124
61	Laptop	12/15/11	727	146
62	High Resolution	4/30/12	639	128
63	Server	5/31/12	2,061	412
64	Computer Security	8/23/12	572	115
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66	Capital Telecom	1/31/10	6,725	0
67	Carpeting	11/30/10	2,234	186

Asset	Description	Date In Service	Cost	IL
68	Business Card	11/30/10	930	78
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70	Equipment Kare	1/31/11	2,125	248
71	Carpeting	7/31/11	1,850	370
72	Vacuum	8/31/11	546	109
73	Folding Chairs	4/30/12	10,495	1,499
74	Carpeting	8/31/11	1,850	370
75	Printer	5/30/13	800	160
76	Partitions	5/31/13	933	133
77	2 Mattress Sets	11/30/12	699	100
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79	Dryer	3/31/13	964	138
80	Outside Somers	6/28/04	1,626	0
81	Computer Lab	11/30/03	1,324	0
82	25 Chairs	6/30/05	2,497	0
83	Land - Wheaton	4/08/13	267,000	0
84	Various Land Improvements	6/30/92	31,928	0
85	BLC Sign	10/31/97	1,520	76
86	Spotlights	12/15/98	1,168	59
87	Driveway Repair	12/08/99	1,399	0
88	Driveway Repair	12/13/99	2,801	0
89	Landscaping	1/18/00	1,463	0
90	Landscaping	10/22/99	1,420	0
91	Retaining Wall	8/27/04	4,300	0
92	Driveway	9/10/04	1,750	0
93	Remodeling	6/30/12	1,395	70
94	Front Door	10/05/12	916	92
95	Bathroom Remodel	8/31/12	918	23
96	Various Software	6/28/05	19,376	0
97	2011 Dodge Caravan - Wheaton	4/27/15	14,383	2,877
98	Ford E350 Van 2014 - Warrenville	6/08/15	23,067	4,614
99	John's Laptop	2/26/15	700	140
100	A/C Compressor	11/07/14	2,345	469
101	Burnisher	7/01/14	1,232	247
103	Laptops	6/30/15	2,140	428
104	Roofing repairs	6/30/15	3,500	90
105	F&F (00-08)	6/30/08	88,207	8,821
106	Land Improvements Reallocation	3/31/97	7,667	0
107	#95 Remodel Reallocation	8/31/12	4,602	118
	Total Other Depreciation		<u>4,204,242</u>	<u>141,216</u>
	Total ACRS and Other Depreciation		<u>4,204,242</u>	<u>141,216</u>
	Grand Totals		<u>4,204,242</u>	<u>141,216</u>

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST	\$ 24		14			
Total	<u>\$ 24</u>					

BARTLETTLC BARTLETT LEARNING CENTER, INC.

36-2778655

FYE: 6/30/2015

Federal Statements

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

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
MAINTENANCE	\$ 93,913	\$ 93,913	\$	\$
Total	<u>\$ 93,913</u>	<u>\$ 93,913</u>	<u>\$ 0</u>	<u>\$ 0</u>

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

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
EDUCATIONAL MATERIALS	\$ 12,227	\$ 12,227	\$	\$
DEVELOPMENT	9,004	1,199		7,805
FOOD AND BEVERAGE	8,258	8,258		
PROFESSIONAL GROWTH	7,987	7,987		
IN-SERVICE	7,509	7,509		
DUES AND SUBSCRIPTIONS	1,824	215	840	769
Total	<u>\$ 46,809</u>	<u>\$ 37,395</u>	<u>\$ 840</u>	<u>\$ 8,574</u>

GALA

Other Direct Fundraising or Gaming Expenses

<u>Description</u>	<u>Amount</u>
PRINTING	\$ <u>201</u>
Total	\$ <u><u>201</u></u>