Extended to May 15, 2019

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning JUL 1, 2017 and ending JUN 30, 2018

B Name of organization
Alabama Waldorf Association
The Redmont School, Inc.

C Employer identification number
63-0972301

D Telephone number
205-592-0541

E Gross receipts
885,566.

F Name and address of principal officer
Dr. Lisa Grupe

G same as C above

H(a) Is this a group return

Yes

H(b) Are all subordinates included?

Yes

H(c) Group exemption number


J Website
alabamawaldorf.org

K Form of organization
Corporation

L Year of formation
1988

M State of legal domicile
AL

Part I Summary

1 Briefly describe the organization’s mission or most significant activities: Alabama Waldorf School is a community dedicated to educating responsible world citizens.

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)

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

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

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

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

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7a)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

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)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11a)

16b Total fundraising expenses (Part IX, column (D), line 25)

17 Other expenses (Part IX, column (A), lines 11a-11d, 11l-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

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 information of which preparer has any knowledge.

Signature of officer

Dr. Lisa Grupe, Executive Director

Sign Here

Date 5/13/2019

Print/Type preparer’s name
William P. Bach

Preparer’s name
William P. Bach

Preparer’s signature

Date 5/13-19

Form 990 (2017)

See Schedule O for Organization Mission Statement Continuation

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes

No