Form 990

Department of the Treasury

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.

OMB No 1545-0047 2014

Open to Public Inspection

11.001110		2211	07-01 , 2014, and e	nding	06-30	15013
and the last of the last of	April 100 miles and 100 miles		ar year, or tax year beginning		D En	nployer identification no.
BC	heck if ap	oplicable:	C Name of organization Ideal Academy Public Charter School		52-	2138875
∐ A	ddress ch	nange	Doing business as	Room/sulte	E Te	lephone number
∐ N	ame char	nge	Number and street (or P.O. box if mail is not delivered to street address)		(20	2)729-6660
☐ Ir	itial retur	n	6130 NORTH CAPITOL STREET NW			5,444,208
□F	inal return	n/terminaled	City or town, state or province, country, and ZIP or foreign postal code		G G	oss receipts\$
	mended (return	Washington, DC 20011			
	pplication	pending	F Name and address of principal officer:	H(a) Is this a gr	oup return foi es?	Yes X No
					linetee lee	udad2 Ves No
1 7	ax-exem	pt status:	501(c)(3)	H No	" attach a lis	t. (see instructions)
J V	Vebsite:	חחו ל	r.iapes.com		of legal dom	
K F	orm of or	ganization: X	Corporation Trust Association Other L Year of formation:	1933 IM OISIO	di lagai som	
Pai	rtl	Summar	Y THE SCHOOL'S MISS	TON TO TO ENS	ORE THAT	ľ
	1	Briefly descr				
		STUDENTS	ACHIEVE THEIR MAXIMUM POTENTIAL THROUGH A BALANCED PROGRAM WHI	CU ENTINEERING		
Activities & Governance		ACADEMIC	EXCELLENCE IN CONJUNCTION WITH BOTH MENTAL AND PHYSICAL WELLING			
Ē			the OFW of	ite not accols		
8	2	Check this b	ox if the organization discontinued its operations or disposed of more than 25% of	its Het assets.	3	11
ŏ	3	Number of v	oting members of the governing body (Part VI, line 1a)		4	11
양	4	Number of in	ndependent voting members of the governing body (Part VI, line 1b)		5	79
The second	5	Total number	er of Individuals employed in calendar year 2014 (Part V, line 2a)		6	
cty	6	Total number	er of volunteers (estimate if necessary)		-	0
Ø.	7a	Total unrela	ted business revenue from Part VIII, column (C), line 12		7a 7b	0
	b	Net unrelate	d business taxable income from Form 990-T, line 34		70	Current Year
				Prior Year	1,626	481,523
	8	Contribution	s and grants (Part VIII, line 1h)	- A CONTRACTOR OF THE PARTY OF		4,953,986
97	9	Program se	rvice revenue (Part VIII, line 2g)	4,41	484	911
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)	-		7,788
Rey	11	Other reven	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	The second secon	0,537	5,444,208
	12	Total revenu	ue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0,809	3,444,200
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1-3)	41	1,626	0
	14	Benefits pai	d to or for members (Part IX, column (A), line 4)			3,177,057
	15	Salaries, oll	ner compensation, employee benefits (Part IX, column (A), lines 5-10)	2,84	7,583	3,177,037
80		Professiona	Il fundraising fees (Part IX, column (A), line 11e)			
Expenses	b	Total fundra	sising expenses (Part IX, column (D), line 25)			1 051 097
ž	17	Other expe	nses (Part IX, column (A), lines 11a-11d, 11f-24e)	The same of the sa	0,002	1,951,987
104	18	Total avner	sees Add lines 13-17 (must equal Part IX, column (A), line 25)		9,211	5,129,044
	19	Revenue le	ss expenses. Subtract line 18 from line 12		8,402)	315,164
- 2	our force of the property of the last			Beginning of Curre		12,638,733
t s	20	Total asset	s (Part X, line 16)	The state of the s	9,495	10,914,711
et Assets or	21		ies (Part X, line 26)		2,961	1,724,022
2	22		or fund balances. Subtract line 21 from line 20	1,38	6,535	2,724,022
-	rt II	Signat	Plank	in audadon and halisi	It le	
Unde	r penaltie	s of perju	hedules and statements, and to the best of a of which preparer has any knowledge.	A KUOMIGOĜE SUO DENO	. 12 10	
true,	correct, a	and comple			1 2	116/2016
		N.	Z.		Date	11400
Sig	ın				50.0	/
He		NAT	HAN EVANS, CPA, TREASURER			
0 8163			or print name and title		1	
Market Const.	in the second second second	Print/Type	proparer's name	Check	If PTI	1 P01690698
Pa	iri		Zuella Evans	self-emplo	yed 1	LAT030030
	pare		and a services	Firm's EIN		
	e Oni	-	A CAS III Dawn Street NW	Phone no.		22.53
U 3	9 0111	3 1 1111 0 0001	Washington DC 20012		202-796-	Yes X No
Mar	the IP	S discuss this	s return with the preparer shown above? (see instructions)			Form 990 (2014)
*****		THE RESERVE OF THE PARTY OF THE				FINITE 2224 (2019)

	990 (2014) Ideal Academy Public Charter School III Statement of Program Service Accomplishments
Part	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE SCHOOL'S MISSION IS TO ENSURE THAT STUDENTS ACHIEVE THEIR MAXIMUM POTENTIAL THROUGH A
	THE SCHOOL'S MISSION IS TO ENSURE THAT STORM THE SCHOOL OF
	PHYSICAL WELLNESS.
	Did the organization undertake any significant program services during the year which were not listed on the
2	Did the organization undertake any significant program services during the year which has been secured. Yes No
	If "Yes," describe these new services on Schedule O.
	in significant changes in how it conducts, any program
3	Did the organization cease conducting, or make significant changes in now it conducts, any program.
	services?
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by
4	Describe the organization's program service accomplishments for each of the target page expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of
	the total expenses, and revenue, if any, for each program service reported.
	(Code:) (Expenses \$4,431,309 including grants of \$477,920) (Revenue \$4,961,007)
4a	(Code:) (Expenses \$ 4,431,309 Including grains of \$ 277,520 / Capemically and achieve Maximum
	IDEAL ACADEMY'S GOAL IS TO EMPOWER STUDENTS TO EXCEL ACADEMICALLY AND ACHIEVE MAXIMUM TO EACH ACADEMY S GOAL IS TO EMPOWER STUDENTS TO EXCEL ACADEMICALLY AND ACHIEVE MAXIMUM TO EACH ACADEMY S GOAL IS TO EMPOWER STUDENTS TO EXCEL ACADEMICALLY AND ACHIEVE MAXIMUM
	TDEAL ACADEMY'S GOAL IS TO EMPONER STOREMS TO EMPONER STOREMS IN DYNAMIC SELF-RELIANCE AND PERSONAL FULFILLMENT. THIS IS ACCOMPLISHED BY ENGAGING STUDENTS IN DYNAMIC SELF-RELIANCE AND TROOPERSONAL FULFILLMENT. THIS IS ACCOMPLISHED BY ENGAGING STUDENTS IN DYNAMIC
	LEARNING EXPERIENCES BASED ON PROVEN EDUCATIONAL METHODS AND INCORPORATING STRONG COMMUNITY LEARNING EXPERIENCES BASED ON PROVEN EDUCATIONAL METHODS AND INCORPORATING STRONG COMMUNITY
	AND PARENTAL INVOLVEMENT. THERE IS A COLLABORATIVE EFFORT TO CREATE A SAFE AND CARING LEARNING ENVIRONMENT THAT NURTURES AND EMPOWERS STUDENTS. THEIR PARENTS AND THE TEACHING
	LEARNING ENVIRONMENT THAT NURTURES AND EMPOWERS STUDENTS. THERE THE TRANSPORT THAT NURTURES AND EMPOWERS STUDENTS. THE CURRENT PROGRAM SERVES 298 STUDENTS GRADES PRE-SCHOOL THROUGH ELEVENTH GRADE
	STUDENTS.
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
-	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
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 4,431,309

Page 2

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X 1 Χ 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 candidates for public office? If "Yes," complete Schedule C, Part I X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II 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, 5 X 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 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 complete Schedule D, Part III X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or X debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 X endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 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 11a 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 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more X 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e 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 11f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if 12b X 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 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X 14b foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 15 X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 X 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 X X Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b b Form 990 (2014)

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rattiv Officerist of Roganica Constants (Constants)		Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
21 Did the organization report more than \$5,000 of grants of other assistance to any domestic organization of domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21		X
u or one of greate or other assistance to or for domestic individuals on			
22 Did the organization report more than \$5,000 of grants of other assistance to or for domestic matrix as so.	. 22		X
Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
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			
	. 23		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	. 24a	X	
	. 24b		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	. 24c		X
to defease any tax-exempt bonds?	. 24d		X
d Did the organization act as an "on benait of issuer for bolids outstanding at any time daring the year."	244		21
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	. 2Ja		27
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?	25b		X
If "Yes," complete Schedule L, Part I	. 230		Λ
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			37
disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
substantial contributor or 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	27		X
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	28a		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
Schedule L, Part IV	28b		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
conservation contributions? If "Yes," complete Schedule M	30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
Part I · · · · · · · · · · · · · · · · · ·	31		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	32		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	33		X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
or IV and Dart V line 1	34		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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	35b)	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
Part VI	37		X
	-		
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 115 and	38	X	
19? Note. All Form 990 filers are required to complete Schedule O	For		(2014)

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

Page 6 Ideal Academy Public Charter School Form 990 (2014) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 8 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. 7 Enter the number of voting members included in line 1a, above, who are independent b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X 7a one or more members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: 8a X X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X 9 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No X Did the organization have local chapters, branches, or affiliates? 10a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. b 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X 16a

Se	organization's exempt status with respect to such arrangements?					
17	List the states with which a copy of this Form 990 is required to be filed					
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 X Upon request Uter (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					
00	financial statements available to the public during the tax year. State the name address, and telephone number of the person who possesses the organization's books and records:					

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

F. ZUELLA EVANS (202)729-6660, 6130 NORTH CAPITOL STREET NW, Washington, DC 20011

16b

- 000 (0044)	-11 3dom	Public Charter School	52-2138875
Form 990 (2014)	Ideal Academy	Directors Trustees Key Employe	as Highart Companyated Empl
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ensated Employees, and Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp Part VII **Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- Section A. 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 (A) Name and Title .	(B) Average hours per week (list any hours for related organizations below dotted line)	(do no	ot che unles	Pos eck me s pers	C) ition ore th son is	han one both an (frustee) Highest compensated employee	1	(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
1) PERCY_WILSON	2.00_	Х						0	0	(
CHAIRMAN (2) NATHAN EVANS, CPA TREASURER	2.00_	Х		Х				0	0	C
(3) LESLIE CAREY, ESQ SECRETARY	2.00_	Х		Х				0	0	(
(4) WILLIAM NEWSOME BOARD MEMBER	2.00_	Х						0	0	(
(5) TIFFANY LOWERY CO-CHAIRMAN	2.00	Х		Х				0	0	(
(6) KEVIN AJENIFUJA BOARD MEMBER	2.00_	Х						0	0	(
(7) DR. EARNEST DEVOE BOARD MEMBER	2.00_	Х						0	0	(
(8) GEORGE H. RUTHERFORD II PRINCIPAL	40.00			Х				92,875	0	16,500
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

52-2138875 Page 8

	Section A. Officers, Directors, Trustees, I (A) Name and title	(B) Average hours per week (list any	(do no box, u officer	ot chec	Positi ck mo perso a dire	ion re tha on is	an one both an rustee)		(D) Reportable compensation from	(E) Reportable compensation from related	from amount of other compensation		
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)			n d
<u>(16)</u> _													
(17)													
<u>(18)</u>													
(19)													
(20)													
(21)													
(22)_												11-1-11-11-11-11-11-11-11-11-11-11-11-1	
(23)													
(24)													No.
(25)													
1b c	Sub-total	on A · ·							92,87	5 0		16,	500
2	Total number of individuals (including but not limited reportable compensation from the organization	d to those list	ed abo	ve) v	who	rece	eived n	nore	than \$100,000 of	1			
	Did the organization list any former officer, director		ov em	nlove	20.0	r hi	nheet (com	nensated	3000		Yes	No
3	employee on line 1a? If "Yes." complete Schedule	I for such ind	ividual								3		X
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater than	\$150,000? I	f "Yes,	con"	nplet	te S	chedul	e J	for such		4		X
5	individual • • • • • • • • • • • • • • • • • • •	compensation	from	any ı	 unre	ate	d orga	niza	tion or individual				X
Secti	for services rendered to the organization? If "Yes," on B. Independent Contractors										5		Λ
1	Complete this table for your five highest compensation from the organization. Report compensation.	ted independ ensation for t	lent co he cale	ntrac endai	ctors r yea	tha ar er	t recei nding v	ved vith	more than \$100,00 or within the organ	00 of ization's tax			
	year. (A)								Description of		Com	(C) pensati	on
	Name and business address Lution Foods, 6219 Columbia Park e's Bus Service, 2516 32nd Street	Road, Hy	atts						5 FOOD SER	VICE	Juli	157	7,213
2	Total number of independent contractors (including received more than \$100,000 of compensation from			nose	liste	d al	oove) v	who		2			2014)

Ideal Academy Public Charter School Form 990 (2014) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) (B) (A) Revenue Related or Unrelated Total revenue excluded from tax under sections 512-514 business exempt function revenue Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns Membership dues 1c C 1d d Related organizations e Government grants (contributions) - -1e 477,920 f All other contributions, gifts, grants, and similar amounts not included above 1f 3,603 g Noncash contributions included in lines 1a-1f: \$ 481,523 **Business Code** Program Service Revenue 4,893,308 4,893,308 611600 2a PER PUPIL REVENUE 60,678 60,678 611600 b PROGRAM INCOME f All other program service revenue 4,953,986 Investment income (including dividends, interest, and other similar amounts) 911 911 Income from investment of tax-exempt bond proceeds 5 (i) Real 6a Gross rents b Less: rental expenses · · · · c Rental income or (loss) · · · d Net rental income or (loss) (ii) Other (i) Securities 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) · · · · · · Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events · · · · · · · ▶ 1,678 1,678 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 · · · · · · · ▶ 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 **Business Code** Miscellaneous Revenue 6,110 611600 6,110 11a MISCELLANEOUS b C 6,110

5,444,208

4,961,007

e Total. Add lines 11a-11d

1,678

Form 990 (2014)

Ideal Academy Public Charter School

Part IX | Statement of Functional Expenses

raitin	Statement of Fundamental Expenses	
action 501/c	c)(3) and 501(c)(4) organizations must complete all columns. All other or	ganizations must complete column (A).

	Check if Schedule O contains a response or note to an tinclude amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
b, 9b	, and 10b of Part VIII.	15170.70	expenses	general expenses	expenses
	Grants and other assistance to domestic organizations				
á	and domestic governments. See Part IV, line 21				
2 (Grants and other assistance to domestic				
i	individuals. See Part IV, line 22				
3 (Grants and other assistance to foreign				
(organizations, foreign governments, and foreign				
j	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
1	trustees, and key employees	108,600	54,300	54,300	-
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,665,217	2,386,658	278,559	
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				No. of the last of
	Other employee benefits	191,651	168,653	22,998	200
	Payroll taxes · · · · · · · · · · · · · · · · · · ·	211,589	186,733	24,856	
	Fees for services (non-employees):				
	Management · · · · · · · · · · · · · · · · · · ·				
	Legal	1,746	349	1,397	
	Accounting	21,000	4,200	16,800	
	Lobbying	·			10.00
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
	Advertising and promotion				
	Office expenses	94,262	82,240	12,022	
	Information technology	12,676	02/210	12,676	
	Royalties · · · · · · · · · · · · · · · · · · ·	12,010			
	Occupancy · · · · · · · · · · · · · · · · · · ·	960,267	892,817	67,450	
	Travel	900,207	052,021		
	Payments of travel or entertainment expenses				
	for arry foucial, state, or foucial passes similar				
	Conferences, conventions, and meetings				***************************************
	Interest · · · · · · · · · · · · · · · · · · ·				(1) (1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
	Payments to affiliates				
22	Depreciation, depletion, and amortization	m4 m0m	CE 001	8,976	To the second se
	Insurance	74,797	65,821	0,970	
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.)				
а	DIRECT STUDENT COSTS	491,364	491,364	455 505	1.0 (1)
b	OTHER GENERAL EXPENSE	249,579	57,434	175,527	16,61
С	PROFESSIONAL DEVELOPMENT	46,296	40,740	5,556	
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e .	5,129,044	4,431,309	681,117	16,61
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				
	following SOP 98-2 (ASC 958-720)				Form 990 (20

		Check if Schedule O contains a response or note to any line in this Part X	(4)		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	270,372	1	235,891
	2	Savings and temporary cash investments		2	Company and the second
	3	Pledges and grants receivable, net	82,571	3	18,271
	4	Accounts receivable, net	23,592	4	56,786
	5	Loans and other receivables from current and former officers, directors,			
	3	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			
	U	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	
ets	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges	7,793	9	1,700
٩	10a	Land, buildings, and equipment: cost or			
	iva	other basis. Complete Part VI of Schedule D 10a 15,536,649			
	b	Less: accumulated depreciation · · · · · · · · · · · 10b 3,216,024	12,709,708	10c	12,320,625
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	5,460	12	5,460
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	13,099,496	16	12,638,733
	17	Accounts payable and accrued expenses	461,916	17	381,508
	18	Grants payable		18	
	19	Deferred revenue	147,917	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
10	330000	Loans and other payables to current and former officers, directors,			
Liabilities	22	trustees, key employees, highest compensated employees, and			
Ē		disqualified persons. Complete Part II of Schedule L		22	
Lia Lia	22	Secured mortgages and notes payable to unrelated third parties	1 (4.4)	23	
	23	Unsecured notes and loans payable to unrelated third parties	11,083,028	24	10,533,203
	25	Other liabilities (including federal income tax, payables to related third	22/000/02		
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	20,100	25	
	26	Total liabilities. Add lines 17 through 25	11,712,961	26	10,914,711
	20	Organizations that follow SFAS 117 (ASC 958), check here ► 💢 and			
S		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets	1,386,535	27	1,724,022
<u>a</u>	28	Temporarily restricted net assets		28	
В	29	Permanently restricted net assets		29	
Ë		Organizations that do not follow SFAS 117 (ASC 958), check here			
2		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
tΑ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se		Total net assets or fund balances	1,386,535	33	1,724,022
	33	Total liabilities and net assets/fund balances	13,099,496	34	12,638,733
	34	Total liabilities alla tiet assets/iatia palatices			Form 000 (2014)

orm	990 (2014) Ideal Academy Public Charter School 52	-2138	38 / 5	ı a	ge 12
Par	A VI Pacanciliation of Net Assets				
	Cloud if Calcadula O poptains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII column (A), line 12)	1		44,2	
2	Total expanses (must equal Part IX, column (A), line 25)	2		29,0	
3	Description overland Subtract line 2 from line 1	3		15,1	
4	Not assets or fund halances at beginning of year (must equal Part X, line 33, column (A))	4	1,3	86,5	35
5	Not uproplized gains (losses) on investments	5			
6	Donated services and use of facilities	6		22,3	23
7	Investment evinences	7			100000000000000000000000000000000000000
8	Discussion deliverments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net people or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1,7	24,0	22
Pai	rt 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: Cash X Accrual Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule ()		2a		Х
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Za		22
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis		2b	X	
b	Were the organization's financial statements audited by an independent accountant?			23	-
	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:				
	∑ Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		2c	X	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		20	25	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		3a		X
	the Single Audit Act and OMB Circular A-133?		34		122
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	-		990	(2014)

EEA

Page 12

Form 990 (2014)

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.

OMB No. 1545-0047

2014

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

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

Inspection

Name of the organization 52-2138875 Academy Public Charter School Ideal Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) X 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 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. 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. 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. Provide the following information about the supported organization(s). (iv) Is the organization (v) Amount of monetary (vi) Amount of (iii) Type of organization (ii) EIN (i) Name of supported organization other support (see (described on lines 1-9 listed in your governing support (see above or IRC section instructions) document? instructions) (see instructions)) Yes (A) (B) (C) (D) (E)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► 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.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2014

Open to Public Inspection

	Revenue Service Information about some and a (Employer identification number
	of the organization	52-2138875
	al Academy Public Charter School I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Acco	
Par	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
-	Complete if the organization answered 163 to 1011 365, and 154, and 154 and 15	(b) Funds and other accounts
2		
1	Total number at end of year · · · · · · · ·	
	Aggregate value of contributions to (during year)	
	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funde are the organization's property stilled to the organization's executive regarders	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	
_		
Par	Conservation Easements.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	ally important land area
	Preservation of land for public use (e.g., recordation of section of a continued	
	Protection of natural nabitat	
	Preservation of open space	conservation
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation contribution contribution in the form of a conservation contribution contri	Held at the End of the Tax Year
	easement on the last day of the tax year.	2a
a	Total number of conservation easements	2b
b	IDIAI ACIEAGE IESTIFICA DY CONCOLVATION CASCINO	2c
С	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	2d
	historic structure listed in the National Register	anization during the
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation of the conse	anization daring the
	tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	Yes No
	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	
6	Staff and volunteer hours devoted to monitoring, inspecting, and emotioning devoted to monitoring, inspecting, and emotioning devoted to monitoring.	• • • • • • • • • • • • • • • • • • •
	• and enforcing conservation easements during the V	vear
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	,
	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)	4)(B)(i)
8		Yes No
	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense starting the section of	
9	In Part XIII, describe how the organization reports conservation easements in to revenue and expense the balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements to	that describes the
Da	organization's accounting for conservation easements. Int III Organizations Maintaining Collections of Art, Historical Treasures, or Conservations of Art, Historical Treasures, or Conservations of Art, Historical Treasures, or Conservation of Art, His	Other Similar Assets.
Pa	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
4	to the state of th	and balance sheet
1a	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in	n furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these it	items.
	is a last of a parmitted upder SEAS 116 (ASC 958), to report in its revenue statement and	d balance sheet
b	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in	n furtherance of
	Works of art, historical treasures, or other similar assets field for public exhibition, secondary, or research	
	public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1	▶ \$
	(i) Revenue included in Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	ain, provide the
2	If the organization received or held works of art, historical treasures, or other similar assets for financial ga	, F
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	▶\$
a	Revenue included in Form 990, Part VIII, line 1	» \$
b	Assets included in Form 990, Part X	

chedi	ule D (Form 990) 2014 Ideal Academy E	ublic Charte	er School	Language and the second			52-2138		Page 2
Par	t III Organizations Maintaining C	collections of A	Art, Histori	cal Trea	asures, o	r Othe	er Similar Ass	sets (co	ntinued)
3	Using the organization's acquisition, accession, a	and other records, o	check any of th	ne following	g that are a s	significa	nt use of its		
•	collection items (check all that apply):								
а	Public exhibition	d 🔲 Lo	an or exchang	je program	IS				
b	Scholarly research	e Ot	her						
C	Preservation for future generations	_							
	Provide a description of the organization's collect	tions and explain h	ow they furthe	r the organ	nization's exe	mpt pur	pose in Part		
4		alono and onprem		Ü					
_	XIII. During the year, did the organization solicit or rec	ceive donations of a	art historical tr	easures. 0	or other simila	ar			
5	assets to be sold to raise funds rather than to be	maintained as par	t of the organiz	zation's co	llection?			٠. 🗆 ۲	res 🗌 No
Dai	rt IV Escrow and Custodial Arrang	nements.							
Ган	Complete if the organization ar	nswered "Yes" i	to Form 99	0. Part l'	V, line 9, c	or repo	rted an amou	nt on Fo	orm
	990, Part X, line 21.	101101011111			1754 * 125422 ARTHUR SAUGUS - 40	•			
4-	Is the organization an agent, trustee, custodian	or other intermediar	v for contribut	ions or oth	er assets no	t			
1a	included on Form 990, Part X?							П	Yes No
	If "Yes," explain the arrangement in Part XIII and								
b	if "Yes," explain the arrangement in Part Alli and	Complete the folior	wing table.				Am	nount	
	Destruire belone					. 1c			
С.	Beginning balance								
d	Distributions during the year					. 1e			
e	Ending balance					. 1f	_		
f	Did the organization include an amount on Form	000 Bort V line 2	1 for escrow (or custodia	l account lial	hility?		П	Yes No
2a	If "Yes," explain the arrangement in Part XIII. Ch	ack boro if the expl	anation has he	een nrovid	ed in Part XI	II .			
b		eck nere ii the expi	anation has be	een provid	cu iii i ait Xi				
Pa	rt V Endowment Funds. Complete if the organization as	newered "Yes"	to Form 99	0 Part I	V line 10.				
	Complete if the organization at				(c) Two years		(d) Three years back	(e) For	ur years back
9		(a) Current year	(b) Prior	year	(c) Two years	Dack	(d) Three years back	(6) 1 00	ar youro baok
1a	Beginning of year balance		-					-	
b	Contributions							-	
C	Net investment earnings, gains, and								
	losses						W. C.	-	
d	Grants or scholarships		_	-					
е	Other expenditures for facilities and								
	programs				- A				STERROSCI 6
f	Administrative expenses							_	
g	End of year balance			/ N I I	·				
2	Provide the estimated percentage of the current		(line 1g, colum	nn (a)) neid	as:				
а	Board designated or quasi-endowment	%							
b	Permanent endowment > %								
С	Temporarily restricted endowment	%							
	The percentages in lines 2a, 2b, and 2c should	equal 100%.		lal accal at	deletere 1 f.	the			
3a	Are there endowment funds not in the possession	on of the organization	on that are hel	id and adm	inistered for	те			Yes No
	organization by:						and the same age than the time of	29/6	
	(i) unrelated organizations · · · · · · ·							. 3a(i)	
	(ii) related organizations · · · · · · · ·							- 3a(ii	/
b	If "Yes" to 3a(ii), are the related organizations lis							. 30	
4	Describe in Part XIII the intended uses of the or		ment funds.						
Pa	rt VI Land, Buildings, and Equipn	nent.	t- F 00	0 D-4	V line 44	. C.	Form 000 D	ort V lin	0.10
	Complete if the organization a	nswered "Yes"	to Form 99	o, Part	v, line 11a	a. See	FOITH 990, Pa		
	Description of property	(a) Cost or o		(b) Cost or	- E	187.00	Accumulated	(d) Bo	ok value
		(inves	tment)	(of	ther)	d	epreciation		190000000000000000000000000000000000000
1a	Land			8.	58,280				858,280
b	Buildings			8,7	11,093		2,001,084		710,009
С	Leasehold improvements			5,2	90,060		757,135	4,	532,925
d	Equipment			5	25,217		310,080		215,137
е	Other STMD1				51,999		147,725		4,274
	al. Add lines 1a through 1e. (Column (d) must equ	ual Form 990, Part	X, column (B),	line 10c.)			▶	12,	320,625

Page 2

	Complete if the organization answer		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
) Financial de			
	d equity interests		
) Other		5,460	Cost
	ity Deposit	3,400	0000
(B)			
(C)	The state of the s		
(D)			
(E)			
(F)			
(G) (H)			
) must equal Form 990, Part X, col. (B) line 12.)	5,460	
Part VIII	Investments Program Related		
a. c	Complete if the organization answer	ed "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)			
) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.	red "Ves" to Form 990 Part IV	, line 11d. See Form 990, Part X, line 15.
			(b) Book value
(4)	(a)	Description	
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col. (B) line 1	5.)	
Part X	Other Liabilities. Complete if the organization answe line 25.	red "Yes" to Form 990, Part IV	/, line 11e or 11f. See Form 990, Part X,
1.	(a) Description of liability	(b) Book value	
	income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

•

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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

edule D (Form 990) 2014 Ideal Academy Public Charter School		52-2138	875 Page 4
art XI Reconciliation of Revenue per Audited Financial Statemer	its With Revenue pe	r Return	•
Complete if the organization answered "Yes" to Form 990, Par	t IV, line 12a.		
Total revenue, gains, and other support per audited financial statements		1	5,466,531
Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
Net unrealized gains (losses) on investments	2a		
Donated services and use of facilities	2b 22,323		
Recoveries of prior year grants	2c		
Other (Describe in Part XIII)	2d		
Add lines 2s through 2d		2e	22,323
Subtract line 2e from line 1		3	5,444,208
Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
Investment expenses not included on Form 990, Part VIII, line 7b	4a		
Other (Describe in Part XIII.)	4b		
Add lines 4a and 4b		4c	
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	5,444,208
ert VII Reconciliation of Expenses per Audited Financial Statem	ients with Expenses	per Ret	urn.
Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 12a.		
Total expenses and losses per audited financial statements		1	5,129,044
Amounts included on line 1 but not on Form 990, Part IX, line 25:	~ F		
Donated services and use of facilities	2a		
Prior year adjustments	2b		
Other losses	2c		
Other (Describe in Part XIII.)	2d		
Add lines 2a through 2d		2e	
Subtract line 2e from line 1		3	5,129,044
Amounts included on Form 990, Part IX, line 25, but not on line 1:			
Investment expenses not included on Form 990, Part VIII, line 7b	4a		
Other (Describe in Part XIII.)	4b		
Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·		4c	
Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	5,129,044
art XIII Supplemental Information.			
ovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines	s 1b and 2b; Part V, line 4; P	art X, line	
Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	dditional information.		
1. Other expenses not included on Form 990 (Page 1)	art XII, line	2d)	
ASE LIABILITY			
ADE LITERALIT			
			76.
		1111	All and the second
		- Wallington	
		Windle Committee	
Λ.			Schedule D (Form 990) 2

EEA

Page 4

SCHEDULE E (Form 990 or 990-EZ)

Schools

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Ideal Academy Public Charter School

Employer identification number 52-2138875

Par	tl		\/=o	
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,	1	Χ	
	Dylaws, office doverning institutions, or in a resolution of its governing body.		21	
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?	2		X
•	Programs, and scholarships?			
3	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	3	X	
	See Part II			
4	Does the organization maintain the following?		71.55	
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially			
	nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
1875	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:			
а	Students' rights or privileges?	5a		X
				37
b	Admissions policies?	5b		X
		Eo		v
C	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	5d		Х
d	Scholarships or other financial assistance?	- 50		21
	Educational policies?	5e		X
е	Educational policies?	50		21
	Use of facilities?	5f		Х
ī	Ose of facilities?			
а	Athletic programs?	5g		X
g	Athletic programs: 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	1000		19-50
	If you allowed to to any of the above, please or plant in your end of the above or plant in your end of the above or plant in your end of the above or plant in your end of the			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" to either line 6a or line 6b, explain on Part II.	K. A.L.		
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	7	X	

Schedule E (Form 990 or 990-EZ) (2014) Ideal Academy Public Charter School 52-2138875 Page 2
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).
01. Governmental Agency Financial Aid (Questions 6a and 6b)
SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:
THE SCHOOL RECEIVES APPROZIMATELY 99% OF ITS ANNUAL REVENUE FROM THE DISTRICT OF
COLUMBIA PUBLIC CHARTER SCHOOL BOARD.
02. Description of nondiscriminatory policy (Question 3)
SCHEDULE E, LINE 3 - EXPLANATION OF NONDISCRIMINATION POLICY:
THE SCHOOL IS A PUBLIC CHARTER SCHOOL FREE OF CHARGE TO STUDENTS WHO RESIDE IN THE
DISTRICT OF COLUMBIA. ADMISSIONS ARE CONDUCTED IN ACCORDANCE WITH THE DISTRICT LAW
AND ANY ELIGIBLE CHILD APPLYING IN ACCORDANCE WITH THE LAW WILL BE ADMITTED, SUBJECT
SOLELY TO MAXIMUM ENROLLMENT LIMITS. THE SCHOOL DOES NOT DISCRIMINATE AGAINST ANYONE
BECAUSE OF RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY OR ANY
OTHER CHARACTERISTIC PROTECTED BY LAW.

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions. explanations, and any additional information in Part VI.

Attach to Form 990.

OMB No. 1545-0047 2014

Open to Public Inspection

Employer identification number 52-2138875

Ideal Academy Public Charter School Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990

A DISTRICT OF COLUMBIA C W Part I 10 Capital expenditures from proceeds 5 Capitalized interest from proceeds ယ Part II 17 Does the organization maintain adequate books and records to support the 16 Has the final allocation of proceeds been made? 15 Were the bonds issued as part of an advance refunding issue? 14 Were the bonds issued as part of a current refunding issue? 12 9 8 Credit enhancement from proceeds Part III Amount of bonds legally defeased Working capital expenditures from proceeds Total proceeds of issue Are there any lease arrangements that may result in private business use of which owned property financed by tax-exempt bonds? Was the organization a partner in a partnership, or a member of an LLC final allocation of proceeds? **Bond Issues** Proceeds Private Business Use (a) Issuer name 53-6001131 (b) Issuer EIN . NONE (c) CUSIP# Yes Yes × 01-22-2008 10,600,000 (d) Date issued 10,600,000 D D × × × × × No 10,600,000 (e) Issue price Yes Yes W ω PURCHASE PROCEEDS LOANED FOR THE No No (f) Description of purpose Yes Yes C 0 No No (g) Defeased Yes Yes Yes S × Yes No (h) 0n behalf of U × Yes financing (i) Pooled 8 8 × No

Part III Private Business Use (Continued)	ntinued)								
Ī		Þ				C		0	
3a Are there any management or service contracts that may result in private	cts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
business use of bond-financed property?			×						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside	engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?	tracts relating to the financed property? · ·								
c Are there any research agreements that may result in private business use of	/ result in private business use of								
			×						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other	engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?	ts relating to the financed property? · · ·								
4 Enter the percentage of financed property used in a private business use by entities	a private business use by entities								
other than a section 501(c)(3) organization or a state or local government	ate or local government · · · · ·		%		%		%		%
5 Enter the percentage of financed property used in a private business use as	sed in a private business use as a								
result of unrelated trade or business activity carried on by your organization,	carried on by your organization,								?
another section 501(c)(3) organization, or a state or local government	state or local government		%		%		%		%
6 Total of lines 4 and 5 · · · · · · · · · · · ·			%		%		%		%
7 Does the bond issue meet the private security or payment test?	ty or payment test?		×						
8a Has there been a sale or disposition of any of the bond-financed property to a	bond-financed property to a		1	**************************************					
nongovernmental person other than a 501(c)(3) organization since the bonds were issued?	rganization since the bonds were issued? · ·		>						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or	ond-financed property sold or				1		2		?
disposed of			%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations	aken pursuant to Regulations								
sections 1.141-12 and 1.145-2?									
9 Has the organization established written procedures to ensure that all	cedures to ensure that all				4 10 CO N				
nonqualified bonds of the issue are remediated in accordance with the	ted in accordance with the		*						
equireme	110-11								
Tailly Aibinage			D	B		C		0	
			2	Von	5	Vac	Z V	Yes	Z
Penathy in Lieu of Arbitrage Rebate?	Topate, Tela Topatación ana	100	×						
2 If "No" to line 1, did the following apply?									
20			×						
			×						
			×						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was	e the rebate computation was								
performed		1	1						
3 Is the bond issue a variable rate issue?			×						
4a Has the organization or the governmental issuer entered into a qualified	ssuer entered into a qualified		4						
hedge with respect to the bond issue?			>						
b Name of provider									
c Term of hedge									
d Was the hedge superintegrated? · · · ·									
e Was the hedge terminated?									
EEA								Schedule K	Schedule K (Form 990) 2014

Part IV Arbitrage (Continued)								
	A			- 00	C		0	
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	Yes	× 8	Yes	No	Yes	No	Yes	No
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period? · · ·		×						
7 Has the organization established written procedures to monitor the								
uiren		×						
Part V Procedures To Undertake Corrective Action								
	A			8	5		D	
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation is not available	4							
Part VI Supplemental Information Provide additional information for responses to questions on	for respon	ses to ques		Schedule K (see instructions)	ee instructio	ons)		
9		-						
B								
(A) ISSUER NAME: DISTRICT OF COLUMBIA								
(F) DESCRIPTION OF PURPOSE: PROCEEDS LOANED FOR THE PURC	PURCHASE OF	A BUILDING	Q					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014

Open to Public

Department of the Treasury
Internal Revenue Service
Name of the organization

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

Open to Public Inspection

Employer identification number

Ideal Academy Public Charter School	52-2138875
01. Form 990 governing body review (Part VI, line 11)	
FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS ELECTRONICALLY SUB	MITTED TO THE
TREASURER OF THE BOARD TO BE REVIEWED PRIOR TO BEING SUBMITTED TO THE	IRS.

02. Conflict of interest policy compliance (Part VI,	line 12c)
FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF TRUSTEES DOES N	OT ACCEPT ANY
CONTRACTS FROM BOARD MEMBERS OR COMPENSATE MEMBERS FOR ANY SERVICES P	ROVIDED AS A BOARD
MEMBER	
03. CEO, executive director, top management comp (Par	t VI, line 15a)
FORM 990, VI, SECTION B, LINE 15: COMPENSATION OF THE ORGANIZATION'S	BUSINESS MANAGER,
PRINCIPAL AND TOP MANAGEMENT INCLUDES A REVIEW OR COMPARABILITY DATA	AND SALARY SCHEDULES.
04. Governing documents, etc, available to public (Pa	rt VI, line 19)
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, THE CONF	LICT OF INTEREST
POLICY, AND THE FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC BY R	EQUEST.
	version in the part of the property of the part of th