Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection For the 2012 calendar year, or tax year beginning September 1 2012, and ending 20 13 August 31 Check if applicable. C Name of organization Cityscape Schools, Inc. D Employer identification number 7 Address change Doing Business As 75-2733436 \square Name change Number and street (or P.O box if mail is not delivered to street address) E Telephone number Initial return 6211 East Grand Ave. 214.824.4747 City, town or post office, state, and ZIP code Terminated Amended return Dallas Texas 75223 G Gross receipts \$ Application pending F Name and address of principal officer Leonard Brannon H(a) is this a group return for affiliates? Yes Yes No 4301 Bryan Street, Suite 120, Dallas, TX 75204 H(b) Are all affiliates included? Yes No 501(c)(3) Tax-exempt status ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or If "No." attach a list (see instructions) Website: > www.radallas.org H(c) Group exemption number ▶ Form of organization 🗹 Corporation 🔲 Trust M State of legal domicile L Year of formation: 1997 Part I Summary Briefly describe the organization's mission or most significant activities: Provides a distinctive environment of educational opportunities for children and young people Activities & Governance Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 33 Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7ь 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) 1,767,269 1,808,355 9 Program service revenue (Part VIII_line_2a) 1.444 2.825 Investment income (Part VIII, column (A), lines 3P4 and VID 10 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1
Total revenue—add lines 8 through 11 (must equal Part VIII, column 11 0 12 1.810792 1,867,269 13 Grants and similar amounts paid Part IX, column (A), lines 0 O Benefits paid to or for members (Part IX, column LA), in 64,2015 14 0 0 Salaries, other compensation, employee benefits (Part IX, column GS AREA 2 TERRI 15 959,423 1,101,116 Professional fundraising fees (Part IX, column (A), line 15 Total fundraising expenses (Part X, column (D), line 25) 16a b 17 Other expenses (Part IX, column 1A), times 11a-1 640,509 670.267 18 1,629,690 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,741,625 19 Revenue less expenses. Subtract line 18 from line 12 69,167 End of Year Beginning of Current Year Total assets (Part X, line 16) 20 235,411 351,524 21 Total liabilities (Part X, line 26) 21.466 29.555 22 Net assets or fund balances. Subtract line 21 from line 20 213,945 321.969 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 Signature of officer Here rannon conard Type or print name and title Print/Type preparer's name Preparer's signature Paid Preparer Firm's name **Use Only** Firm's address 🕨 May the IRS discuss this return with the preparer shown above? (s For Paperwork Reduction Act Notice, see the separate instructions.

Check if Schedule O contains a response to any question in this Part III Briefly describe the organization or mission: Reconciliation Academy exists to work in an educational partnership with families. We desire to provide a distinctive environment of educational opportunity for alt-hildren and young people in our community. Reconciliation Academy students will have the appearunity to succeed, lead, and contribute to the community and to their fellow man. 2. Old the organization undertake any eignificant program services during the year which were not listed on the prior Form 990 or 990-627. If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization of Schedule O. Describe the organization of Schedule O. Describe the organization sprogram service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(d) and 501(c)(d) organizations are required to report the amount of grants and allocations to of the total expenses, and revenue, if any, the each program service reported. 4a (Code:	orm 990			Page 2
1 Breify describe the organization of mission: Responditualiston Academy sixts to work in an educational partnership with families. We desire to provide a distinctive environment of estucational opportunity for all children and young people in our community. Reconciliation Academy students will have the Poportunity to succeed, lead, and contribute to the community and to their fellow main. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 930 or 990-E27. If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services services? If "Yes," describe these changes on Schedule O. Did the organization's program service accomplishments for each of its three largest program services, services? If "Yes," describe the organization's program service accomplishments for each of its three largest program services, services? If "Yes," describe the organization's program service expenses. Section 501(clys) and 501(cly) organizations are required to report the amount of grants and allocations to ot the total expenses, and revenue, if any, for each program service reported. 4a (Code:	Part I			
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40 Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(S) and 501(c)(4) organizations are required to report the amount of grants and allocations to of the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 1,829,899 including grants of \$) (Revenue \$ 1,887,289) Reconciliation Academy provides educational services for basic education and special programs functioning as an LEA. Reconciliation Academy is approved and accredited by the Texas Education Agency and is considered a public school by the State of Texas. 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code:) (Expenses \$ including grants of \$) (Revenue \$)			∐ Yes ⊡	Пио
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	4d			
4e i otal program service expenses ▶	4e	Total program service expenses ▶		

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aru.	Checklist of Required Schedules		V- 1	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1	Yes ✓	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	3	-	√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		· /
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	5		1
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	6		1
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	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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	9		1
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	10		1
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.			
а	complete Schedule D, Part VI	118	1	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		/
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
1	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
	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.	12b		1
13 14 a	- 3	13 14a	/	1
t	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	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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)	17		1
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.	18		1
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	19		1
20 a	The state of the s	20a	-	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b For	m 99 6) (2012)
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Part I	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		√ _
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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	23		✓_
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 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
_ d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		/
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	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
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		1
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).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			<u> </u>
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			١.
0.4	conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-32 ff "You" complete School to D. Bott	20		
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		-
	or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
ь	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		1
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		1
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	37		1
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	38	1	<u> </u>
		For	n 99 0	(2012)

07/14/2015

Form 990 (2012)

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Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 things	rough 7b below,	and fo	ra '	'No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	in Schedule O. Se	e instr	uctio	ns.
				<u> </u>	<u> </u>
Section	n A. Governing Body and Management			VA. 1	No
_				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	1a 5		V.	
	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 5			
2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business in				
_	any other officer, director, trustee, or key employee?		2	15° 198-150 44	KG=77
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		з 📗		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization		5		√
6	Did the organization have members or stockholders?		6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to				,
	one or more members of the governing body?		7a		<u>√</u>
ь	Are any governance decisions of the organization reserved to (or subject to approve	i by) members,	7b		✓
8	stockholders, or persons other than the governing body?	dertaken during	7.0		
J	the year by the following:	dertaker dering			
а	The governing body?		8a	√	#132 2 CA
b	Each committee with authority to act on behalf of the governing body?		8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule (), <u> </u>	9	l	✓
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue Co	de.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	}	✓
ь	If "Yes," did the organization have written policies and procedures governing the activities of		406		
11a	affiliates, and branches to ensure their operations are consistent with the organization's exer Has the organization provided a complete copy of this Form 990 to all members of its governing body before		10b	7	
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	•	12a	A Agos.	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could gi	ve rise to conflicts?	12b	1	
C	Did the organization regularly and consistently monitor and enforce compliance with the				
	describe in Schedule O how this was done	` <i>.</i>	12c		1
13	Did the organization have a written whistleblower policy?		13	√	
14			14	√ EXEMPLY	enter alex
15	Did the process for determining compensation of the following persons include a review				
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation.	il aliu decisioni	15a		Wales.
a b	The organization's CEO, Executive Director, or top management official		15b	<u> </u>	1
Ü	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 sim	nilar arrangement			
	with a taxable entity during the year?		16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	on to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps	to safeguard the			
	organization's exempt status with respect to such arrangements?	· · · · · · · · · · · · · · · · · · ·	16b		L
	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed None		E01/	-1/2/-	
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, available for public inspection. Indicate how you made these available. Check all that apply.	and 990-1 (26ctio	11 301(0	JJ(J)S	only)
		shadula (1)			
19	Own website Another's website Upon request Other (explain in Secretary in Schedule O whether (and if so, how), the organization made its governing documents.		of inter	est n	olicy
	and financial statements available to the public during the tax year.	umenta, commet (, nudi	out p	wiicy,
20	State the name, physical address, and telephone number of the person who possesses the i	ooks and records	of the		
	organization: ► Leonard Brannon - 214-824-4747 4301 Bryan Street, Suite 120, Dallas, TX 75204				
		 		200	

Form 990 (201	2) Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and

Independent Contractors									
Check if Schedule O contains a response to any question in this Part VII.						•	<u>. </u>	. 1	<u>ட</u>

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.

				(0	•			-		
(A)	(8)	(do n		Posi eck		than o	ne	(D)	(E)	(F)
Name and Title	Average	Average box, uni		s pe	noer	ls both	an	Reportable	Reportable compensation from	Estimated amount of
	hours per week (list any		_			or/truste		compensation from	related	other
	hours for	indiv or di	nsti	Officer	ê	필호	Former	the	organizations (W-2/1099-MISC)	compensation from the
	related organizations	Individual trustee or director	institutional trustee	ě	Key employee	loye o	Ē	organization (W-2/1099-MISC)	(W-2) 1099-MIGO	organization
	below dotted	약화	กล		oloye	E SO			1	and related organizations
	arter)	ste	rust		äš	Jens				organizations
			8			Highest compensated employee				
(1) Wes Briggs		<u> </u>						1		
President	1.0	1								
(2) Eiree Griffin										
Vice President	1.0	✓_								
(3) Billy Ferrall										
Treasurer	1.0	1								
(4) Kathy Dudley										
Member	1.0_	1					L			
(5) Neil Phillips]								
<u>Wember</u>	1.0	1		L_	L		_			
(6) Leonard Brannon		1			1		١			l
Superintendent	40	L	1_	1	<u>L</u>		<u> </u>	36,693		
(7) Carol Thorne		ļ			ļ					
Assistant Superintendent	40	<u> </u>		1	 		_	60,839		
(8)		1								
(9)										
(10)		 	-		-					
(11)		}	+	-	-		-	 		
(12)		<u> </u>	-	-	_		_			
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Part '	Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighes	at C	ompensated E	mployees (co	ontinued)	
)) Poe	ጋ) Itlon						
	(A) Name and title	(B)			ieck	more	than		(D) Reportable	(E) Reportable		(F) Estimated
	INSTITUTE STILL (III)	Average hours per	o box, ances porson a pour an					compensation		amount of		
		week (list any hours for	요공	ह	Q	Κey	랔王	7	from the	related organization	s	other compensation
		related	dire	휼	Officer		Pas	Former	organization	(W-2/1099-MI		from the
		organizations below dotted	to al t	2		employee	80]	(W-2/1099-MISC)			organization and related
		line)	Individual trustee or director	Institutional trustee		Yee	l g				Ì	organizations
			8	stee			Highest compensated employee					
(15)					-	-	-	┢				
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(24)			-				1				1	
(25)		 	┼	╁	+-	+	┼	+-	 	ļ. — —		~
			1									
16	Sub-total				•			▶	97,532			
C	Total from continuation sheets to Part			•	٠	•		>		-		
<u>u</u>	Total (add lines 1b and 1c)								97,532)O 000 o	
_	reportable compensation from the organ	ization > 0	u to t	1105	U (15	ilea	abov	0) v	MUO IECEIVOO II	iole men and	00,000	
												Yes No
3	Did the organization list any former of									hest compe	nsated	
4	employee on line 1a? If "Yes," complete									 nanostion fro	om tha	3 /
7	For any individual listed on line 1a, is the organization and related organizations											
	ındıvidual							Í				4 1
5	Did any person listed on line 1a receive									zation or ind	ividual	
Caral	for services rendered to the organization	n? If "Yes,"	comp	lete	Sc	hec	lule J	for	such person	· · · · ·	<u> </u>	5 ✓
Security 1	on B. Independent Contractors Complete this table for your five highest	COMPARCA	tod in	dor	300	don		raa	tors that resain	ed more tha	n \$100 0	nn of
•	compensation from the organization. Re	port comp	ensat	ion .	for 1	he	calen	dar	vear ending Wi	th or within t	he orgai	nization's tax
	year.	·										
	(A) Name and business ad	ldraan							(B)			(C)
	Haire and dusmess at							+-	Description of	services		mpensation
								+				
								+				
								I				
	Total number of independent control	are finalist	inc.	4		15		بل	Income Black Total		Digital R	
-	Total number of independent contract received more than \$100,000 of comper	ors (includ esation from	ing D	יטנו מנתם	יבוחו זטוי	ıım Olte	πed 1	o t	inose listed at	ove) who		
				- yo	4 114.	41101			·	K	4440	Form 990 (201

Form 990 (2012)

Part	IX Statement of Functional Expenses				uma (A)
Section	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons			(C)	(D)
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundralsing expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	194,105		194,105	
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 8	Other salaries and wages	679778	679778		
•	section 401(k) and 403(b) employer contributions)			12576	
9 10	Other employee benefits	85540	72970 48850	12570 13128	
11	Payroll taxes . Fees for services (non-employees)	61978	48050	75120	
а	Management				
b	Legal	1275		1275	
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, fine 17		Market Control		
f 9	Investment management fees. Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	14468	8919	5549	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings . Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	4468	4468		
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.)				
9	Operations/LeasesRent	10274	402743		
a b	***************************************	182743 208591	 		
c	Professional Services	99731	+	 	
d		114952			
е	All other expenses Utilities	44039			***
25	Total functional expenses. Add lines 1 through 24e	1,629,690	+		
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 if following SOP 98-2 (ASC 958-720)	1/22/300	.,,,,,,,,		

Pi	irt X	Balance Sheet				
		Check if Schedule O contains a response to	any question in this Part	X		
_				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		159,310	1	224,918
1	2	Savings and temporary cash investments			2	
ļ	3	Pledges and grants receivable, net		66,983	3	101,101
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and f				
		trustees, key employees, and highest co	mpensated employees.			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified pers			15.04 10.04	
		4958(f)(1)), persons described in section 4958(c)(3)(B), an	d contributing employers and			and the second
		sponsoring organizations of section 501(c)(9) volum	tary employees' beneficiary			
Assets	7	organizations (see instructions). Complete Part II of Sche	dule L		6	
8	7 8	Notes and loans receivable, net			7	
	9	Prepaid expenses and deferred charges			8	
	10a	Land, buildings, and equipment cost or	1			
		other basis Complete Part VI of Schedule D	10a 156,711	July 100 Control	10	
	b	Less: accumulated depreciation	10b 101,651	9,118	10c	55,060
	11				11	
	12	Investments-other securities. See Part IV, line 1	11		12	
	13	Investments-program-related. See Part IV, line			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	235,411	16	381,079
	17	Accounts payable and accrued expenses		21,466	_	17,047
	18 19	Grants payable			18	2,508
	20	Tax-exempt bond liabilities			19	
	21	Escrow or custodial account liability. Complete I			21	
92	22	Loans and other payables to current and for				
#		trustees, key employees, highest compen	sated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedu	ıle L	Deminer 1,5-27, cl. 1,15,470 pp. 200 pp. 100 p	22	CATTAL TO SECONDARY STATE OF THE SECONDARY ST
I	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax,	payables to related third			
		parties, and other liabilities not included on lines of Schedule D	s 17-24). Complete Part X			}
	26	Total liabilities. Add lines 17 through 25	• • • • • • •		25	
		Organizations that follow SFAS 117 (ASC 958	check here b 🕡 and	21,466	26	29,555
ès		complete lines 27 through 29, and lines 33 and	d 34.		1.72	
350	27	Unrestricted net assets		80,008	27	288,057
Bal	28	Temporarily restricted net assets		133,937		63,467
P	29	Permanently restricted net assets		0		0
Ę		Organizations that do not follow SFAS 117 (ASC 9)	58), check here ➤ 🔲 and			
ŏ		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
SS	31	Paid-in or capital surplus, or land, building, or ed	quipment fund		31	
et /	32 33	Retained earnings, endowment, accumulated in	come, or other funds .		32	<u> </u>
Ž	34	Total fightlities and not people fined belonger		213,945		351,524
		Total liabilities and net assets/fund balances .		<u></u>	34	381,079 Form 990 (2012)

Reconcilitation of Net Assets Check of Schedule O contains a response to any question in this Part XI Total revenue (must equal Part IXI, column (A), line 12) 1,756,726 2, 1,629,69 3 Revenue less expenses. Subtract line 2 from line 1 3,37,371 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 2113,94 Net unrealized gains (losses) on investments 5 5 5 6 6 7 1 1 1 1 1 1 1 1 1	Form 99	90 (2012)			Page 1	2
1 Total revenue (must equal Part VIII, column (A), line 12). 1 1,787,26 2 Total expenses (must equal Part IX, column (A), line 25). 2 1,629,69 3 Revenue less expenses. Subtract line 2 from line 1 3 3 13,737 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 213,94 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 9 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)) 9 11 Accounting method used to prepare the Form 990: Cash Accrual 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? 1 "Yes" no hook as parate basis, consolidated basis, or both: Separate basis Consolidated basis or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 1 "Yes" to line 2 abox below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis or both: Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2 ar 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. 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? b If "Yes," did the organization undergo the required audit or audits, explain of audits, explain or audits, explain or audits, explain o	Part					_
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Donated services and use of facilities Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII. Accounting method used to prepare the Form 990: Cash Accrual Other if the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O at 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: Separate basis Consolidated basis Both consolidated and separate basis 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: Separate basis Consolidated basis. Both consolidated and separate basis. 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: Separate basis. Consolidated basis or both: Separate basis. Consolidated basis or both: Separate basis. Other 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				` 		ī
Revenue less expenses. Subtract line 2 from line 1	1					
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2					
Solumn (8) Solu	3					
Donated services and use of facilities Investment expenses Prior period adjustments Perior period pe	4		-		213,94	<u>15</u>
7 Investment expenses	5	Net unrealized gains (losses) on investments				
8 Prior period adjustments	6	Donated services and use of facilities	<u> </u>			_
9 Other changes in net assets or fund balances (explain in Schedule O)	7	Investment expenses				_
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check If Schedule O contains a response to any question in this Part XII. 1 Accounting method used to prepare the Form 990: Cash Accrual 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: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis c 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. 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	8	Prior period adjustments				_
The strict of the audit, review, or compilation of its financial statements and separate basis. c 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 process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo any steps taken to undergo the required audit or audits, explain undergo the required audit or audits, explain undergo the required audit or audits, explain undergo such audits. 3a by steps taken to undergo such audits. 3b If "Yes," did the organization undergo the required audit or audits, explain undergo such audits.	9		9			
Check if Schedule O contains a response to any question in this Part XII . Yes No 1 Accounting method used to prepare the Form 990: Cash Accrual 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?	10					
Check if Schedule O contains a response to any question in this Part XII . Yes No 1 Accounting method used to prepare the Form 990: Cash Accrual 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: Separate basis Consolidated basis Both consolidated and separate basis 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: Separate basis, Consolidated basis, or both: Separate basis, Consolidated basis, or both: Separate basis Consolidated basis, or both: Separate basis, Consol		33, column (B))	10		351,52	24
Accounting method used to prepare the Form 990: Accrual Accrual Accounting method used to prepare the Form 990: Accrual Accrual Accounting from a prior year or checked "Other," explain in Schedule O 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 Both consolidated and separate basis 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: Separate basis Consolidated basis Both consolidated and separate basis 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. 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? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Part	XII Financial Statements and Reporting				
Accounting method used to prepare the Form 990: Accrual Accrual 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?		Check if Schedule O contains a response to any question in this Part XII			<u> </u>]
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. 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?	2a b	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O 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 com reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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 audite separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis.	onled o	. 2a or . 2b a	✓	である。 ではできなが、 では、 では、 では、 では、 では、 では、 では、 では
the Single Audit Act and OMB Circular A-133?	¢	of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, exchedule O.	intant? (plain i	? 2c	/	
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	3a	the Single Audit Act and OMB Circular A-133?		. 3a	1	_
- NON took	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ergo th udits	3b	n 990 (201	

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

2012

Open to Public

Department of the Treasury		יו (ו)(מ) ורכד							Open to Public
nternal Revenue Service	<u> </u>	Attach to Form 990 or F	orm 990-E	Z. ►See	separate				Inspection
lame of the organization							Employer i		
Part I Reason		wite Chaten (All	oni-ot			- 4b!	#\C		733436
	t a private found	arity Status (All organical in All organ	arlization	three -	complet	e inis pa	ut.) 588	IIISIIUCII	UIS.
The organization is not a continuous form of the continuous form of	t a private found need to private found need in section a cooperative he search organization, city, and state on operated for b)(1)(A)(iv). (Comb)(1)(A)(iv). (Comb)(1) trust described on that normally activities related on organization and on organized and o	ation because it is: (Fiches, or association of 170(b)(1)(A)(ii). (Atta ospital service organizion operated in conjurte: the benefit of a colle	or lines 1 f churche ch Sched ation des action with ege or un tal unit de al part of irt II.) (Voi). (Con an 331/39 tions—su elated busines section f to test for	through is described in h a hospitiversity of the support of the s	section tal describing or from art II.) upport from certain exable in (2). (Comsafety. S	operated a government of the plete Pares e section	e box.) (b)(1)(A)((A)(iii). ection 17 I by a go 1)(A)(v). mental un iibutions, s, and (2, ss section t III.) on 509(a)	o(b)(1)(A overnmen nit or from members on o more on 511 to)(lii). Enter the tal unit described the general publiship fees, and grose than 331/3% of itax) from businesse
nurnness of	on organized a	na operatea exclusiv	ely for tr	ne beneti	t of, to	perform	the func	cions of,	or to carry out th
509(a)(3). Ch	one or more pui eck the how that	blicly supported orga describes the type of	nizations	describe	d in sect	tion 509(a	a)(1) or so	BCTION SU	/9(a)(2). 5 00 sec tio
a ☐ Type I									tionally integrated
e 🗌 By checking	this box, I certify	that the organization	is not co	entrolled o	directly o	r indirecti	ly by one	or more	disqualified persor
		ers and other than on	e or more	e publicly	support	ted organ	izations (described	d in section 509(a)(
or section 50									
organization,	check this box	a written determinati	· · · ·						pe III supporting
following pers	ions?	the organization acce							
(iii) below,	the governing b	indirectly controls, eit ody of the supported	organizat	tion?				d in (ii) a 	11g(i)
(II) A family n	nember of a pers	on described in (i) abo	ove?	· • •					11g(ii)
h Provide the fo	ntrolled entity of	a person described in ion about the support	n (I) or (II) :	above? .		· · ·	• •		115(84)
(i) Name of supported	(II) EIN	(BI) Type of organization	T	organization	,	ou notify	64D	ls the	(vii) Amount of monetar
organization	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(described on lines 1-9 above or IRC section (see instructions))	in col. (f) lis	ated in your document?	the organical (f)	nization in of your port?	organizat (i) organi	tion in collized in the S.?	support
		(200 11.0000001.0))	Yes	No	Yes	No	Yes	No	1
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3)									
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otal				landa v.A				7.00	

Schedu	le A (Form 990 or 990-EZ) 2012						Page 3
Part		tions Descr	ibed in Secti	on 509(a)(2)			
	(Complete only if you checked th	e box on line	9 of Part I o	r if the organi	ization failed i	to qualify u	nder Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part I	1.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
¢	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						8
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from Interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	!					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
¢	Add lines 10a and 10b	7/1					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	re			, or fifth tax yo		
	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8					15	<u>%</u>
16	Public support percentage from 2011 Sch	edule A, Part	III, line 15 .			16	<u>%</u>
	on D. Computation of Investment Inc				(0)	147	6/
17 18	Investment income percentage for 2012 (Investment income percentage from 2011					17	<u>%</u>
19a	331/3% support tests—2012. If the organi.	zation did not	check the box	con line 14, ai	nd line 15 is m	ore than 331	3%, and line
þ	331/3% support tests—2011. If the organization 18 is not more than 331/3%, check this b	ation did not d	heck a box on	line 14 or line 1	19a, and line 16	is more than	331/3%, and

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

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	Page 4
	not octions;	
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07/14/2015 2:45PM (GMT-04:00)-

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. ► See separate instructions.

OMB No 1545-0047

Open to Public Department of the Treasury Internal Revenue Service Name of the organization Inspection Employer identification number

	ape Schools, Inc.		75-2733436
Pai		or Advised Funds or Other Similar F	unds or Accounts. Complete if the
	organization answered "Yes" to F		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		<u> </u>
5	Did the organization inform all donors and		
	funds are the organization's property, subje		
6	Did the organization inform all grantees, do		
	only for charitable purposes and not for the		
		· · · · · · · · · · · · · · · · · · ·	
	Conservation Easements. Comp		s" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e.g.,		
	Protection of natural habitat	☐ Preservation	of a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribu	ution in the form of a conservation
	easement on the last day of the tax year.		
			Held at the End of the Tax Ye
a	Total number of conservation easements		2a
þ	Total acreage restricted by conservation ea		
C	Number of conservation easements on a ce		
d	Number of conservation easements include		f f
_	historic structure listed in the National Regis		2d
3	Number of conservation easements modifie	d, transferred, released, extinguished, or t	erminated by the organization during the
	tax year ▶		
4	Number of states where property subject to		
5	Does the organization have a written po		
	violations, and enforcement of the conserva		-
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservati	on easements during the year
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	asements during the year
_	\$		
8	Does each conservation easement reported		
			· · · · · · · 🗌 Yes 🗌 N
9	In Part XIII, describe how the organization re		
	balance sheet, and include, if applicable, the		financial statements that describes the
~ .	organization's accounting for conservation		
Part		ections of Art, Historical Treasures,	
		vered "Yes" to Form 990, Part IV, line	
18	If the organization elected, as permitted un		
	works of art, historical treasures, or other		
	public service, provide, in Part XIII, the text		
b	If the organization elected, as permitted un	nder SFAS 116 (ASC 958), to report in it	ts revenue statement and balance she
	works of art, historical treasures, or other	similar assets held for public exhibition,	education, or research in furtherance
	public service, provide the following amount		
	(i) Revenues included in Form 990, Part VIII	, line 1	· · · · ▶ \$
_	(ii) Assets included in Form 990, Part X		. > \$
2	If the organization received or held works	of art, historical treasures, or other simi	iar assets for financial gain, provide tr
	following amounts required to be reported u		
a	Revenues included in Form 990, Part VIII, lin	e1	. ▶ \$
	Assets included in Form 990, Part X		> \$
or Pa	erwork Reduction Act Notice, see the Instructi	ons for Form 990. Cat. No 522	

Schedule D (Fo	rm 990) 2012			Page 3
Part VII	Investments - Other Securities	. See Form 990, Part X, I	line 12.	
(8	Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financial				
	neld equity interests	······································		
(3) Other				
(A)				
(B)	**************************************			
(C)				
(D)				
(E)				
(F) (G)	***************************************			

(H)	***************************************			
(1)				
	b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII	Investments-Program Related		· · · · · · · · · · · · · · · · · · ·	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>		ļ <u>.</u>		
(8)				
(9)				
(10)	h) must sound From 2000 (Post V and 701 (and 12) h			
Part IX	b) must equal Form 990, Part X, col. (B) line 13.)	V 15 - 15		
Partix	Other Assets. See Form 990, Pa			(b) Book value
(4)	18	a) Description		(0) 00000
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				<u></u>
(7)				
(8) (9)				
(10)				
	mn (b) must equal Form 990, Part X, c	ol (R) line 15.)		
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes	V ,		
(2)		<u> </u>		
(3)	·····			
(4)				
(5)				
(6)				
(7)		<u> </u>		
(8)				
(9)				
(10)		 		
(11)				
	b) must equal Form 990, Part X, col (B) line 25.)			
2. FIN 48 (AS	C 740) Footnote. In Part XIII, provide the t	ext of the footpote to the are	anization's financial statements that	reports the organization's
liability for un	certain tax positions under FIN 48 (ASC 7	40). Check here if the text of	the footnote has been provided in D	reports the organization S
			and rooming rias been provided in F	
				Schedule D (Form 990) 2012

	e D (Form 990) 2012									Page 2
Part	III Organizations Maintaining	Colle	ctions of	Art, His	torical T	reasures	, or Ot	her Similar As	sets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply):	access	sion, and o	ther reco	rds, chec	k any of th	e follov	ving that are a s	ignificant u	use of its
а	Public exhibition			d	□ Loan	or exchang	je progi	ams		
b	☐ Scholarly research				_					
C	Preservation for future generations	s		•	~ ·		***********			
4	Provide a description of the organizar XIII.	tion's d	collections	and expla	ain how t	hey further	the org	anızation's exen	npt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather	solicit	or receive	donation	s of art,	historical ti	reasure:	s, or other simila	ır 🗀 Vos	· [] No
Dow	assets to be sold to raise lurids rating	mant	o be mamo	amed as	oan or the	organization	0715 00	rad "Var" to Ec	m gan F	Part IV
Part		angen	ients. Co	mpiete i	t the org	anization	answe	ed tes total	/(((33 0 , 1	art (V)
1a	line 9, or reported an amour	it on F	om 990,	Part X, II	ne ZI.		tions of	other assets no		
10	included on Form 990, Part X?	, costo	ouan or ou	ner intern	necially it			· · · · ·	ົ □ Yes	□ No
ь	If "Yes," explain the arrangement in P									
_		ar ran	and comp		monning a			T A	mount	
c	Beginning balance						10			
ď	Additions during the year				• • •		1d			
e	Distributions during the year						1e			
f	Ending balance						11			
2a	Did the organization include an amou								☐ Yes	No
	If "Yes," explain the arrangement in P		Officely has	all A, IIII	7211 ·	 n haa baan	provide	ad in Part XIII		
	V Endowment Funds. Compi	art Alli	Check ne	e ii the e	xpianauo	"Vee" to	Form 0	Dart IV line	10	
r ai	Endowment Funds. Compi		urrent year		or year	(c) Two year	rs hack	(d) Three years back	(e) Four y	ears back
	Manhaura atria di 1	(8)	Autour year	(0) =7	or year	(C) IWO you	Da Cack	(a) Thoo years out	1 1	
18	Beginning of year balance	<u> </u>		 						
	Contributions	<u> </u>		 		 			 	
c	Net investment earnings, gains, and			 					1	
_	losses	ļ		 						
d	Grants or scholarships	<u></u>								
е	Other expenditures for facilities and									
	programs ,							<u></u>		
f	Administrative expenses									
g	End of year balance	Ĺ		<u> </u>		<u> </u>	لسيبسي			
2	Provide the estimated percentage of t	the cur	rent year e	nd baland	e (line 1g	, column (a	a)) held	as:		
а	Board designated or quasi-endowme			_%						
b	Permanent endowment	%								
C	Temporarily restricted endowment ▶		%							
	The percentages in lines 2a, 2b, and 2									
3a	Are there endowment funds not in th	e poss	ession of t	he organi	zation th	at are held	and ad	ministered for th	ie 🗀	
	organization by:									es No
	(i) unrelated organizations								3a(1)	
	(ii) related organizations								3a(II)	
b	If "Yes" to 3a(ii), are the related organ	ization	s listed as	required (on Sched	ule R? .			3b	
4	Describe in Part XIII the Intended uses	s of the	organizatı	ion's ende	owment f	unds.				
Part	VI Land, Buildings, and Equip	oment	. See Fort	n 990, P	art X, lin	e 10.				
	Description of property		(a) Cost or o			or other basis other)		Accumulated epreciation	(d) Book	value
1a	Land				 					0
b	D. Ji-P.	. }		0	 	0	1000	0		0
c	Leasehold improvements	. }		0		0		0		<u>_</u>
ď	Equipment	. }		0	 		+	101,651		55,060
e	Other	. }		156,711		0		101,681		33,000
			und Earn S	0 0		0 (P) line 1/				
· viai.	Add lines 1a through 1e. (Column (d) r	nust ec	uai rom s	isu, Part .	A, COIUMI	ı (□), «ne 10	V(U).]	<u> ▶ </u>		55,060
								Scho	dule D (For	n 990) 2012

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.
 ► Attach to Form 990 or Form 990-EZ. OMB No. 1545-0047

2012
Open to Public Inspection

Department of the Treasury internal Revenue Service Name of the organization

Employer identification number

Citysc	ape Schools, Inc	75-2	733436		
				YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statem bylaws, other governing instrument, or in a resolution of its governing body?	ent in its charte	r, 1	1	
2	Does the organization include a statement of its racially nondiscriminatory policy toward strochures, catalogues, and other written communications with the public dealing with stuprograms, and scholarships?	students in all it dent admissions	s s, 2		
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or during the period of solicitation for students, or during the registration period if it has no soli in a way that makes the policy known to all parts of the general community it serves? describe. If "No," please explain. If you need more space, use Part II	citation program If "Yes," pleas	a n, e 3	*	
4	Does the organization maintain the following?				
a b	Records indicating the racial composition of the student body, faculty, and administrative statements and documenting that scholarships and other financial assistance are awardenondiscriminatory basis?	aff? d on a raciali	4a y 4b	1	
C	Copies of all catalogues, brochures, announcements, and other written communications to t with student admissions, programs, and scholarships?	he public dealin			
đ	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part I		4d	\	22
5	Does the organization discriminate by race in any way with respect to:		-		
а	Students' rights or privileges?		5a		<u>√</u>
b	Admissions policies? ,		5b		1
C	Employment of faculty or administrative staff?		5c		1
đ	Scholarships or other financial assistance?		5d		✓
е	Educational policies?		5e		/
f	Use of facilities?		5f		√
g	Athletic programs?		5 g		✓
ħ	Other extracurricular activities?		5h		
	Does the organization receive any financial ald or assistance from a governmental agency?. Has the organization's right to such aid ever been revoked or suspended?		6a 6b	- A 3	- V
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of section 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain				

FROM: TO:8779291812 07/14/2015 12:38:49 #194 P.022/025

Part XIII	Supplemental Information (continued)	
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Schedu	e D (Form 990) 2012		Page
	XI Reconciliation of Revenue per Audited Financial Statement	ents With Revenue per	Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
ď	Other (Describe in Part XIII )	2d	
ě			7 2e
3	Subtract line 2e from line 1		3
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			4c
5	Add lines 4a and 4b  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part		anta With Evnances D	<u></u>
			11
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		
2		2a	
a	Donated services and use of facilities	2b	
b	Prior year adjustments	<del></del>	
c		2c	
d	Other (Describe in Part XIII.)	2d	2e
e	Add lines 2a through 2d		3
3	Subtract line 2e from line 1	i . i	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
8	Investment expenses not included on Form 990, Part VIII, line 7b	48	-6.65
ь	Other (Describe in Part XIII.)	4b	
	Add lines 4s and 4b		4c 5
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	<del>6</del> 18.) . ,	
Part			
Comp	lete this part to 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	b. Also complete this part t	to provide any additional
ntom	ation.		
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Schedule D (Form 990) 2012

pr 990-EZ) (2012)  Page 2  Diemental Information. Complete this part to provide the explanations required by Part Lilines 3, 4d, 5h	art II
<b>Diemental Information.</b> Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, nd 7, as applicable. Also complete this part to provide any other additional information (see instructions).	
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SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

20**12** 

Department of the Treasury Internal Revenue Service Name of the organization 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.

Open to Public Inspection

Employer identification number

Cityscape Schools, Inc.	75-2733436
Form 990, Part III, Line 1, Description of Organization Mission:	
To become well prepared, life-long learners possessing the character, knowledge, and wisdom to succeed, lead, and contribute to their	
community and to their fellow man.	
Form 990, Part VI, Section B, Line 11: In addition to providing a copy of the return to the board members, one board member reviewed the	
return and discussed the data with the Superintendent and the Assistant Superintendent.	
Form 990, Part VI, Section C, Line 19: Available upon request.	
Form 990, Part IX, Line 5, Changes in Net Assets: -70,470 depreciation expense	
Form 990, Part IX, Line 5, Changes in Net Assets: -70,470 depreciation expense	
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat No 51056K

Schedule O (Form 990 or 990-EZ) (2012)