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Internal Revenue Service

## **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 2009 Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements 06/01/09 05/31/10 For the 2009 calendar year, or tax year beginning and ending Check if applicable C Name of organization Employer identification number use IRS Address change Logos Preparatory Academy label or Doing Business As 20-0864550 print or Name change type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See P O Box 16340 281-565-6467 Specific Termination City or town, state or country, and ZIP + 4 1,248,827 G Gross receipts \$ Instruc Sugar Land TX 77496 Amended return tions F Name and address of principal officer H(a) Is this a group return for Application pending X No affiliates? Yes H(b) Are all affiliates included? if "No," attach a list. (see instructions) **X** 501(c) 3) Tax-exempt status ◀ (insert no ) 4947(a)(1) or 527 Website: www.logosprep.org **H(c)** Group exemption number ▶ Type of organization X Corporation Trust Year of formation M State of legal domicile Pärt l 🎕 Summary Briefly describe the organization's mission or most significant activities Provide an alternative educational choice. SCANNED JAN 2 0 2011
Revenue | 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) Number of independent voting members of the governing body (Part VI, line 1b) 4 73 Total number of employees (Part V, line 2a) 5 50 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year Current Year Contributions and grants (Part VIII, line 1h) 256,209 1,248,344 Program service revenue (Part VIII, line 2g) 1.034 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 257,243 1,248,827 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column A) (lines 5-10) 288,453 776,859 IRS-OSC 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) JAN 1 0 2011 215,482 376,408 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f 1,153,267 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 503,935 -246,69295,560 19 Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 244,160 98,502 20 Total assets (Part X, line 16) 33,103 83,201 21 Total habilities (Part X, line 26) 399 160,959 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge at is true, correct, and complete Designation of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Preparer's identifying number Check if Preparer's /see instructions Paid P00957254 signature employed Preparer's Potter 2 Golden EIN > Firm's name (or yours **Use Only** 11111 Wilcrest Green Dr Ste 440 Phone if self-employed), ▶ 713-972-1304 Houston, TX 77042-6715

May the IRS discuss this return with the preparer shown above? (see instructions) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. DAA

Form **990** (2609)

	andly Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1		ĺ
2	complete Schedule A	_1_	X	
3	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
•	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	_		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	3		X
•	Schedule C, Part II	_	1	97
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	4		X
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_	j	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	5		
_	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"		Ì	ļ
	complete Schedule D, Part I	6	j	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	l	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	]	x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	1	1	
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	]	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	16	4	1.35 July 2
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			10 (10 mg)
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	. 53	\$ 2	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			<b>B</b>
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			3
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	•		M. 7. 2
•	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? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D, Parts XI, XII, and XIII	12	70	<u>3 €35°</u>
128	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	CALE.	Proper J	
127	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			<b>14</b> (4)
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	(181_3%)
14a		14a	-	X
b	The state of the s			
-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	}	X
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, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		- 1	ĺ
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			_
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		- {	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		}	7.5
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	990	(2000)
		rom	フフリ	(2009)

-om	1990 (2009) LOGOS Preparatory Academy 20-0864550		P	age <b>4</b>
På	Checklist of Required Schedules (continued)			
	<b>-</b>	( )	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	Į į		
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	} .		
22	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_ 22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	1	. 1	
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		1	37
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		X
67a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	) i		
	24b through 24d and complete Schedule K. If "No," go to line 25	340		X
b		24a 24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
•	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		1240		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	1.00		
	pnor year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or		1	
	990-EZ? If "Yes," complete Schedule L, Part I	25b	}	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	1200		
	disqualified person outstanding as of the end of the organization's tax year? 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,	1		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	1	1	
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		<b>X</b>	<b>4</b>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			6.1
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 of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,		1	
	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		1	
	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,	) )	' I	
	Part i	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1 1	1	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			77
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			v
	III, IV, and V, line 1	34		X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	3.5	ļ	X
	Schedule R, Part V, line 2	35		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	36		x
27	organization? If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1 1		i
	and that is treated as a partnership for lederal income tax purposes? If Tes, complete Schedule K,	37		X

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

19? Note. All Form 990 filers are required to complete Schedule O

Form **990** (2009)

'F.a	Try 31 Statements Regarding Other IRS Filings and Tax Compliance			<del></del> 1	Van	
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		}		Yes	No
	U.S. Information Returns Enter -0- if not applicable	1a	ļ		10mg	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b			Sec. 3	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortabl	le	8.6		
	gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1			188
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	73			Sec. 41.
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			8.3		1 1
	instructions)					1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by				震流
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthor	ıty	1 1	,	1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ancial		] ]		
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					<b>图</b>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign I	Bank				1
	and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a_		X
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarders of the control of	arding				l
_	Prohibited Tax Shelter Transaction?			5c		ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е			i	
_	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				}
7	gifts were not tax deductible?			6b	80	1-3" 1 18
a	Organizations that may receive deductible contributions under section 170(c).					w 10, 2
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g and services provided to the payor?	ooas		7-	Alexandra .	**** **
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7a 7b		├
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			10		<del> </del>
Ŭ	required to file Form 8282?	J		7c		
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1	1.6.7	200 1 T	325
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pr		al			<b>13.</b> 4
•	benefit contract?		<b>-</b> .	7e	eri ya	J. 1827.
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ict?		7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as				
	required?			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				2.4	13. 3
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				2.3	<b>2</b>
	organization, have excess business holdings at any time during the year?			8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.				200	18 3 L
а	Did the organization make any taxable distributions under section 4966?			9a		ļ
þ	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	200 S. 1. 40	1.28 -
10	Section 501(c)(7) organizations. Enter	1 .	ı			No. 1
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	<del> </del>			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>	&&		
11	Section 501(c)(12) organizations. Enter	المما	1			
a -	Gross income from members or shareholders	11a	<del> </del>			
þ	Gross income from other sources (Do not net amounts due or paid to other sources against	446	1			17 × 12
12~	amounts due or received from them)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b	<u> </u>	425	A. Brag.	P 100
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1	12a		A 1 8 8
D	ii res, emer the amount of tax-exempt interest received or accided during the year.	140	L	let matt	27-1976	1882 1 5

13303 Southwest Freeway

TX 77478

20-0864550 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body b Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? X 3 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following a The governing body? X 8a  $\bar{\mathbf{x}}$ b Each committee with authority to act on behalf of the governing body? 8ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Does the organization have local chapters, branches, or affiliates? X 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 13 14 Does 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 X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the

Sugar Land

organization. > Logos Preparatory Academy

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

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. Use Schedule J-2 if additional space is needed.
- 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. 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

<b>(A)</b> Name and Title	(B) Average	Posi	tton (	(chec	C) k all	that a	pply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Ron Clyde	5.00	x						1,074	0	
Kristin Cox	5.00	x						334	0	
Randy McIlvoy	5.00	x						0	0	
Pat Conner	5.00	x						0	0	
Rick Goolsby	5.00	x						0	0	
Julie Goolsby	5.00	x						0	0	
Aaron Weast	40.00				x			65,201	0	
		_		_	_					
		-		_	_	_				
		-	_	-	-				<del></del>	·····
	-	}_	<u> </u>	_	-	-				
		_	_	-	_					
		-	-	-	-					
		-	_	-	-					
		-	_	-	$\vdash$	$\vdash$				
	<del> </del>	-	_	-		-				

Total number of independent contractors (including but not limited to those listed above) who received

more than \$100,000 in compensation from the organization

DAA

Form **990** (2009)

	III Statement	of Revenu	65 m 25m 5	; w, :	(A)	(B) Related or	(C)	(D)
	k of the second				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ta b c	Federated campaign	ns 1	a		The state of the state of	market a district		
g b	Membership dues	_1	b	<del></del>				* 1/2 2 3
naran o	Fundraising events	1_1	lc				8. Mar. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	1. 3. 1000
<u>a</u> d	Related organization	ns 1	d					The Right of Car.
를 e	Government grants (contribu	utions) 1	e		Pan 发表现			Marie de Caración
and other simi	All other contributions, gifts,				1、水色色的 扩展。			
뒴	and similar amounts not incl	uded above	f		John St. British			
<b>2</b> 9	Noncash contributions include	ded in lines 1a-1f	\$			1000mm 1000 1000 1000 1000 1000 1000 10	<b>人</b>	
	Total. Add lines 1a-	-1f				的性。如是他屬	直接会 医吸引	
}				Busn. Code	1 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	副物质 物學家	<b>通過過過過</b>	
2a b c	Tuition Reve	enue			855,156	855,156		
b	Seed Income				154,322	154,322		
C	Fundraising	and Other			138,394	138,394		
d	Athletic Rev	venne		{	65,186	65,186		
e	Student Acti	ivities			18,023	18,023		
e f	All other program se	ervice revenu	е		17,263			
g	Total. Add lines 2a-			<u> </u>	1,248,344		3118 948 SIL	14174 K 11 7
3	Investment income	(including div	idends, inte	rest, and				
1	other similar amoun	ts)		•	483	}		483
4	Income from investr	ment of tax-ex	empt bond	proceeds >				
5	Royalties							
1		(ı) Real	(11)	Personal		· 2010年,他们的	(萬門龍)(13) 其上	
6a	Gross Rents							
Ь	Less rental exps					<b>自然的</b> 海海湖的		
C	Rental inc or (loss)							
d	Net rental income or	r (loss)		<b>•</b>	dien the till the had almost all the	The search of th	المناطقة المناطقة المناطقة المناطقة	Pharmachar Routh to the Country
7a	Gross amount from	(i) Secunties	(1	i) Other	· · · · · · · · · · · · · · · · · · ·	THE THE START		1.17.19 2 3 1 3 5 5 5 5
-	sales of assets other than inventory							
Ь	Less cost or other				各格 法海流域			
1	basis & sales exps				Sugar State of the Land			
C	Gain or (loss)				The state of the s		Missi design	
1	Net gain or (loss)			<b>•</b>	and the same and the same of the same of	I make taninan kandi si . make make misenah	American Committee of the Committee of t	Profesional comments with the first terms
i	Gross income from fund	draising events				次中心第一张 <b>以</b> 注	<b>发展 海绵 第</b> 46	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
[]	(not including \$	_			1			1 47 . 15 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .
	of contributions reporte	d on line 1c)			her with might	一种的人的		
b	See Part IV, line 18	•	a		The fact of the same of the	中国 (		
ь	Less direct expense	es	b			with the second		The second secon
) c	Net income or (loss)		sing events	<b>•</b>				1
	Gross income from gar						是的现在分类	W Strange
1	See Part IV, line 19	-	а	_			Anna Carlo	
Ь	Less. direct expense	es	Ь					S. Tallians
	Net income or (loss)			<b>•</b>				
	Gross sales of inver				I de things in	The State of the S	B.M. V. W. W.	4
	returns and allowand	-	a		The same of the same of	A MANY MANY	學學學學的	
Ь	Less. cost of goods		ь		1.2 4. 0.00	E to the second	4. 为来记到的	
	Net income or (loss)		of inventory	<b></b>		A Secretary appropriate to study because the second		
		ous Revenue		Busn. Code		HI WIN A	The said of the said of	·建建 生产等产。
11a					The same and the s			and the same of th
Ь								<u> </u>
C								
	All other revenue							<del></del>
d	VII Offici leacing							
1 -	Total. Add lines 11a	⊢11d		<b>•</b>		<b>是、智力的图形的物</b>	·李俊·罗斯·	mas 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				Carried to the Contraction
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,			THE STATE OF THE STATE OF	
	organizations, and individuals outside the	18			
	U.S. See Part IV. lines 15 and 16				
4	Benefits paid to or for members				A Comment of the Comm
5	Compensation of current officers, directors,			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Beende Charles the due to a fire of Can
J	trustees, and key employees				1
6	Compensation not included above, to disqualified	<del> </del>	<del></del>		
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
-		719,606	404 613	224 002	<del></del>
7	Other salaries and wages	719,606	494,613	224,993	
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				<u> </u>
9	Other employee benefits				
10	Payroll taxes	57,253	39,352	17,901	
11	Fees for services (non-employees)				
а	Management				
b	Legai	<del> </del>			
C	Accounting				
đ	Lobbying				
е	Professional fundraising services See Part IV, line 17	·			
f	Investment management fees				
9	Other		<u> </u>		
12	Advertising and promotion		·		
13	Office expenses	67,281		67,281	
14	Information technology				
15	Royalties				
16	Occupancy	87,421	87,421		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	17,942	17,942		
23	Insurance				
		All the last trees to	以"是""我""概念"的 <i>有</i> 管		
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				March Straight Co.
	and labeled miscellaneous may not exceed	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
	5% of total expenses shown on line 25 below )			the Maryana Maryana	
а	Athletic Expenses	82,537	82,537		
b	Academic Expenses	45,347	45,347		
C	Insurance Expenses	32,907	32,907		
d	Student Activities	17,574	17,574		
е	Student Fundraisers	17,088			
f	All other expenses	8,311			
25	Total functional expenses. Add lines 1 through 24f	1,153,267	843,092	310,175	
26	Joint costs. Check here ▶ ☐ if following				
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				<u></u>
DAA					Form <b>990</b> (2009)

	rt X	Balance Sheet			(A)		(B)
		<del></del>			Beginning of year	<u> </u>	End of year
- 1	1	Cash—non-interest bearing			83,627	1	74,948
Ì	2	Savings and temporary cash investments			 	2	139,255
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
		Receivables from current and former officers, directors, t					
ı		employees, and highest compensated employees Comp	plete Part II of			14.00 mm	
ı		Schedule L			3 9 7 2 46 2 7 40 8 2 40 4 2	5	San Care Minore A. Vo. 3 A.
- 1		Receivables from other disqualified persons (as defined				200 X 200	
- 1		4958(f)(1)) and persons described in section 4958(c)(3)(	B) Complete		civia de divididi di si si	Mil.	
92		Part II of Schedule L				6_	ļ
Assets	7	Notes and loans receivable, net				7	ļ
S		Inventories for sale or use				8_	
	9	Prepaid expenses and deferred charges	1 1		\$20 P# 78 19 2 P 2 P 2 B 12	9	5,883
- }	10a	Land, buildings, and equipment cost or	1 1	60 400		50 m 35	
		other basis Complete Part VI of Schedule D	10a	60,103	the description with the contraction between	نذائلنا	
- 1		Less. accumulated depreciation	10b	36,029	14,875		24,074
1	11	Investments—publicly traded securities			<del></del>	11	<del></del>
Ì	12	Investments—other securities See Part IV, line 11				12	<u></u>
l	13	Investments—program-related See Part IV, line 11			<u> </u>	13	<del> </del>
l	14	Intangible assets				14	<del> </del>
l	15	Other assets See Part IV, line 11				15	
_	<u>16</u>	Total assets. Add lines 1 through 15 (must equal line 34	4)		98,502	16	244,160
	17	Accounts payable and accrued expenses				17	<u> </u>
	18	Grants payable				18	
- {	19	Deferred revenue			ļ	19	
	20	Tax-exempt bond liabilities			ļ	20	<del> </del>
Liabilities	21	Escrow or custodial account liability Complete Part IV of			-77 m Vo. V. N 25,000 VO. V 2 4	21	AL. On Erro V
#	22	Payables to current and former officers, directors, truste	-				
a		employees, highest compensated employees, and disqu	ualified			1402	
<b>=</b>		persons Complete Part II of Schedule L			<del></del>	22	<del></del>
l	23	Secured mortgages and notes payable to unrelated third			ļ	23	<del> </del>
ł	24	Unsecured notes and loans payable to unrelated third pa	arties		ļ	24	
j	25	Other liabilities Complete Part X of Schedule D			33,103		83,201
-	26	Total liabilities. Add lines 17 through 25			33,103	26	83,201
8		Organizations that follow SFAS 117, check here ▶ 🔀	and		<ul><li>1 次数 3.25 元 25 元 26 至 25 至 25 至 25 元</li></ul>		
Ĕ		complete lines 27 through 29, and lines 33 and 34.				šķi	
<u>ē</u>	27	Unrestricted net assets			65,399		160,959
	28	Temporarily restricted net assets			<del></del>	28	<del> </del>
Ĕ	29	Permanently restricted net assets	1 - 1		A CONTRACTOR OF THE PARTY OF TH	29	E Mary Mary Co. A. Alexand
Ē.		Organizations that do not follow SFAS 117, check her	re 🕨 💹			6.	
Net Assets or Fund Balances		and complete lines 30 through 34.				المتكفة	Teresere de la company de la c
\$	30	Capital stock or trust principal, or current funds				30	<del> </del>
38(	31	Paid-in or capital surplus, or land, building, or equipmen				31	
Ž	32	Retained earnings, endowment, accumulated income, o	or other tunds		65,399	32	160,959
fet	33	Total net assets or fund balances			98,502		
_	34	Total liabilities and net assets/fund balances			70,502	34	244,160 Form 990 (2009)

Form 990 (2009)

3b

Form **990** (2009)

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Operator Public

| Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

				Prepar										4550		
.P	art I	Reas	on for Pub	olic Charity	Status	(All organiz	ations	must c	omplet	e this	part.) (	See in	struct	ions.		
he	organ	ization is not	a private four	ndation becaus	eitis (F	or lines 1 throu	gh 11, c	heck only	one box	.)						
1		A church, cor	nvention of ch	nurches, or ass	ociation o	of churches des	scribed ii	n section	170(b)(1	)(A)(i).						
2	X	A school des	cribed in sec	tion 170(b)(1)(	<b>A)(ii)</b> . (At	tach Schedule	E)									
3				e hospital service				tion 170(	(b)(1)(A)(i	iii).						
4				zation operated							)(1)(A)(ii	i). Ente	r the ho	spital's name	<b>3</b> ,	
		city, and state														
5		An organizati	on operated t	for the benefit o	of a collec	ge or university	owned o	or operate	ed by a g	ovemme	ental uni	t descri	bed ın			
		section 170(	b)(1)(A)(iv). (	Complete Part	II)											
6		A federal, sta	ite, or local go	overnment or g	overnme	ntal unit describ	bed in se	ection 17	0(b)(1)(A	)(v).						
7		An organizati	on that norm	ally receives a	substantı	al part of its su	pport fro	m a gove	ernmenta	unit or t	from the	genera	ıl public			
	ar .	described in a	section 170(	b)(1)(A)(vi). (Co	omplete F	Part II)										
8	ا <u>ل</u> ــي	A community	trust describ	ed in section 1	170(b)(1)(	(A)(vi). (Comple	ete Part	ll )								
9		An organizati	on that norm	ally receives (1	1) more tl	han 33 1/3 % o	f its supp	port from	contribut	ions, me	embersh	ıp fees,	and gro	oss		
		receipts from	activities rela	ated to its exem	npt functi	ons—subject to	certain	exceptio	ns, and (	2) no mo	re than	33 1/3	% of its			
				ment income ar							c) from b	usines	ses			
				on after June 3												
10				and operated												
11				and operated												
				publicly support									section	ı		
		1		that describes t						nes 11e						
		a   Type		Type II	C	Type III-F				ď		e III–Ot				
е				rtify that the org												
				ition managers	and othe	er than one or m	nore pub	licly supp	orted org	janizatio	ns desc	nbed in	section	1		
_		509(a)(1) or s		,		e from the IDC	that it	a Tima !	Town II	T						
f		organization,		d a written dete	mination	i irom the IRS	that it is	a type i,	rype II,	or type	ш ѕиррс	orting				·
_		•		es the organiza	tion acce	ntod any aith or	· oontahi	itian fran								4 Li
g		following per		is the Organiza	uon acce	pled any gill of	CONTRIBE	IIION NON	i any oi u	ie						
		• .		or indirectly o	ontrole di	ther alone or to	acthor w	wth name	nno docor	shod in (	\				Yes	1 1/2
				or indirectly conversing body or			-	with beist	ins desci	ineu iii (	")			44=(1)	163	No
				person describ	-	-	ation :							11g(i)	<del> </del>	├
				ty of a person o			nve?							11g(ii) 11g(iii		╁
h				rmation about t										1.18(1.1	4	—
(i)	Name	of supported		) EIN		Type of organizat		(iv) is the o	organization	(v) Did v	ou notify	(vi)	s the	(vii) Am	ount of	
		anization	<b>\</b> '''	,	(de	scribed on lines 1	ı <b>–</b> 9		sted in your	the organ	nization in	organizat	on in col		port	
					1	oove or IRC sections		governing	document?		of your port?		zed in the S?			
					'	oc mandonona	"	Yes	No	Yes	No	Yes	No			
					<u> </u>											
			}	-					[		]			ı		
			<u> </u>								<u> </u>	<u> </u>		,		
_					1			{	<b>!</b>		1	1				
			<u> </u>						ļ	<u> </u>	ļ	<del> </del>				
						- ·- <del></del>									-	
_				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	A Corte		化學特別	A.			644	14.46				
ot	al	_	100 (100 (100 (100 (100 (100 (100 (100						7.14.							

	edule A (Form 990 or 990-EZ) 2009 Log art II Support Schedule for O	os Prepar	catory Aca	ections 170/h	20 \(1\(\Delta\(\iv\) and	-0864550	Page 2
	(Complete only if you che	ecked the box	on line 5 7 o	· 8 of Part I)	)( I)(A)(IV) allu	170(D)(1)(A)(VI)	
èec	tion A. Public Support	JONES IN DOX	<u>0.7 m.0 0, 7, 0.</u>	O OIT GITT.			<del> </del>
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						~ <del></del>
3	The value of services or facilities furnished by a governmental unit to the organization without charge		i				
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		4 1 1 1 1 1 1 1 1		\$121 A12 # 124	P T T T	
ec	tion B. Total Support						······································
Ca	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
0	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
1	Total support. Add lines 7 through 10				1.15亿分单级		
2	Gross receipts from related activities, etc	•		_		12	
3	First five years. If the Form 990 is for the		t, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)	
Sec	organization, check this box and stop her ition C. Computation of Public St		tage	<del></del>	<del> </del>		
4	Public support percentage for 2009 (line 6			in (ft)	<del></del>	14	
<del>-</del> 5	Public support percentage from 2008 Sch	• • •	,	··· (*//		15	
6a	33 1/3 % support test—2009. If the organ	•		13, and line 14 is	33 1/3 % or more,	حلحنجا	
	and stop here. The organization qualifies	as a publicly supp	orted organization				▶ 📃
h	33 1/3 % support test2008 If the organ	uzation did not obo	ck a hov on line 1	or 16a and line	15 16 33 1/2 % ~~~	nore check this	

box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

18

Section A. Public Support

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Cal	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Totai
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						
С	Add lines 7a and 7b						<del></del>
8	Public support (Subtract line 7c from line 6)						<del></del>
Sec	tion B. Total Support				The state of the s	THE PARTY NAMED IN THE PARTY NAMED IN	
Ca	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned 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	е		urth, or fifth tax yea	ar as a section 501	(c)(3)	<b>.</b>
Sec	tion C. Computation of Public St				<del></del>	<del></del>	
15	Public support percentage for 2009 (line 8	• •	•	ın (f))		15	%
16	Public support percentage from 2008 Sch				<del></del>	16	%
	tion D. Computation of Investme					47	
17	Investment income percentage for 2009 (I			, column (t))		17	<u>%</u> %
18	Investment income percentage from 2008 33 1/3 % support tests—2009. If the organization			a 14 and line 15 in	more than 22 472		%
19a	17 is not more than 33 1/3 %, check this b						<b>▶</b> Ī
b	33 1/3 % support tests—2008. If the orga	=	·=	•			·
-	line 18 is not more than 33 1/3 %, check to						<b>&gt;</b>
<u>20</u>	Private foundation. If the organization did	· ·	=	•		=	<b>_</b>

Schedule A (Form 990 or 990-EZ) 2009 Logos Preparatory Academy 20-0864550

Supplemental Information. Complete this part to provide the explanations required by Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2009 Open to Public 1

ime of the o	organization		Employer identification number
Logos	Preparatory Academy		20-0864550
art I	Organizations Maintaining Donor Advised Futhe organization answered "Yes" to Form 990,	unds or Other Similar Funds o Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
Total n	number at end of year		
Aggreg	gate contributions to (during year)		
Aggreg	gate grants from (during year)	<u> </u>	
Aggreg	gate value at end of year		<u>_l</u>
	e organization inform all donors and donor advisors in writing the		<b></b>
	are the organization's property, subject to the organization's exc	_	Yes N
	e organization inform all grantees, donors, and donor advisors in	- ·	
	only for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other	<del>-</del>
	e conferring impermissible private benefit?		Yes N
art.li.s	Conservation Easements. Complete if the org		orm 990, Part IV, line 7.
I1	se(s) of conservation easements held by the organization (chec	<u></u>	
<del></del> ;	eservation of land for public use (e.g., recreation or pleasure) otection of natural habitat	Preservation of an historically	•
-	eservation of open space	Preservation of certified histor	nc structure
	· · · · · · · · · · · · · · · · · · ·		
	ete lines 2a through 2d if the organization held a qualified consi tent on the last day of the tax year	ervation contribution in the form of a co	nservation
0000711	on the last day of the tax year		Held at the End of the Tax Ye
a Totaln	number of conservation easements		
	acreage restricted by conservation easements		2a 2b
	er of conservation easements on a certified historic structure in	cluded in (a)	2c 2c
	er of conservation easements included in (c) acquired after 8/17	` '	2d
	er of conservation easements modified, transferred, released, e		\ <del></del>
	rable year ▶	manageronica, or torrimated by the organi	matter daming
	er of states where property subject to conservation easement is	located >	
	he organization have a written policy regarding the periodic mo		
	ons, and enforcement of the conservation easements it holds?		Yes N
	nd volunteer hours devoted to monitoring, inspecting, and enfor	rcing conservation easements during th	— \—
<b>&gt;</b>			•
	nt of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year	ar
<b>▶</b> \$_			
	each conservation easement reported on line 2(d) above satisfy	the requirements of section	Yes N
	(4)(B)(i) and section 170(h)(4)(B)(ii)?	mente in its revenue and evacance states	
	XIV, describe how the organization reports conservation easer se sheet, and include, if applicable, the text of the footnote to the	•	
	panization's accounting for conservation easements	c organization a mandal statements the	ar describes
art III:	Organizations Maintaining Collections of Art	Historical Treasures, or Other	er Similar Assets.
	Complete if the organization answered "Yes" to organization elected, as permitted under SFAS 116, not to report		sheet works of
	storical treasures, or other similar assets held for public exhibition		
	e, in Part XIV, the text of the footnote to its financial statements		•
	organization elected, as permitted under SFAS 116, to report in		et works of art,
	cal treasures, or other similar assets held for public exhibition, e		
	e the following amounts relating to these items		
•	evenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
(ii) As	sets included in Form 990, Part X		▶ \$ ▶ \$
If the o	organization received or held works of art, historical treasures, o	or other similar assets for financial gain,	
followir	ng amounts required to be reported under SFAS 116 relating to	these items.	
101101111	ues included in Form 990, Part VIII, line 1		▶ \$
	acs modece in rouni coo, rait viii, inic r		
Revenu	included in Form 990, Part X		<b>▶</b> \$

	dule D (Form 990) 2009 Logos Prep				<u>0864550</u>	Page <b>2</b>
. Pa	rt.III Organizations Maintaining (	Collections of Art	, Historical Trea	sures, or Oth	er Similar As	ssets (continued)
3	Using the organization's acquisition, accession collection items (check all that apply):	, and other records, ch	eck any of the follow	ing that are a sign	uficant use of its	
а	Public exhibition	d   Loar	or exchange progra	ms		
b	Scholarly research	e Othe				
С	Preservation for future generations		" <b>– – –</b> -			-
4	Provide a description of the organization's colle	ections and explain how	v they further the org	anızatıon's exemp	ot purpose in	
5	During the year, did the organization solicit or massets to be sold to raise funds rather than to be	eceive donations of an	t, historical treasures	or other similar		
Da	rt IV Escrow and Custodial Arrar				ad "Vaa" ta E	Yes No
. [. 9					ed tes lor	om 990, Pan
	IV, line 9, or reported an amo					<del></del>
та	Is the organization an agent, trustee, custodian	or other intermediary	for contributions or o	ther assets not		r-7
	included on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIV as	nd complete the follow	ng table			
					11	Amount
C	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				11	
2a	Did the organization include an amount on For	m 990 Part X line 212	•		لمحتنجا	Yes No
	If "Yes," explain the arrangement in Part XIV					Li tes Li No
	rt V Endowment Funds. Comple	te if organization	answered "Yes"	to Form 990	Part IV line	10
712	Endowment unds. Comple	(a) Current year	(b) Prior year	(c) Two years ba		
4	Paginning of ware belance	(a) ourient year	(B) Filol year	LANGE STATE OF THE	Ser Control St. 7	THE CALL SECTION AS A STATE OF THE PARTY OF
1a				「ACME、 生成し、からでは で記述する パライヤビ はまた	Marie Strategic Control	
D	Contributions		<del></del>	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
C	Net investment earnings, gains,					
	and iosses		<del></del>	KAN TONING		
d	Grants or scholarships		<del></del>			PERCHASISTAL STATE
e	Other expenditures for facilities					
	and programs			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
f	Administrative expenses					
g	End of year balance			<b>第4章章</b>	[19] 基本设计设计	
2	Provide the estimated percentage of the year e	end balance held as				
а	Board designated or quasi-endowment ▶	%				
h	Permanent endowment ▶ %					
_	Term endowment ▶ %					
32	Are there endowment funds not in the possess	ion of the omenization	that are held and adi	ministered for the		
Ja	•	ion of the organization	that are hero and ad	ministered for the		Yes No
	organization by.					
	(i) unrelated organizations					3a(i)
	(ii) related organizations		==			3a(ii)
þ	If "Yes" to 3a(ii), are the related organizations I	·=				3b
4	Describe in Part XIV the intended uses of the c				<del></del>	
ि Pà	rt VI Investments—Land, Buildin	igs, and Equipme	ent. See Form 99	90, Part X, line	e 10.	
	Description of investment	(a) Cost or other basis	1 ' '		) Accumulated	(d) Book value
		(investment)	basis (other	· ·	depreciation	
1a	Land			1944 5		· · · · · · · · · · · · · · · · · · ·
	Buildings					
	Leasehold improvements					
	Equipment					
	Other		60	,103	36,02	9 24,074
	I. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X. o			)	24,074

	Investments—Other Securities. See For	rm 990, Part X. line 12.	20-0864550 Page
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
Financial denv			
_	equity interests		
Other			
			<u> </u>
		<del> </del>	
		- <del>-  </del>	<del>-</del>
			+
		<del> </del>	<del></del>
		<del> </del>	+
		<del> </del>	<del>                                     </del>
Total. (Colum	n (b) must equal Form 990, Part X, coi (B) line 12.)	<b>•</b>	
Part VIII	Investments—Program Related. See Fo		
, - 411 5,111	(a) Description of investment type	(b) Book value	(c) Method of valuation
	,, ,	(-)	Cost or end-of-year market value
		<del></del>	
	<del></del>	<del></del>	<del></del>
			and the set Drawitte Service and the service a
	n (b) must equal Form 990, Part X, col (B) line 13)	<b>)</b>	
Total. (Colum	Other Assets. See Form 990, Part X, line	e 15.	
		e 15.	(b) Book value
	Other Assets. See Form 990, Part X, line	e 15.	
	Other Assets. See Form 990, Part X, line	e 15.	
	Other Assets. See Form 990, Part X, line	e 15.	
	Other Assets. See Form 990, Part X, line	e 15.	
	Other Assets. See Form 990, Part X, line	e 15.	
	Other Assets. See Form 990, Part X, line	e 15.	
	Other Assets. See Form 990, Part X, line	e 15.	
	Other Assets. See Form 990, Part X, line	e 15.	
SPart IX	Other Assets. See Form 990, Part X, line (a) Descrip	e 15.	
Part IX	Other Assets. See Form 990, Part X, line (a) Descrip  In (b) must equal Form 990, Part X, col (B) line 15)	e 15. Auton	
SPart IX	Other Assets. See Form 990, Part X, line (a) Descrip  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,	e 15. Subon	
Part IX	other Assets. See Form 990, Part X, line (a) Descrip  in (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, (a) Description of liability	e 15. Auton	
Total. (Colum Part X	Other Assets. See Form 990, Part X, line (a) Description (b) must equal Form 990, Part X, col (B) line 15 ) Other Liabilities. See Form 990, Part X, (a) Description of liability ne taxes	line 25.	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Colum Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25.	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Column Part X	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value
Total. (Column Part X 1 Federal Income Capital	other Assets. See Form 990, Part X, line  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X,  (a) Description of liability  ne taxes  ad Payroll/Liabilities	line 25. (b) Amount	(b) Book value

	dule D (Form 990) 2009 Logos Preparatory Academy	20-0864		Page 4
, Pa	Reconciliation of Change in Net Assets from Form 990 to	<b>Audited Financial Stat</b>	ements	3
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		_ 5	
6	Investment expenses		6	
7	Pnor period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	
<u> iPa</u>	নির্মার্কী Reconciliation of Revenue per Audited Financial Stateme	nts 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			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recovenes of pnor year grants	2c	2-5	
đ	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	,	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	if XIII. Reconciliation of Expenses per Audited Financial Statement	ents With Expenses pe	r Retur	חי
Pa 1	Total expenses and losses per audited financial Statements	ents With Expenses pe	r Retur	'n
		ents With Expenses pe		'n
1	Total expenses and losses per audited financial statements	ents With Expenses pe		n
1 2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25	1		n
1 2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2a		'n
1 2 a b	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments	2a 2b		'n
1 2 a b	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses	2a   2b   2c	1	'n
1 2 a b c	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV)	2a   2b   2c	2e 3	'n
1 2 a b c d	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV ) Add lines 2a through 2d	2a   2b   2c	2e 3	'n
1 2 a b c d e 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1	2a   2b   2c	1 2e 3	
1 2 a b c d e 3 4 a	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a   2b   2c   2d	2e 3	
1 2 a b c d e 3 4 a b	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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	2a   2b   2c   2d	1 2e 3	
1 2 a b c d e 3 4 a b c	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	2a   2b   2c   2d	2e 3	
1 2 a b c d e 3 4 a b c	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	2a   2b   2c   2d   4a   4b	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18)  Plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 11, lines 12, and 13, and 14, lines 13, 5, and 14, lines 14, lines 15, and 15, and 16, lines 16, and 16, lines 16, and 16, lines 17, and 18, lines 18, and 18, lines 18, and 19,	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18)  Plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 11, lines 12, and 13, and 14, lines 13, 5, and 14, lines 14, lines 15, and 15, and 16, lines 16, and 16, lines 16, and 16, lines 17, and 18, lines 18, and 18, lines 18, and 19,	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	
1 2 a b c d e 3 4 a b c 5 Pa	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV )  Add lines 2a through 2d  Subtract line 2e from line 1  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  Other (Describe in Part XIV )  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  IN XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	2a   2b   2c   2d   4a   4b   4b   4b   4c   4c   4c   4c   4c	2e 3 4c 5	

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#### SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### 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-FZ

OMB No 1545-0047 Open to Public

Name of the organization

Employer identification number 20-0864550 Logos Preparatory Academy YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter bylaws, other governing instrument, or in a resolution of its governing body? 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? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes." please describe If "No," please explain If you need more space, use Schedule O (Form 990) The policy was published in the newspaper, website, magazines, bochures and flyers. The school now has a website and the policy is displayed there. Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? X **4a** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? X 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions? 4d If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990) Does the organization discriminate by race in any way with respect to Students' rights or privileges? 5a Admissions policies? 5b X Employment of faculty or administrative staff? 5c X Scholarships or other financial assistance? 5d Educational policies? 5e Use of facilities? 5f X Athletic programs? Other extracurncular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990) Does the organization receive any financial aid or assistance from a governmental agency? 6a 6b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 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 Schedule O.

(Form 990)

### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public

Name of the organization

Logos Preparatory Academy

Employer identification number 20-0864550

Form 990, Part III, Line 4d - All Other Achievements

Provided educational classroom instructions primarily for
home school students. Students took classes from
qualified teachers in courses that are difficult for
parents to teach at home.

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Julie Goolsby Rick Goolsby

Spouse

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

## Form 4562

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

See separate instructions.

Attach to your tax return

23

OMB No 1545-0172

2009
Attachment Sequence No 67

Name(s) shown on return Identifying number Logos Preparatory Academy 20-0864550 Business or activity to which this form relates Indirect Depreciation Partil **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount. See the instructions for a higher limit for certain businesses. 250,000 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 800,000 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property Enter the amount from line 29 7 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 11,015 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS) 16 1,495 MACRS Depreciation (Do not include listed property.) (See instructions.) Partelli Section A 3,021 17 MACRS deductions for assets placed in service in tax years beginning before 2009 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery placed in (business/investment use (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction penod only-see instructions) service 19a 3-year property 5,500 5.0 HY 200DB 100 h 5-year property 1,900 7.0 200DB HY 7-year property d 10-year property 3,615 15.0 HY S/L 120 15-year property 20-year property S/L 25-year property 25 yrs S/L MM Residential rental 27 5 yrs property MM 27 5 yrs. S/L MM S/L 39 yrs Nonresidential real property MM Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs 12-year MM S/L 40-year 40 vrs PartiV Summary (See instructions.) 920 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 17,942 and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the

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Pa	art/V <sub>s</sub>	Listed Property use Note: For any ve	d for entertal	inment, re	creation of the state	on, or	amuse	ement.	) aductina	loseo e				•	ers, an	đ	
		24b, columns (a	) through (c) of S	Section A, al	of Sect	<u>on B, a</u>	nd Sect	ion C ıf a	applicable	9	•	•	-	•			
			-Depreciation														
<u>24a</u>		evidence to supp	ort the business/inv	estment use	claimed?	X	Yes	No	24b	If "Yes,	is the	videno	e wntten	?	X Yes	No	
(list	(a) of property vehicles first)	(b) Date placed in service	(d Cost or bas	other		(e) is for dep siness/inv use onl	estment	(f) Recover period	- 1	(g) Method/ onvention		(h) Deprecia deduction		Elected	i) I section cost		
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27	Property	used 50% or less	ın a qualified bu	isiness use													
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<u> 29</u>	Add am	ounts in column (i)	, line 26 Enter h	ere and on	iine 7, pa	ge 1								29	<u> </u>		
_					tion B—												
Com	plete this	section for vehicle es, first answer the qu	es used by a sole	e proprietor,	partner,	or other	"more t	than 5%	owner,"	or relate	ed perso	n. If you	ı provide	d vehicle	s		
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34		vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
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35		vehicle used prim						1									
	more tha	an 5% owner or re	lated person?		1			l			]		1	<u> </u>			
36	Is anoth	er vehicle available	e for personal us	e?													
			Section C-Qu		Employe	rs Who	Provid	e Vehicl	es for U	se by T	heir Em	ployees	 S				
Answ	ver these	questions to deter	mine if you mee	t an exception	on to con	pleting	Section	B for ve	hicles us	sed by e	employe	es who	are not				
more	than 5%	owners or related	persons (see in:	structions)													
37	Do you	maintain a written	policy statement	that prohibi	ts all per	sonal u	se of ve	hicles, in	icluding (	commu	ling, by				Yes	No	
	•	ployees?													<b>}</b>	X	
38	•	maintain a written			•				-	_							
	•	es? See the instru		-			s, direct	ors, or 1	% or mo	re owne	ers				X	X	
39	•	treat all use of veh						·		.a.a.a.b.					<u> </u>	<b>-</b>	
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42	Amortiz	ation of costs that	begins during yo	ur 2009 tax	year (se	ınstru	ctions)										
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43	Amortiza	ation of costs that	began before yo	ur 2009 tax	year								43		<u></u> _		
44	Total. A	dd amounts in coli	ımn (f) See the	instructions	for wher	e to rep	ort						44				
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