

Department of the Treasury Internal Revenue Service

ENVELOPE JUN 1 &

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	FOI DI	e 2015 calendar year, or tax year beginning OOD 1, 2010 and	ending a	JOH JI, ZUIC			
В	Check II epplicab	C Name of organization		D Employer identif	ication number		
	Addre	WI VANGUARD COLLEGE PREPARATORI SCHOOL					
Ļ	Name	Doing business as		74-1815978			
	Initial roturr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numb	er		
	Final	, 2517 MOUNT CARMEL		(254	1)772-8111		
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	· · · ·	G Gross receipts \$	513,843.		
Γ	Amer	ded rata CO my 76710		H(a) is this a group			
Ē	MagA [·	for subordinate			
_	ltion pend	SAME AS C ABOVE		H(b) Are all subordinates	···		
-			7 / / / sá		a list. (see instructions)		
		empt status: X 501(c)(3)	or [52_	⊣	,		
				H(c) Group exempti	M State of legal domicile: TX		
	art I	organization: X Corporation Trust Association Other ► Summary	I L Yea	LOLIOLWING TAIS	M State of legal domicile: 1A		
		Briefly describe the organization's mission or most significant activities: VANG	ממגזו	COLLEGE DDE	ναρπασκα		
e	1		CHOOL	MUAM DOUDAL	TRAIONI		
Governance	١.						
Ę	2	Check this box I if the organization discontinued its operations or dispos	sea ot moi		1 1		
ő	3	Number of voting members of the governing body (Part VI, line 1a)		3	- 16		
৺	4	Number of independent voting members of the governing body (Part VI, line 1b)	•	4			
es.	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)		5	 		
Activities &	6	Total number of volunteers (estimate if necessary)		. 6			
Ā		Total unrelated business revenue from Part VIII, column (C), line 12					
	Ь	Net unrelated business taxable income from Form 990-T, line 34			0.		
		L. CECETTE	_	Prior Year	Current Year		
Revenue	8	Contributions and grants (Part VIII, line 1h)	تر : : : (ل	47,399			
	9	Program service revenue (Part VIII, Ilne 2g)	<u> </u>	3,232,952			
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,838			
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	/ŏ/[227,293			
	12	Total revenue - add lines 8 through 11 (must equal Part-VIII; column (A), tine_12)	<i>[છ]</i> [3,513,482	513,843.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7 <u>%</u> /	1,054,740	209,689.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)	."/	0.	0.		
g	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	····	1,414,051	125,529.		
Expenses	16a	Professional fundralsing fees (Part IX, column (A), line 11e)	· ·	0.	0.		
ē,	1	Total fundraising expenses (Part IX, column (D), line 25)	0.				
ă	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	1,151,367	87,327.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	· ·	3,620,158			
	19	Revenue less expenses. Subtract line 18 from line 12	· · ·	<106,676			
P.S.	_	Toronto oco ospanose custas ino to heli ino iz		eginning of Current Year			
als	20	Total assets (Part X, line 16)	F	3,945,491			
ASS	21	Total liabilities (Part X, line 26)	⊢	2,135,447			
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20	···	1,810,044			
		Signature Block		1/010/011	1 1755175551		
		lities of perjury, I declare that I have examined this return, includin g as companying schedule	s and states	ments and to the hest of r	ny knowledge and helief it is		
		ct, and complete. Declaration of preparer (other than officet) is based on all information of wi			ny knomeage and ochor, it is		
	, 00110	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	mon propart	a nas any knowledge.	12/10		
Sig	n	Signature of officer		Date	15/10		
He		BILL BORG, HEAD OF SCHOOL					
	·	Type or print name and title					
_		Print/Type preparer's name Rreparer's signature .		Date Check	TT PTIN		
Pal	đ	SHARON M. HERWALD, CPA	1000	8/15/15/1	D00070064		
	parer	Firm's name PATTILLO, BROWN & HILL, I.L.P.	NINA	Firm's EIN	74-1130599		
	Only	Firm's address P. O. BOX 20725		THIIIS LIN	. 1 1130333		
	,	WACO, TX 76702-0725		Phone no. (2	254) 772-4901		
140	ı the II	RS discuss this return with the preparer shown above? (see instructions)		Ti none no. (157		
	01 12-1		ODS.		Yes No Form 990 (2015)		
			~		(0.111 000 (2010)		

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

-		
Form	1 990 (2015) VANGUARD COLLEGE PREPARATORY SCHOOL	74-1815978 Page 2
	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	
	VANGUARD COLLEGE PREPARATORY SCHOOL IS A NON-PAROCHIAL,	
	SCHOOL THAT PREPARES STUDENTS FOR ACADEMIC SUCCESS AND	
		SED ON THE CORE
		UNITY OF
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	ि दिर
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, and
	revenue, if any, for each program service reported (Code) (Expenses \$ 385,557 • including grants of \$ 209,689 •) (Reven	ue \$ 510,484.)
4a		UGH 12
	OFERATION OF COURSE PREPATORY SCHOOL FOR GRADES / TIMO	
		,
4b	(Code) (Expenses \$) (Reven	nue \$)
		<u> </u>
4c	(Code) (Expenses \$ including grants of \$) (Rever	nue \$)
	//cost//cost	<u> </u>

532002 12-16-15

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

4e Total program service expenses

) (Revenue \$

including grants of \$ 385,557.



Form 990 (2015) VANGUARD COLLEGE PREPARATORY SCHOOL

74-1815978

Page 3

Pa	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
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		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, 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?	1		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			٠,,
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X		Ŋ.	7
	as applicable	1	ĺ.	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	<u>X</u> _	├
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		-^-
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	أسسأ		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	44.1		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	<u> </u>
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	ļ
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	 	 	
124	Schedule D, Parts XI and XII	12a	x	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
J	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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	1	ľ	ſ
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	L	X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	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	L_	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1 -	1
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	[[1

complete Schedule G, Part III

Form 990 (2015) VANGUARD COLLEGE PREPARATORY SCHOOL
Part IV Checklist of Required Schedules (continued)

		- 1	Yes	No
^	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	162	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	l
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			1
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			-
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	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		1	1
	Schedule L, Part I	25b	L_	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			1
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			1
	of any of these persons? 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, Part IV			X
	instructions for applicable filing thresholds, conditions, and exceptions)	22.5		2.8
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		1	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		l	۱
	contributions? If "Yes," complete Schedule M	30	<u> </u>	<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?		İ	١.,
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		5,
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			•
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	+	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	۱.,		v
	Part V, line 1	34	₩	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	+	∤ ^
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	+	+-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			"
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	+	+≏
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197		X	1
	Note. All Form 990 filers are required to complete Schedule O	38	990	(201
		rom	ロンフリ	//U1

Form	990 (2015) VANGUARD COLLEGE PREPARATORY SCHOOL 74-1815	978	P	age 5
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	_		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			i
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
·	(gambling) winnings to prize winners?	1c	$\tilde{\mathbf{X}}$	
0-		-10		
∠a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 38			ĺ
	The for the defendance with the victor with the year developed by the retains		X	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_^_
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, 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 authority over, a		1	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			-
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	14	1.	. '*3
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	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?	5c	_	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			_
	any contributions that were not tax deductible as charitable contributions?	6a		X_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	25,	4.00	Ţ-
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	,	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		۵ کیر	7
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	**	100	ź
_	sponsoring organization have excess business holdings at any time during the year?	8	, ~	1 *
9	Sponsoring organizations maintaining donor advised funds.	(3)	4	Ř
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	,	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		t
10	Section 501(c)(7) organizations. Enter:	S ₂	~	CK.
а	Initiation fees and capital contributions included on Part VIII, line 12		j.,	. *
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities) ,	j i	
11	Section 501(c)(12) organizations. Enter	*	 	1
a	Gross income from members or shareholders	1.2	1	Ĭ.
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1	Ĵ.	ŝ
U	amounts due or received from them.)	\$ 34°.	34.	, ,*
40-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		- 1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	**	- 7	1-2
	· · · · · · · · · · · · · · · · · · ·	- -	de	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	26.0	
а	Is the organization licensed to issue qualified health plans in more than one state?	138	- *	+
L	Note. See the instructions for additional information the organization must report on Schedule O.	, *	؞ؙ؞	***
a	Enter the amount of reserves the organization is required to maintain by the states in which the		î	100
_	organization is licensed to issue qualified health plans Enter the amount of recenies on head	ť,		.31
	Enter the amount of reserves on hand Did the example for indeer temples convers during the tay year?	14a	-	X
	Did the organization receive any payments for indoor tanning services during the tax year? If "Vos." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14b	\vdash	†
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		000	(2015

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Charles Cahadrila O contains a recognition of note to any line in this Bort M			X						
500	Check if Schedule O contains a response or note to any line in this Part VI									
Sec	tion A. Governing Body and Management		Yes	No						
	Enter the number of voting members of the governing body at the end of the tax year 16	$r \rightarrow r$	res	NO						
1a	Enter the Hamber of Voting members of the governing body at the order that tax year			:						
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.									
b	•									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			7.7						
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	1								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6	Did the organization have members or stockholders?	6		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	γ 8.00		. 334						
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)									
-			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	X						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
-	ın Schedule O how this was done	12c								
13	Did the organization have a written whistleblower policy?	13		Х						
14	Did the organization have a written document retention and destruction policy?	14		X						
15	Did the process for determining compensation of the following persons include a review and approval by independent	٧,								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
	Other officers or key employees of the organization	15b	X							
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	*," ,								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			l						
	taxable entity during the year?	16a		x						
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	1	Ž.	<u> </u>						
	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	1							
Sec	tion C. Disclosure	1 .00								
17	List the states with which a copy of this Form 990 is required to be filed NONE									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	ole							
	for public inspection. Indicate how you made these available. Check all that apply		-							
	Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finar	icial							
13	statements available to the public during the tax year	u miui								
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
20	BILL BORG - (254) 772-8111									
	2517 MOUNT CARMEL, WACO, TX 76710									

Form 990 (2015)

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Lheck this box if neither the organization nor any related organization compensated any current officer, director, or trustee

List persons in the following order individual trustees or directors; institutional trustees, officers; key employees, highest compensated employees, and former such persons.

Check this box in heither the organization (A)		I	11 1126			преі	1341			(F)
(A)	(B)			ا) Pos	C)	,		(D)	(E)	(F)
Name and Title	Average	(do	not c	heck	more	than	one	Reportable	Reportable	Estimated
	hours per week	offi	, unle: cer an	ss pe id a d	rson i irecto	r/trus	n an itee)	compensation from	compensation from related	amount of other
	(list any	٥	Γ				Γ	the	organizations	compensation
	hours for	d are		ļ	l	-	ļ	organization	(W-2/1099-MISC)	from the
	related	ee 0r	stee		ŀ	nsate		(W-2/1099-MISC)	,	organization
	organizations	trust	al tru) yee	ошо				and related
	(list any hours for related organizations below line)	vidua	Institutional trustee	, 	Key employee	Highest compensated employee	ĕ			organizations
	line)	ind.	la Sti	Officer	Key	돌	Former			
(1) NASHIM HAMILTON	2.00]	\			1	1)		
CHAIR		Х		Х				0.	0.	0.
(2) LISA ALCORN	2.00									
VICE-CHAIR		Х		Х	ŀ	1		0.	0.	0.
(3) ERIN DAVIS	2.00						Γ			
SECRETARY		X		Х				0.	0.	0.
(4) MOSIE HOLLEY	2.00						Г			
TREASURER		Х		Х				0.	0.	0.
(5) HENRY J "TREY" BOEHM	2.00						┢			
BOARD TRUSTEE		Х						0.	0.	0.
(6) STEVE GREEN	2.00		-			T	T			
BOARD TRUSTEE		Х				i		0.	0.	0.
(7) GEORGE HARMON	2.00	1			<u> </u>	1	1			
BOARD TRUSTEE		X		}	 		ļ	0.	0.	0.
(8) GORDON HARRIMON	2.00					İ	t			
BOARD TRUSTEE		х						0.	0.	0.
(9) BRIE KEEPERS	2.00	T				T	_	·		
BOARD TRUSTEE		x				l		0.	0.	0.
(10) DAN MACLEMORE	2.00	-	1	\vdash		1	_			
BOARD TRUSTEE		x						0.	0.	0.
(11) SHANNA MATTSON	2.00		_			\vdash				
BOARD TRUSTEE	<u> </u>	х					i	0.	0.	0.
(12) VALERIE ROBINSON	2.00			-		\vdash	\vdash			
BOARD TRUSTEE		x					l	0.	0.	0.
(13) JOHN SAWYER	2.00	ऻ	 		\vdash	\vdash	\vdash			
BOARD TRUSTEE		х				l		0.	0.	0.
(14) LEWIS SNELL	2.00	 -	<u> </u>	<u> </u>		t	一			
BOARD TRUSTEE		x						0.	0.	0.
(15) SCOTT STEINBACH	2.00	 	╁	-	\vdash	┢	┝╌	-		
BOARD TRUSTEE	<u> </u>	\mathbf{x}				1	1	0.	0.	0.
(16) BILL BORG	40.00	+	\vdash	 	-	\vdash	╁╌	 	 	
HEAD OF SCHOOL		1		x]]]	115,337.	0.	12,167.
(17) REBECCA HERRON	40.00	\vdash	\vdash	 	\vdash	\vdash	╁╌		 	
BUSINESS OFFICER		i		x				24,606.	0.	3,737.
532007 12-16-15			Ь.		L	—				Form 990 (2015)

532008 12-16-15

\$100,000 of compensation from the organization

Form 990 (2015)

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

Part VIII

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded from tax under sections 512 - 514 (B) Related or Unrelated Total revenue exempt function business revenue revenue Gifts, Grants ilar Amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c 1d d Related organizations Contributions, and Other Sim e Government grants (contributions) 1e f All other contributions, gifts, grants, and 3,310 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 3,310 Total. Add lines 1a-1f Business Code 508,467. 508,467. 2 a TUITION AND FEES 611710 Program Service Revenue f All other program service revenue 508,467. Total. Add lines 2a-2f Investment income (including dividends, interest, and 49. 49. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c) See Part IV, line 18 Other b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory 1,383. Miscellaneous Revenue Business Code 11 a ATHLETIC & EXTRACURRIC 900099 1,383 b MISCELLANEOUS INCOME 900099 369. 369. c REIMBURSEMENTS 900099 265. 265. d All other revenue 2,017. Total. Add lines 11a-11d 513,843. 510,484. <u>49.</u> Total revenue. See instructions. Form 990 (2015)

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A)	
	Check if Schedule O contains a respon		this Part IX	76	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				,
2	Grants and other assistance to domestic				
2	individuals See Part IV, line 22	209,689.	209,689.		,
3	Grants and other assistance to foreign				
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		· · · · · · · · · · · · · · · · · · ·		
5	Compensation of current officers, directors,				
•	trustees, and key employees	18,749.	10,465.	8,284.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	92,303.	77,376.	14,927.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	1,549.	1,312.	237.	
9	Other employee benefits	4,243.	3,476.	767.	
10	Payroll taxes	8,685.	6,880.	1,805.	
11	Fees for services (non-employees)				
а	Management	,			
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		(,*)*	*	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)		0 555	4 756	
12	Advertising and promotion	7,532.	2,776.	4,756.	
13	Office expenses	4,898.	2,321.	2,577.	
14	Information technology	7,502.	7,502.		
15	Royalties	14 750	12 467	1 202	
16	Occupancy	14,759.	13,467.	1,292.	
17	Travel	80.		80.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2 205	2,924.	281.	
19	Conferences, conventions, and meetings	3,205. 6,606.	6,028.	578.	
20	Interest	0,000.	0,040.	370.	
21	Payments to affiliates	16,022.	14,620.	1,402.	
22	Depreciation, depletion, and amortization	10,022.	14,020.	1,102	
23	Insurance Other expenses Itemize expenses not covered	.824	7	3 32	
24	above. (List miscellaneous expenses in line 24e. If line	, , , , ,			1.5
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule (C.)	* x\$			
_	CLASSROOM SUPPLIES	26,178.	26,178.	, <u>, x</u> , , , , , , , , , , , , , , , , , ,	XX > 5
a	MISCELLANEOUS	525.	525.		
b c	BOND AMORTIZATION	20.	18.	2.	
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	422,545.	385,557.	36,988.	0.
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)		İ		
			·		Form 990 (2015)

Ра	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	54,430.	1_	287,819.
	2	Savings and temporary cash investments	91,657.	2	94,699.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	101,751.	4	390,258.
	5	Loans and other receivables from current and former officers, directors,			
	i	trustees, key employees, and highest compensated employees. Complete		1	
		Part II of Schedule L		5	_
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
"	1	employers and sponsoring organizations of section 501(c)(9) voluntary	TOTAL		
Assets	1 _	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Ass	7	Notes and loans receivable, net		7	_
•	8	Inventories for sale or use		8	<u> </u>
	9	Prepaid expenses and deferred charges	, vs	9	
	10a	Land, buildings, and equipment: cost or other	` * * ·	, i	
		basis Complete Part VI of Schedule D Less accumulated depreciation 10a 6,953,523. 10b 3,259,595.	* 3 COC 250	**	3,693,928.
	1		3,696,258.	10c	3,693,928.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		_	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	1,395.	14	1,375.
	15 16	Other assets See Part IV, line 11	3,945,491.	15	4,468,079.
	17	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses	65,748.	16 17	59,401.
	18	Grants payable	05,740.	18	37, 401.
	19	Deferred revenue	77,000.	19	520,463.
	20	Tax-exempt bond liabilities	777000	20	320,1031
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ý	22	Loans and other payables to current and former officers, directors, trustees,	* ,		
ij		key employees, highest compensated employees, and disqualified persons	* > -		
Liabilities		Complete Part II of Schedule L	* - m&x - v	22	AMAGE MAGE COMMITTEE
=	23	Secured mortgages and notes payable to unrelated third parties	1,854,269.	23	1,847,721.
	24	Unsecured notes and loans payable to unrelated third parties	70,000.	24	70,000.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	68,430.	25	19,141.
	26	Total liabilities. Add lines 17 through 25	2,135,447.	26	2,516,726.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	1,810,044.		.4. (1)
è		complete lines 27 through 29, and lines 33 and 34.			1,951,353.
auc	27	Unrestricted net assets	1,810,044.	27	1,951,353.
Bal	28	Temporanly restricted net assets		28	
5	29	Permanently restricted net assets	····	29	
Ţ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
S OF		and complete lines 30 through 34.	11 1		
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	1 010 044	32	1 054 055
-	33	Total net assets or fund balances	1,810,044.	33	1,951,353.
	34	Total liabilities and net assets/fund balances	3,945,491.	34	4,468,079.

Form **990** (2015)

	1990 (2015) VANGUARD COLLEGE PREPARATORY SCHOOL	74-1	815978	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets	_			
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	513		
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>45.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			98.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,810		
5	Net unrealized gains (losses) on investments	5	3	<u>3,0</u>	19.
6	Donated services and use of facilities	_6			
7	Investment expenses	7		<	10.
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	47	7 <u>,0</u>	02.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,951	L , 3	<u>53.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>X</u>
				Yes	No
1	Accounting method used to prepare the Form 990		_		18.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			X
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			3
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				- w' >
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs,			
	consolidated basis, or both				7
	X Separate basis Consolidated basis Both consolidated and separate basis		*		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			Ě
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit	1 1		۱ 🔒
	Act and OMB Circular A-133?		3a		X
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	1 1		l
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		L
			Form	990	(2015)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

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

OMB No 1545-0047

Inspection

Name of	the organization			, 000 0.	<u> </u>	100 1100 000	<u></u>		Employer	identification number
		UARD COI							7	4-1815978
Part I	Reason for Public	Charity Stat	us (All or	ganızat	ions must c	omplete th	us part) Se	e instruction	s	
The organ	ization is not a private found	dation because	ıt ıs (For l	nes 1 t	through 11,	check only	one box)			
1 🔲	A church, convention of ch	urches, or asso	ciation of	church	nes describe	d in sectio	on 170(b)(1)(A)(i).		
2 X	A school described in sect	ion 170(b)(1)(A)(ii). (Attac	h Sche	edule E (For	m 990 or 9	90-EZ).)			
з 🗀	A hospital or a cooperative							i).		
4 🔲	A medical research organiz	-	•					•)(iii). Enter	the hospital's name,
	city, and state	•	-		•			, ,, ,,	,	·
5 🔲	An organization operated for	or the benefit of	a college	or univ	rersity owne	d or opera	ted by a go	ovemmental	unit describ	ped in
	section 170(b)(1)(A)(iv). (C				•	•	, ,			
6 🗆	A federal, state, or local go		-	al unit c	described in	section 1	70(b)(1)(A)	(v).		
7	An organization that norma	-							he general	public described in
-	section 170(b)(1)(A)(vi). (C	-			capport				90	P
8 🗀	A community trust describe	•)(vi). (C	omplete Pa	rt II)				
9 🗀	An organization that norma				•		contribution	ons. member	ship fees, a	and aross receipts from
	activities related to its exen								-	-
	income and unrelated busin	-	•		•				• •	
	See section 509(a)(2). (Con			,					g = =	4.10. 22.10 22, 10. 2
10	An organization organized			to test	for public s	afety See	section 50	9(a)(4).		
11	An organization organized					•			arry out the	e purposes of one or
	more publicly supported or		-			-				
	lines 11a through 11d that	_								
a 🗀	Type I. A supporting orga						•		•	/ aivina
	the supported organization	•					•			• •
	organization You must o		_			,				3
ь 🗆	Type II. A supporting org	·=	-			ction with i	ts supporte	ed organizati	on(s), by ha	avina
_	control or management of							•		•
	organization(s) You mus								-gp	
c 🗀	Type III functionally inte	-				l in connec	tion with a	and functions	lly integrate	ed with
•	its supported organization	T			=				in, intograc	ou man,
d 🗆	Type III non-functionally				=				rted organi	ization(s)
• –	that is not functionally int	-		-	•				_	
	requirement (see instruct	_	-	_	•	•		-	a an attorn	
e 🗀	Check this box if the orga		-		**				II Tyne III	
·	functionally integrated, or							турст, турс	, ii, Type iii	
f Ente	er the number of supported		litetionally	integra	ated Suppor	ung organ	Zation			
	vide the following information	-	norted or	nanizat	ion(e)					
	Name of supported	(II) EIN			organization	(IV) Is the o	organization	(v) Amount o	fmonetary	(vi) Amount of
	organization				on lines 1 9		in your document?	suppor	(see	other support (see
		[abo	ve (see i	instructions))	Yes	No	ınstruc	ions)	instructions)
						 	 			
		1								
			-+			 	 			
										
									i	
						 	 			1
			- 1			1				
		, ,	* 3	\$	* .	 				
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Sch	edule A (Form 990 or 990-EZ) 2015 V	ANGUARD C	OLLEGE PR	EPARATORY	SCHOOL	74-181	5978 Page 2				
P	art II Support Schedule for										
	(Complete only if you checke				on failed to qualify	under Part III If the	organization				
	fails to qualify under the tests listed below, please complete Part III)										
	ction A. Public Support	T	- ·-								
	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received (Do not			1		/					
_	include any "unusual grants ")					,/					
2	Tax revenues levied for the organ-				,	<u>'</u>					
	ization's benefit and either paid to				, ,						
_	or expended on its behalf		<u> </u>								
3											
	furnished by a governmental unit to				,'						
4	the organization without charge	-		 	/						
4	Total. Add lines 1 through 3				,						
5	The portion of total contributions	¥,	; } ′	45.00	K	2,1					
	by each person (other than a		»^ . ™								
	governmental unit or publicly supported organization) included					7 1 1					
	on line 1 that exceeds 2% of the										
	amount shown on line 11,			3. /							
	column (f)		,								
6	Public support. Subtract line 5 from line 4	* **		* / ·		× 12.18					
	ction B. Total Support			1							
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total				
7	Amounts from line 4		<i>k</i>	1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(-,				
8	Gross income from interest,		/				-				
	dividends, payments received on		/	ł							
	secunties loans, rents, royalties										
	and income from similar sources										
9	Net income from unrelated business										
	activities, whether or not the]									
	business is regularly carried on		/								
10	Other income Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI)		<i>y</i>								
	Total support. Add lines 7 through 10		<u>. </u>	**	<u>``</u>	\$7.50					
	Gross receipts from related activities,					12					
13	First five years. If the Form 990 is for	#	first, second, thir	d, fourth, or fifth to	ax year as a section	on 501(c)(3)	. \square				
Sec	organization, check this box and stop ction C. Computation of Publ		rcentage				<u> </u>				
	Public support percentage for 2015 (nal (6)	 .	144					
	Public support percentage from 2014	#	-	column (i))		15	<u>%</u> %				
	33 1/3% support test - 2015. If the o			n line 13, and line	14 is 33 1/3% or r						
	stop here. The organization qualifies	#				,	ightharpoonup				
b	33 1/3% support test - 2014. If the	organization did no	t check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box				
	and stop here. The organization qual						ightharpoons				
17a	10% -facts-and-circumstances tes										
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check t	his box and stop h	nere. Explain in Pa	rt VI how the organ	zation				
	meets the "facts-and-circumstances"										
b	10% -facts-and-circumstances tes						10% or				
	more, and if the organization meets the										
	organization meets the "facts and circ						▶Щ				
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17i							
					Sche	edule A (Form 990	or 990-EZ) 2015				
	. /										

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	•	· · · · ·					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015 ⁷	(f) Total	
	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Gross receipts from admissions,					1		
	merchandise sold or services per-				/			
	formed, or facilities furnished in				/			
	any activity that is related to the organization's tax-exempt purpose							
2	Gross receipts from activities that				/			
Ŭ	are not an unrelated trade or bus-			i	/			
	iness under section 513				/			
4	Tax revenues levied for the organ-				/			
4	•	1		/				
	ization's benefit and either paid to	 				i		
_	or expended on its behalf			/-				
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge			/				
	Total. Add lines 1 through 5			/				
7 <i>a</i>	Amounts included on lines 1, 2, and			/				
	3 received from disqualified persons							
t) 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		/		<u> </u>			
C	Add lines 7a and 7b		1				<u>.</u>	
	Public support. (Subtract line 7c from line 6)	171 . 1			***			
	ction B. Total Support					· · · · · · · · · · · · · · · · · · ·		
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2011	// (b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
9	Amounts from line 6		1					
10a	Gross income from interest,	1	ľ					
	dividends, payments received on secunties loans, rents, royalties	l 1				1		
	and income from similar sources							
t	Unrelated business taxable income		ŀ					
	(less section 511 taxes) from businesses					[
	acquired after June 30, 1975	<i>f</i>						
(Add lines 10a and 10b	1						
11	Net income from unrelated business	/						
	activities not included in line 10b,	1						
	whether or not the business is regularly carried on	/						
12	Other income Do not include gain	Ţ,		1				
	or loss from the sale of capital	/					1	
13	assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	Ì		1				
	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,	
•	check this box and stop here	· ino organization	5 m 5t, 5555 ma, a m	,	, c	: (-)(-) - : g	▶□	
Se	ction C. Computation of,Publ	lic Support Pe	rcentage					
	Public support percentage for 2015 (column (fl)		15	%	
	Public support percentage from 2014		-			16	%	
	ction D. Computation of Inve			·				
	Investment income percentage for 20		····			17	%	
	Investment income percentage from			,		18	%	
	a 33 1/3% support tests - 2015. If the		•	on line 14, and line	e 15 is more than:			
.50	• • • • • • • • • • • • • • • • • • • •	•					▶□	
ı	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
١	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
20	Private foundation. If the organization							
	on an an ar	an and not offect a	DOV OUT IN 14' 15	a, or lob, check t		adule A (Form 90)	0 or 000-E7\ 2015	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
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10a	ļ	1
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10b	1	<u> </u>

	edule A (Form 990 or 990 EZ) 2015 VANGUARD COLLEGE PREPAR.			74-1815978 Page 6				
Ц	Type in item i directionally integrated ede(a)(e) cupper an							
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.							
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)					
1	Net short-term capital gain	11	 	 				
2	Recoveries of prior-year distributions	- <u>-</u>	 	 				
3	Other gross income (see instructions)	1 3		 				
4	Add lines 1 through 3	1 4		 				
5	Depreciation and depletion	5		 				
6	Portion of operating expenses paid or incurred for production or	╅┷		 				
_	collection of gross income or for management, conservation, or	1						
	maintenance of property held for production of income (see instructions)	6	ł					
7	Other expenses (see instructions)	1 7	 	 				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	 	 				
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see	· **						
	instructions for short tax year or assets held for part of year)	2 4						
a	Average monthly value of securities	1a		 				
	Average monthly cash balances	1b		 				
	Fair market value of other non-exempt-use assets	1c						
	Total (add lines 1a, 1b, and 1c)	1d		 				
	Discount claimed for blockage or other	13.7		· · · · · · · · · · · · · · · · · · ·				
	factors (explain in detail in Part VI)	* *						
2	Acquisition indebtedness applicable to non-exempt-use assets	2		† <u>*</u>				
3	Subtract line 2 from line 1d	3						
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	+		 				
-	see instructions)	4		į				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	 	 				
6	Multiply line 5 by 035	6		 				
7	Recoveries of prior-year distributions	7		 				
8	Minimum Asset Amount (add line 7 to line 6)	8	 	 				
	ion C - Distributable Amount			. Current Year				
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		*				
2	Enter 85% of line 1	2						
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	X : : : :	*				
4	Enter greater of line 2 or line 3	4						
5	Income tax imposed in prior year	5	× × ;					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	1						
	emergency temporary reduction (see instructions)	6						
7	Check here if the current year is the organization's first as a non-functional		ated Type III supporting org	anization (see				
	instructions)	, 5	76					

Schedule A (Form 990 or 990-EZ) 2015

Sche	dule A (Form 990 or 990-EZ) 2015 VANGUARD COLLI	EGE PR	EPARATOR	Y SCHO		74-18	15978	Page 7
Ь		(a)(s) Sup	porting Orga	ailizatioi	(continued)	1 -	Current Ye	
	on D - Distributions	mot purpos				 	our ent 10	,ai
1_	Amounts paid to supported organizations to accomplish exer					+-		
2	Amounts paid to perform activity that directly furthers exemp							
	organizations, in excess of income from activity		_					
3	Administrative expenses paid to accomplish exempt purpose	es or suppo	rteu organization	15		+ -		
4	Amounts paid to acquire exempt-use assets					+		
5	Qualified set-aside amounts (pnor IRS approval required)					+		
	Other distributions (describe in Part VI) See instructions					+		
7	Total annual distributions. Add lines 1 through 6					+		
8	Distributions to attentive supported organizations to which the	ne organiza	tion is responsive	ð				
	(provide details in Part VI) See instructions.					1		
9_	Distributable amount for 2015 from Section C, line 6					 		
10	Line 8 amount divided by Line 9 amount		(1)		(ii)	1	(iii)	
		5	(i) Distributions	Under	distributions	1	,,,, Distributa	ble
Secti	on E - Distribution Allocations (see instructions)	Excess	Distributions		re-2015	A	mount for	2015
	Distributable amount for 2015 from Control C. line 6) & 		à	å Y	-		
1_	Distributable amount for 2015 from Section C, line 6	9.5°	2.5	/ self	_ 202' 'S),	% \$ \$
2	Underdistributions, if any, for years prior to 2015	\$				24	X	e (š.
	(reasonable cause required-see instructions)		<u> </u>	*	***	4 di x 1	*	- 1 Pr
_3	Excess distributions carryover, if any, to 2015:	£.v.		**	^ **	2.90	4.3	****
a		~! *.,;	4 7	Ž.	22	1 2 2	â.	7 7
b			i i i i i i i i i i i i i i i i i i i	Y.	** <u>*</u>	28	251	
<u>c</u>		,		3 3	<u></u>	2.		<u> </u>
	From 2013		*	*	8° X	 		
	From 2014	\$ 30.8		289	2%	1 X	**	<u>v.</u>
	Total of lines 3a through e		然 为		*	4 * * * -	% :	
	Applied to underdistributions of prior years	vâ.		- 3	1/		<u> </u>	
	Applied to 2015 distributable amount	43	- Com a	· · · · · · · · · · · · · · · · · · ·	``	-		· ·
<u>_i</u>		201	Storie .	31		+	9;	*
<u>j</u>	Remainder Subtract lines 3g, 3h, and 3i from 3f.			1 2	*	586	78.	<u> </u>
4	Distributions for 2015 from Section D,	Ž.		1	(W)) ''
	line 7 \$	***	<u> </u>	 		+	<u>***.</u>	
	Applied to underdistributions of prior years	14796				Y)		
	Applied to 2015 distributable amount	.%	<u> </u>	77 30 8X	<u> </u>		* %	
	Remainder Subtract lines 4a and 4b from 4			" <u>*</u> *	*		* %	
5	Remaining underdistributions for years prior to 2015, if	1/4	N.A.			ľ	4	į į
	any Subtract lines 3g and 4a from line 2 (if amount						'%)	1 3
	greater than zero, see instructions).	5,000	3 2	* *	» ,		Ä	
6	Remaining underdistributions for 2015 Subtract lines 3h	4.				Ž.		
	and 4b from line 1 (if amount greater than zero, see	Ž.	i Î			^		
	instructions)	<i>M</i> *	4 5."		* }	<u> </u>	ž.	- <u>5</u> 2 ,
7	Excess distributions carryover to 2016. Add lines 3j					8.	¥.	ď,
	and 4c	2 4	*****	\$2 3. 25 20			<u>,</u>	<u> </u>
8	Breakdown of line 7	É	***		<u> </u>	De l		
a		<u></u> <u></u> <u></u> <u></u> <u></u> <u></u> <u></u> <u></u> , ₹	**	1 2	1	(G.	* J. \	
b		1		The Cons	<u> </u>		· A	
<u>c</u>	Excess from 2013	Sp.	<u> </u>	1		<u> </u>	<u> </u>	- <u>*</u>
<u>d</u>	Excess from 2014	9%).	***.*	*		1-		

e Excess from 2015

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)
	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

2015
Open to Public Inspection

Name of the organization **Employer identification number** VANGUARD COLLEGE PREPARATORY SCHOOL 74-1815978 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes No are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) **2**c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on 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 similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990. Part X

<u>Sche</u>		D COLLEGE								Page 2
Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tre	easures,	or Othe	Simil	ar Asse	ts (continu	ıed)
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items									
	(check all that apply)									
а	Public exhibition	d			nange progr	ams				
b	Scholarly research	е		Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further th	ne organizat	ion's exem	pt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit o				-	er sımılar a	assets	_	7	
	to be sold to raise funds rather than to be ma								Yes_	No_
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Part X, line 21									
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	ssets not II	ncluded	_	٦	—
	on Form 990, Part X?							L.	」Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	table						
							<u> </u>		Amount	
C	Beginning balance						1c			
	Additions during the year						1d			
e	Distributions during the year						1e_			
	Ending balance	000 0 17/1	04.6				<u>1f</u>		T.,	1 1
	Did the organization include an amount on Fo						y.7		」 Yes	⊢ No
Par	If "Yes," explain the arrangement in Part XIII T.V Endowment Funds. Complete in									
	Endowment ands. Complete				(c) Two yea			years back	(a) Four	years back
40	Beginning of year balance	(a) Current year	(0) P	rior year	(C) TWO year	15 Dack (i) iiiiee	years back	(e) rour	ycars back
1a b	Contributions						 _		_	
	Net investment earnings, gains, and losses									
	Grants or scholarships			_						
	Other expenditures for facilities			_						
·	and programs									
f	Administrative expenses	- '								
	End of year balance									
2	Provide the estimated percentage of the curr	rent vear end balanc	e (line 1	a column (s)) held as:				·	
a	Board designated or quasi-endowment	one your one butter	%	9, 00.01111 (2	yy riola ao.					
	Permanent endowment	%								
	Temporanly restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse	•	ation tha	at are held a	nd administe	ered for the	e organı	zation		
	by:	ŭ							[·	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	Schedule R?					3b	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" on Form 990	0, Part IV	/, line 11a S	ee Form 99	0, Part X, I	ne 10			
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acc	cumulate	ed	(d) Book	value
		basis (investr	nent)		(other)	depi	eciation	1		
1a	Land				9,491.	\$ \$			59	,491.
b	Buildings			5,89	5,792.	2,4	18,5	10.	3,477	,282.
С	Leasehold improvements								 _	
	Equipment			99	8,240.	8	<u>41,</u> 0	85.	157	,155.
	Other								2 686	
Total	Add lines 1a through 1e (Column (d) must e	aual Form 990. Part	X colun	nn (R). line 1	001				.s. b 9.5	3.928.

Schedule D (Form 990) 2015

(a) Description of liability
(b) Book Value

(1) Federal income taxes
(2) DUE TO STUDENT ACTIVITIES
(3)
(4)
(5)
(6)
(7)
(8)
(9)

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

19,141.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

PART X, LINE 2:

VANGUARD COLLEGE PREPARATORY SCHOOL IS A NOT-FOR-PROFIT ORGANIZATION

EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION

501(C)(3), EXCEPT ON NET INCOME DERIVED FROM UNRELATED BUSINESS

ACTIVITIES. FURTHER, THE SERVICE HAS RULED IT IS NOT A "PRIVATE

FOUNDATION" WITHIN THE MEANING OF SECTION 509(A) OF THE CODE. FOR THE

PERIOD ENDED JULY 31, 2016 AND THE YEAR ENDED JUNE 30, 2015, THE SCHOOL

HAS DETERMINED THAT NO INCOME TAXES ARE DUE FOR ITS ACTIVITIES.

ACCORDINGLY, NO PROVISION FOR FEDERAL INCOME TAXES HAS BEEN MADE.

MANAGEMENT ANNUALLY REVIEWS ITS TAX POSITION AND HAS DETERMINED THAT THERE

ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE

FINANCIAL STATEMENTS. THE SCHOOLS' TAX RETURNS ARE GENERALLY NO LONGER

500021-15

Schedule D (Form 990) 2015 VANGUARD COLLEGE PREPARATORY SCHOOL Part XIII Supplemental Information (continued)	74-18	15978 Page 5
SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR Y	EARS	BEFORE
2013.		
PART XI, LINE 2D - OTHER ADJUSTMENTS:		
REVENUE FOR JULY 1, 2015-JUNE 30, 2016 INCLUDED IN 13 MONTH		2 026 215
AUDIT	-	3,836,315.
PART XI, LINE 4B - OTHER ADJUSTMENTS:		
RECOVERY OF BAD DEBT OFFSET AGAINST EXPENSE IN AUDIT		369.
PART XII, LINE 2D - OTHER ADJUSTMENTS:		
EXPENSES FOR JULY 1, 2015 - JUNE 30, 2016 INCLUDED IN 13		
MONTH AUDIT		3,829,743.
PART XII, LINE 4B - OTHER ADJUSTMENTS:		
RECOVERY OF BAD DEBT OFFSET AGAINST EXPENSE IN AUDIT		369.
		-
		-

SCHEDULE E

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Schools

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

► Attach to Form 990 or Form 990-EZ.

2015

Open to Public Inspection

Name of the organization

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

Employer identification number

VANGUARD COLLEGE PREPARATORY SCHOOL 74-1815978 Part I YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, Х other governing instrument, or in a resolution of its governing body? 1 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Х 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the penod 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 X If you need more space, use Part II 3 ALL INFORMATIONAL MATERIAL INCLUDES A STATEMENT OF THE SCHOOL'S NONDISCRIMINATION POLICY. 4 Does the organization maintain the following? 4a a Records indicating the racial composition of the student body, faculty, and administrative staff? 4b b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student X admissions, programs, and scholarships? 4c X d 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 Part II Ŷ VANGUARD DOES NOT COLLECT AND RETAIN INFORMATION ON THE RACIAL COMPOSITION OF ITS STUDENT BODY, FACULTY OR À ADMINSTRATIVE STAFF. THIS QUESTION IS NOT ASKED ON ANY OF **※※※:** ITS EMPLOYMENT OR ENROLLMENT APPLICATIONS. 5 Does the organization discriminate by race in any way with respect to X a Students' rights or privileges? 5a X 5b b Admissions policies? X c Employment of faculty or administrative staff? 5c X d Scholarships or other financial assistance? 5d X e Educational policies? 5е X 5f f Use of facilities? X g Athletic programs? 5g X h Other extracurricular activities? 5h If you answered "Yes" to any of the above, please explain If you need more space, use Part II X 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a X b Has the organization's right to such aid ever been revoked or suspended? 6b If you answered "Yes" on either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.

Rev. Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Schedule E (Form 990 or 990-EZ) (2015)

Schedule E	(Form 990 or 990 EZ) (2015) VANGUARD CC)TTEGE	PREPARATORY	SCHOOL	74-1815978 F	Page 2
Part II	Supplemental Information. Provide the	explanations	required by Part I, lines	3, 4d, 5h, 6b, and	7, as applicable.	
	Also provide any other additional information					
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Schedule I (Form 990) (2015) **≗** □ Employer identification number 74-1815978 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance ► Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990. (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table VANGUARD COLLEGE PREPARATORY SCHOOL (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table Part I General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

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Page 2 Schedule I (Form 990) (2015) (f) Description of non-cash assistance 74-1815978 (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Schedule I (Form 990) (2015) VANGUARD COLLEGE PREPARATORY SCHOOL

Part III. | Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance 0 209,689, (c) Amount of cash grant (b) Number of recipients 136 (a) Type of grant or assistance TUITION ASSISTANCE 532102 10-28-15

SCHEDULE L

Transactions With Interested Persons (Form 990 or 990-EZ)

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

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

OMB No 1545-0047

Open To Public

Schedule L (Form 990 or 990-EZ) 2015

▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Name of the organization Employer identification number 74-1815978 VANGUARD COLLEGE PREPARATORY SCHOOL Part 1 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No Enter the amount of tax incurred by the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (b) Relationship (i) Written (d) Loan to or (a) Name of (c) Purpose (e) Original (f) Balance due from the agreement? interested person with organization of loan principal amount default? organization? committee? To From Yes No Yes No Yes No Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (e) Purpose of (a) Name of interested person (c) Amount of (d) Type of (b) Relationship between assistance assistance assistance interested person and the organization GORDON HARMON BOARD MEMBER 5,300 TUITION ASSIS DAN MACLEMORE BOARD MEMBER 9,700 TUITION ASSIS

SEE PART V FOR CONTINUATIONS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Nattach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization

VANGUARD COLLEGE PREPARATORY SCHOOL

Employer identification number 74-1815978

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FOR ACADEMIC SUCCESS AND FULFULLING LIVES. THE FOUNDATION OF THE
VANGUARD EXPERIENCE IS BASED ON THE CORE VALUES OF RIGOR,
RESPONSIBILITY, AND RESPECT. THE COMMUNITY OF VANGUARD STUDENTS,
FACULTY, ADMINISTRATORS, AND PARENTS IS COMMITTED TO A PERSONALIZED
LEARNING EXPERIENCE THAT PREPARES EACH STUDENT TO EXCEL AT THE
COLLEGIATE LEVEL.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
VANGUARD STUDENTS, FACULTY, ADMINISTRATORS, AND PARENTS IS COMMITTED TO
A PERSONALIZED LEARNING EXPERIENCE THAT PREPARES EACH STUDENT TO EXCEL
AT THE COLLEGIATE LEVEL.
FORM 990, PART VI, SECTION B, LINE 11:
FORM 990 IS REVIEWED BY HEAD OF SCHOOL AND BUSINESS OFFICER PRIOR TO
SIGNING AND FILING.
FORM 990, PART VI, SECTION B, LINE 15:
THE BOARD OF DIRECTORS OF THE ORGANIZATION VOTE ON A GLOBAL INCREASE. THE
HEAD OF SCHOOL DETERMINES COMPENSATION FOR ALL EMPLOYEES AND THE BOARD OF
DIRECTORS DETERMINES THE SALARY OF THE HEAD OF SCHOOL.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.

Schedule O (Form 990 or 990-EZ) (2015) Name of the organization	Employer identification number
VANGUARD COLLEGE PREPARATORY SCHOOL	74-1815978
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
INCLUSION OF VIKING CREW NET ASSETS	34,697.
INCLUSION OF VPO NET ASSETS	12,303.
ROUNDING	2.
TOTAL TO FORM 990, PART XI, LINE 9	47,002.
FORM 990, PART XI, LINE 2C	
PROCESSES HAVE NOT CHANGED FROM PRIOR YEAR	