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DLN: 93493053003287

OMB No 1545-0047

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

Treasu	ıry	t of the venue Serv	▶ Information abo	ut Form 990 and its instructions is at <u>wy</u>				Open to Public Inspection			
A F	or th	e 2015 ca	alendar year, or tax year beginn	ing 09-01-2015 , and ending 08-31-201	L 6						
		applicable	C Name of organization	-		D Emple	yer id	entification number			
		s change	Marbum Academy	31_1	01190	n 1					
┌ N	ame c	change	Doing business as		01150	<i>5</i> 1					
☐ In	itial re	etum	Doing Dusiness as								
Fi			Number and street (or P.O. box if	mail is not delivered to street address) Room/su	ute	E Teleph	one nui	mber			
		ınated	9555 JOHNSTOWN ROAD	mail is not delivered to street address, Room, su	iite	(614	396-	4843			
<u> </u>		ed return Ion pendina	City or town state or province co	ountry, and ZIP or foreign postal code		(011)050 1010					
ΙΛΡ	piicati	ion pending	NEW ALBANY, OH 43054	,,		G Gross	receipts	s \$ 6,395,948			
			F Name and address of princ	unal officer							
			Jamie Williamson	npar officer		s this a group					
			9555 JOHNSTOWN ROAD		S	ubordinates? No		☐ Yes 🗸			
			NEWALBANY,OH 43054		н(ь) А	re all subord	ınates	Yes No			
I Ta	x-exe	empt status	5 v 501(c)(3) 501(c)()	(insert no) 4947(a)(1) or 527	` 1	ncluded?		TES NO			
1 W	ebsit	te: > ww	ww marburnacademy org			•		(see instructions)			
			marbamacaaciii, org		H(c)	Group exemp	tion nu	umber ▶			
K For	n of c	organızatıor	n 🗸 Corporation 🗆 Trust 🗀 Asso	ciation	L Year	of formation 1	981 I	M State of legal domicile Of			
Pa		Sun	•								
				on or most significant activities			EDEN	050			
	<u> </u>	PRIVATE	E K-12 SCHOOL SPECIALIZIN	IG IN TEACHING BRIGHT CHILDREN V	WITH LEA	RNING DIFF	EKEN	CES			
ıce	-										
ਬੁ	_										
/en	2	Check t	his box ▶ ┌ if the organization	discontinued its operations or disposed	of more th	nan 25% of it	s net a	assets			
,0 <u>i</u>											
<u>ح</u>	3	Number	of voting members of the gover	ning body (Part VI, line 1a)			3	18			
ý.	4	Number	of independent voting members	of the governing body (Part VI, line 1b)			4	18			
Activities & Governance			· -	n calendar year 2015 (Part V, line 2a)			5	91			
Ę			• •	necessary)			6	125			
ď			,	Part VIII, column (C), line 12			7a	0			
				rom Form 990-T, line 34			7b	0			
	B '	ivet uillei	lated business taxable income i	101111 01111 9 9 0 - 1 , IIII e 3 4			/b				
						Prior Year		Current Year			
Oı.	8		ributions and grants (Part VIII,			3,445	-	507,289			
ēnuēa	9	Progr	am service revenue (Part VIII,	line 2g)		5,778		5,786,357			
Rave	10	Inves	stment income (Part VIII, colur	nn (A), lines 3, 4, and 7d)			,082	-1,560			
<u> </u>	11	O the	r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		32	419	47,089			
	12		revenue—add lines 8 through 1	1 (must equal Part VIII, column (A), lin	e	9,249	297	6,339,175			
		12)									
	13			rt IX, column (A), lines 1-3)		754	,579	656,816			
	14	Benet	fits paid to or for members (Part	t IX, column (A), line 4)	·		0	0			
S	15			yee benefits (Part IX, column (A), lines		3,843	,664	3,594,851			
Se		5-10	,					· · ·			
Expenses	16a	a Profe	essional fundraising fees (Part I	X, column (A), line 11e)	•		0	0			
蓋	Ь	Total f	undraising expenses (Part IX, column ((D), line 25) ▶ <u>224,366</u>							
	17	Othe	r expenses (Part IX, column (A)), lines 11a-11d, 11f-24e)		2,067	,285	1,330,382			
	18	Total	expenses Add lines 13-17 (m	nust equal Part IX, column (A), line 25)		6,665	,528	5,582,049			
	19	Reve	nue less expenses Subtract lin	e 18 from line 12		2,583	,769	757,126			
89					Reginn	ing of Current		End of Year			
and and					Degiiiii	ing or current		Life Of Fee			
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)			7,364	,506	9,157,734			
£ 2	21	Total	liabilities (Part X, line 26) .		-	1,520	,916	2,557,018			
žζ	22	Neta	ssets or fund balances Subtrac	ct line 21 from line 20		5,843	,590	6,600,716			
Pai	ŧΠ	Sign	nature Block								
my k prepa	nowle rer h	edge and has any k		xamined this return, including accompan omplete Declaration of preparer (other th							
Here	9		nie Williamson Head of School								
			e or print name and title								
			Print/Type preparer's name Jane E Pfeifer		ote .017-02-14	Check If	PTIN POOO	14949			
Paid		-				self-employed					
Pre	par	er ⊦	Firm's name Clark Schaefer Hack			Firm's EIN ► 3					
Lisa Only			Firm's address ► 4449 Easton Way Sui	ite 400		Phone no (61	+) 885-	2208			

Columbus, OH 43219

. ✓Yes No

	990 (2015)			Page 3
Par	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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 뉯	2	Yes	
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		No
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	Yes	
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🐿	10	Yes	
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 as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14 b		No
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		No
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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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28c

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35b

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Yes

Form 990 (2015)

	(/			
: IV	Checklist	of Required	Schedules	(continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Pai	t IV Checklist of Required Schedules (continued)			
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		No
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	Yes	
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? <i>If "Yes," complete Schedule J</i>	23		No
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		No
b	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

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Pai	rt V	Statements Regarding Other IRS Filings and Tax Complianc				_
		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	1a 19		103	110
b	Enter	the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b 0			
c	Did th	ں e organızatıon comply with backup withholding rules for reportable payments t	o vendors and reportable			
_	-	g (gambling) winnings to prize winners?		1 c	Yes	
2a	Tax S	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered s return	2a 91			
b	If at le	east one is reported on line 2a, did the organization file all required federal emp If the sum of lines 1a and 2a is greater than 250, you may be required to e-file		2 b	Yes	
3а	Did th	e organization have unrelated business gross income of \$1,000 or more during	g the year?	3a		No
b	If "Yes	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanati	on ın Schedule O	3b		
4 a	over,	, time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities ac nt)?		4a		No
Ь	If "Ye See in (FBAR	s," enter the name of the foreign country structions for filing requirements for FinCEN Form 114, Report of Foreign Bank)	k and Financial Accounts			
5a	Was tl	ne organization a party to a prohibited tax shelter transaction at any time durir	ng the tax year?	5a		No
b	Did ar	y taxable party notify the organization that it was or is a party to a prohibited	tax shelter transaction?	5b		Νo
c	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?		_		
6a		the organization have annual gross receipts that are normally greater than \$10 Ization solicit any contributions that were not tax deductible as charitable cont		5c 6a		No
b	If"Ye	s," did the organization include with every solicitation an express statement the tax deductible?	nat such contributions or gifts	6 b		
7	Organ	izations that may receive deductible contributions under section 170(c).				
	servic	e organization receive a payment in excess of \$75 made partly as a contribution es provided to the payor?		7a	Yes	
		s," did the organization notify the donor of the value of the goods or services p		7 b	Yes	
	file Fo	e organization sell, exchange, or otherwise dispose of tangible personal proper rm 8282?		7 c		No
		s," indicate the number of Forms 8282 filed during the year e organization receive any funds, directly or indirectly, to pay premiums on a p	7d honofit contract?			
e	טומ נוו	e organization receive any lunds, directly of indirectly, to pay premiums on a p	dersonal benefit contract?	7e		No
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	onal benefit contract?	7f		No
g	If the requir	organization received a contribution of qualified intellectual property, did the o ed?	rganization file Form 8899 as • •	7g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	s, did the organization file a	7h		
8	Did a	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bu the year?	siness holdings at any time	8		
9 a	Did th	e sponsoring organization make any taxable distributions under section 4966	?	9a		
b	Did th	e sponsoring organization make a distribution to a donor, donor advisor, or rela	ated person?	9b		
10		on 501(c)(7) organizations. Enter				
		tion fees and capital contributions included on Part VIII, line 12	10a			
b	Gross faciliti	receipts, included on Form 990, Part VIII, line 12, for public use of club les	10b			
11	Section	n 501(c)(12) organizations. Enter				
а	Gross	ıncome from members or shareholders	11a			
b		Income from other sources (Do not net amounts due or paid to other sources at amounts due or received from them)	11b			
12a	Section	on 4947(a)(1) non-exempt charitable trusts.Is the organization filing Form 990) in lieu of Form 1041?	12a		
b	If "Ye year	s," enter the amount of tax-exempt interest received or accrued during the	12b			
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.				
	addıtı	organization licensed to issue qualified health plans in more than one state? N onal information the organization must report on Schedule O	lote. See the instructions for	13a		
b		the amount of reserves the organization is required to maintain by the states ch the organization is licensed to issue qualified health plans	13b			
c	Enter	the amount of reserves on hand	13c			
		e organization receive any payments for indoor tanning services during the tax	· '	14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? <i>If "No," provide an expla</i> na	ntion in Schedule O	14b		

orm	990 (2015)			Page
Par	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, describe the circumstances, processes, or changes in Schedule O. See instructions.	or 10)b belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI			🗸
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 18			
2	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?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Re	even	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	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?	10 b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	4.5	.,	

b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Wes 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Ves 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Yes 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Yes 15b Other officers or key employees of the organization 15c 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 taxable entity during the year? 16a Dif "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				1 63	110
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 12b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Yes 12c Yes 12c Yes 12d Yes 12d Yes 12d Yes 12d Yes 13d Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13d Did the organization have a written whistleblower policy? 13d Did the organization have a written document retention and destruction policy? 14d Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15d The organization's CEO, Executive Director, or top management official 15d Yes 15d Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15d Did the organization injunt venture arrangements under applicable federal tax law, and take steps to safeguard the	10a	Did the organization have local chapters, branches, or affiliates?	10a		No
the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Yes 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 15a Yes 15b Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	b		10 b		
Did the organization have a written conflict of interest policy? If "No," go to line 13	11a			Yes	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
rise to conflicts?	12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
In Schedule O how this was done	b		12 b	Yes	
Did the organization have a written document retention and destruction policy?	С		12 c	Yes	
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	13	Did the organization have a written whistleblower policy?	13	Yes	
Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	14	Did the organization have a written document retention and destruction policy?	14		No
b Other officers or key employees of the organization	15				
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 taxable entity during the year?	а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	b	Other officers or key employees of the organization	15b		No
taxable entity during the year?		If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16 a		16a		No
organization's exempt status with respect to such arrangements?	b				

Section C. Disclosure 7 List the States with which a copy of this Form 990 is required to be filed▶

18

Section 6104 requires an organization to	o make its Form 1023 (or 1024 if applicable),	990 and 990-T (501(c)
, ,	Indicate how you made these available Chec	, , , ,
(5)5 only) available for public inspection	indicate now you made these available ence	K all chac apply

O wn website Another's website V 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, and financial statements available to the public during the tax year

O State the name, address, and telephone number of the person who possesses the organization's books and records
►ELIZABETH J WEAKLEY FINANCE DIR 9555 JOHNSTOWN ROAD NEW ALBANY, OH 43054 (614) 433-0822

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

- 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
- ullet List all of the organization's **former** officers, key employees, or 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

(A) Name and Title	(B) A verage hours per week (list any hours for related	unle	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) Anglim Rhonda Trustee	5 00	х						0	0	0
(2) Bostic Dr Les Trustee	5 00	x						0	0	O
(3) Hicks Brian Vice Chair	5 00	х		x				0	0	0
(4) Hummell Brian Trustee	5 00	х						0	0	0
(5) McCarty Amelia Trustee	5 00	х						0	0	0
(6) McGovern Mike Trustee	5 00	x						0	0	0
(7) Milenthal Rick Treasurer	5 00	х		x				0	0	0
(8) Morrison Craig President	5 00	x		×				0	0	0
(9) Parkes Michael Trustee	5 00	x						0	0	0
(10) Sanders Terry Trustee	5 00	x						0	0	0
(11) Sierzputowski Dan Trustee	5 00	x						0	0	0
(12) Thompson Kerry Trustee	5 00	x						0	0	0
(13) Wolfe Sharon Secretary	5 00	х		x				0	0	0
(14) Guy Steven	5 00	х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

, , ,	, ,	•	•	•		-		•	. , ,	,	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unle	ore t ss pe	han erso cer	not one n is and trus			(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estin amo ot compe fron organ and r	F) mated unt of her ensation n the ization related izations
(15) Souder Tom Trustee	5 00	х						0	(0
(16) White Anthony Trustee	5 00	х						0	(0
(17) Yvette McGee Brown Trustee	5 00	х						0	()	0
(18) Garek Majone Trustee Ementa	0 00	Х						0	()	0
(19) Weakley Elizabeth director of finance	40 00			х				77,799	()	14,356
(20) Williamson Jamie Head of school	40 00			x				95,416	(15,496
1b Sub-Total	[, Section A .		•	▶			1	73,215	0		29,852
2 Total number of individuals (including but n \$100,000 of reportable compensation from			ed al	bove	e) w	ho red	ceiv	ed more than		_	
										V	I NI-

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	E		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

Name and business address	Description of services	Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

(A)

(C)

Form 99								Page 9
Part V	1111	Statement of			a in this Dant VIII			_
		Check IT Schedu	ile O contains a respon	se or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ω <u>κ</u>	1a	Federated camp	paigns 1a	5,261				
Grants Amounts	ь	Membership du	es 1b					
, Gr	c	Fundraising eve	ents 1c	192,005				
iffs ar /	d	Related organiz	ations 1d					
s, G mil	e	Government grants	(contributions) 1e					
ion I Si	f		ns, gifts, grants, and 1f	310,023				
Contributions, Gifts, Grants and Other Similar Amounts	g	similar amounts no Noncash contribution	t included above ons included in lines					
Contri and O	-	1a-1f \$			507.200			
<u> </u>	h	Total. Add lines	:1a-1f	· · ·	507,289			
ŧ		T	_	Business Code				
rev-	2a b	Tuition and Program tuition and Program		611600	5,780,716	5,780,716		
Program Service Revenue	C	- tullion and Program		611600	5,641	5,641		
ř Š	d	_						
<i>3</i> 5 =	e							
gran	f	A II other progra	m service revenue					
Æ	g	Total. Add lines	L :2a-2f	>	5,786,357			
	3	Investment inc	ome (including dividend	s, interest,	442			442
	4		ar amounts) tment of tax-exempt bond p		772			772
	5			▶				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d		me or (loss)					
	_	C	(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory						
	ь	Less cost or other basis and	4	1,998				
		sales expenses Gain or (loss)	-4	-1,998				
	c d	Net gain or (los	· I	· ·	-2,002			-2,002
Other Revenue	8a	Gross income frevents (not incl \$192,	rom fundraising uding 005 reported on line 1c)					
Jer			a	101,860				
Ö	b c		oenses b [loss)from fundraising e	54,771	47,089			47,089
		-	om gaming activities	venes p	,			,
	Ь	less directexi	penses b					
	I		loss) from gaming activ	ities				
	10a	Gross sales of i	nventory. Jess	•				
		returns and allo	wances .					
		Loss cost of as	a					
	b c	Less cost of go Net income or (oods sold	ntory ▶				
		Miscellaneous		Business Code				
	11a							
	Ь		<u> </u>					
	C	A II -+-						
	d e	All other revenu	L	•				
				.				
	12	rotai revenue. S	See Instructions	· · · •	6,339,175	5,786,357	0	45,529

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)

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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 individuals See Part IV, line 22	656,816	656,816		
3	Grants and other assistance to foreign 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	203,067		142,326	60,741
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	2,766,406	2,423,135	230,858	112,413
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	142,372	123,772	15,267	3,333
9	Other employee benefits	252,527	230,900	14,749	6,878
10	Payroll taxes				
		230,479	186,711	31,098	12,670
11	Fees for services (non-employees) Management				
a		2.070		2.070	
b c	Legal	2,078 17,500		2,078 17,500	
d	Lobbying	20,075		20,075	
e	Professional fundraising services See Part IV, line 17	20,073		20,073	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	61,721	5,792	45,937	9,992
12	Advertising and promotion	93,832	80,764		13,068
13	Office expenses	130,156	79,505	49,572	1,079
14	Information technology	91,357	85,014	2,523	3,820
15	Royalties				
16	Occupancy	304,088	304,088		
17	Travel	66			66
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,450	700	15,728	22
20	Interest	27,790		27,790	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	216,682	216,682		
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Classroom supplies and	331,486	331,486		
b	Student Activity Assist	5,542	5,542		
c	Recruitment	5,504	5,096	408	
d	Licensing and Accredita	2,305		2,305	
е	All other expenses	3,750	300	3,166	284
25	Total functional expenses. Add lines 1 through 24e	5,582,049	4,736,303	621,380	224,366
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)				

Form 9	990 (2	2015)										
Par	t X	Balance Sheet										
		Check if Schedule O contains a response or no										
	1	Cash-non-interest-bearing										
	2	Savings and temporary cash investments .										
	3	Pledges and grants receivable, net										
	4	Accounts receivable, net										
	5	Loans and other receivables from current and										

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10a

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34

Net Assets or Fund Balances

Schedule L .

II of Schedule L

Grants payable

Deferred revenue

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets .

complete lines 30 through 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Notes and loans receivable, net . .

Prepaid expenses and deferred charges

Investments—publicly traded securities .

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities.Add lines 17 through 25 .

lines 27 through 29, and lines 33 and 34.

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complete

Inventories for sale or use .

Complete Part VI of Schedule D

Less accumulated depreciation .

Intangible assets

Other assets See Part IV, line 11

Accounts payable and accrued expenses

Balance Sheet										
Check if Schedule O contains a response or note to any line in this										

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part

s Part X (A) Beginning of year 3,428,756

7,690,435

1,110,831

10a 10b

(B) End of year

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1.054.045

845,006

112,207

28,183

18,188

1,870,537

7,364,506

557,933

886,254

76.729

O 25

1,520,916

1,476,900

4.216.767

5.843.590

7.364.506

149,923

7,584

F	Page	1

Page	11

1,423,677

354,468

666,584

67,520

30,943

27,354

6,579,604

9, 157, 734

1,607,580

382, 132

411.979

155 327

2,557,018

5,453,150

982.643

164,923

6,600,716

9.157.734

Form 990 (2015)

7,584

Page	1:

10

2a

Separate basis

✓ Separate basis

Schedule O

basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

Total revenue (must equal rait viii, column (A), me 12)	1	
Total expenses (must equal Part IX, column (A), line 25)	2	
Revenue less expenses Subtract line 2 from line 1	3	
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
Net unrealized gains (losses) on investments	5	
Donated services and use of facilities	6	
Investment expenses	7	
Prior period adjustments	8	
Other changes in net assets or fund balances (explain in Schedule O)	9	
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	
XII Financial Statements and Reporting		
Check if Schedule O contains a response or note to any line in this Part XII		
Accounting method used to prepare the Form 990	_	2:
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on	H-

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Both consolidated and separate basis

Both consolidated and separate basis

		0
	6,6	500,716
		. 🔽
	Yes	No
2a		No
2b	Yes	

Page **12**

6,339,175

5,582,049

757,126

5,843,590

Nο

2c

3a

3b

Yes

efile GRAPHIC	print -	DO NOT	PROCESS	As Filed	Data

hospital's name, city, and state

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

DLN: 93493053003287 OMB No 1545-0047

Employer identification number

31-1011901

SCHEDULE A (Form 990 or 990EZ)

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.

Open to Public Inspection

Treasury Internal Revenue Service Name of the organization

Department of the

Marburn Academy

⊽

Part I

1

2

3

Total

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

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section **170(b)(1)(A)(iv).** (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see document? (described on lines (see instructions) instructions) 1-9 above (see instructions)) Yes No

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2015

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 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 3 The value of services or facilities furnished by a governmental unit to the organization without charge 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 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar vear (d)2014 (a)2011 (b)2012 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources 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) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage for 2014 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶□ 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□ b 10%-facts-and-circumstances test - 2014. 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 VI 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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

• •			_															
(Complete only	if you	ı che	cked	the box	on	lıne	9	of	Part	I or	ıf the	e organizatio	n ·	faıled	to q	lualify	under	Part
TT TC 11																		

Se	ction A. Public Support	Trans to quant	y under the tee	to noted below,	picase compi	20 1 410 1117	
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f)Total
•	iscal year beginning in)	(-)	(-)	(-)	(=)===	(-)	(1)
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	A mounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
D	A mounts included on lines 2 and 3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of						
_	the amount on line 13 for the year Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f)Total
-	iscal year beginning in) ►		·	· · ·	. ,	· ,	
9 .0a	A mounts from line 6 Gross income from interest,						
.ua	dividends, payments received on	İ					
	securities loans, rents, royalties	İ					
	and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes)	İ					
	from businesses acquired after	İ					
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated	İ					
	business activities not included in line 10b, whether or not the	İ					
	business is regularly carried on						
12	Other income Do not include	İ					
	gain or loss from the sale of capital assets (Explain in Part	ı					
	VI)						
13	Total support. (Add lines 9, 10c,	ı					
14	11, and 12) First five years.If the Form 990 is f	or the organizati	nn's first second	third fourth or f	 	section 501(c)	(3) organization
-	check this box and stop here	or the organization	on 5 m 5 c, 5 c c o m a	, china, rouren, or r	men eax year as a	300000000000000000000000000000000000000	► □
Se	ction C. Computation of Pub	lic Support P	ercentage				
15	Public support percentage for 2015	(line 8, column	(f) divided by line	13, column (f))		15	
16	Public support percentage from 201	14 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
17	Investment income percentage for				nn (f))	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	17		18	
	33 1/3% support tests—2015. If the		,		line 15 is more t		nd line 17 is not
	more than 33 1/3%, check this box	=					▶ □
b	33 1/3% support tests—2014. If the						
	18 is not more than 33 1/3%, check	this box and st	op here. The orga	nızatıon qualıfıes	as a publicly sup	ported organiza	tion 🕨
20	Private foundation. If the organizati	on did not check	a box on line 14	, 19a, or 19b, che	eck this box and s	see instructions	▶┌

Part IV Supporting Organizations

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

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
			Yes	No
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	1		
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)	2		<u> </u>
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
D	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	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			ı
	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	4a		
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	4b		
	by or in connection with its supported organizations			
С	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	4 c		
	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)	5a		
h	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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5 c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) 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 .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
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 II of Schedule L (Form 990)	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9 b		
С	Did a disqualified person (as defined in line 9(a)) 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 .	9 c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
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)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		

Part IV Supporting Organizations (continued)

Sectio	n B.	Type	I Su	pporting	ı Organiz	ations

S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
	,, <u> </u>		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2		[Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of	2a		
	the organization's supported organization(s) would have been engaged in?			

If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

engaged in these activities but for the organization's involvement

3 Parent of Supported Organizations Answer (a) and (b) below.

each of the supported organizations? Provide details in Part VI

2b

3a

3b

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Suppor	ting C	rganizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying ti	rust on	Nov 20, 1970 See inst i	ructions. All other
	Type III non-functionally integrated supporting organizations must complete S	Sections	A through E	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	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 maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section 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)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
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		
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		
	Section 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		
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 emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	integrat	ed Type III supporting c	organization (see

	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Se	ection D - Distributions			Current Year				
1	A mounts paid to supported organizations to accom	plish exempt purposes						
2	A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	orted organizations, in					
3	Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons					
4	A mounts paid to acquire exempt-use assets							
5	Qualified set-aside amounts (prior IRS approval rec	quired)						
6	Other distributions (describe in Part VI) See instru	uctions						
7	Total annual distributions. Add lines 1 through 6							
	Distributions to attentive supported organizations t details in Part VI) See instructions	to which the organization is re	esponsive (provide					
9	Distributable amount for 2015 from Section C, line	6						
10	Line 8 amount divided by Line 9 amount							
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015				
1	Distributable amount for 2015 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)							
3	Excess distributions carryover, if any, to 2015							
a								
b								
C	From 2013							
	From 2014							
	Total of lines 3a through e							
	Applied to underdistributions of prior years							
	Applied to 2015 distributable amount							
i	Carryover from 2010 not applied (see instructions)							
_	Remainder Subtract lines 3g, 3h, and 3i from 3f							
4	Distributions for 2015 from Section D, line 7 \$							
a	Applied to underdistributions of prior years							
b	Applied to 2015 distributable amount							
С	Remainder Subtract lines 4a and 4b from 4							
5	Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)							
6	Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)							
7	Excess distributions carryover to 2016. Add lines 3j and 4c							
8	Breakdown of line 7							
<u>a</u>								
b								
c	Excess from 2013							
d	From 2014							
е	From 2015							

DLN: 93493053003287

Employer identification number

31-1011901

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Marbum Academy

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

-	·	gamzation's direct and indirect points	ai campaign act	ivities in Fait IV	
2	Political expenditures			>	\$
3	Volunteer hours				-
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization und	der section 4955	5	\$
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectio	n 4955 >	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
4a	Was a correction made?				Yes No
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exem	pt function activities 🕨	\$
2		organization's funds contributed to ot	her organization:	s for section 527	
	exempt function activities				\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b ►	\$
4	Did the filing organization file F	form 1120-POL for this year?			Yes No
	Enter the names, addresses are organization made payments of amount of political contribution separate segregated fund or a	unds Also enter the nization, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
2					
3					
4					
5					
6					
For F	Paperwork Reduction Act Notice, se	l ee the instructions for Form 990 or 990	-EZ. (Cat No 50084S Schedule C (I	⊥ Form 990 or 990-EZ) 2015

P	art II-	A	Complete if the organization is exempt under section $501(c)(3)$ and file under section $501(h)$.	ed Form 5768	(election
	Check	•	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated groexpenses, and share of excess lobbying expenditures)	oup member's name	e, address, EIN,
	Check	•	If the filing organization checked box A and "limited control" provisions apply		
				/-\ E:::	/L \ A661:-44

	Limits on Lobb	pox A and "limited control" provisions apply bying Expenditures heans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals		
1a	Total lobbying expenditures to influence public	opinion (grass roots		•		
b	lobbying) Total lobbying expenditures to influence a legis	slative body (direct lobbying)				
c	Total lobbying expenditures (add lines 1a and	1b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines					
f						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:				
	Not over \$500,000	20% of the amount on line 1e				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000				
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of I	ine 1f)				
h	Subtract line 1g from line 1a If zero or less, er	ter -0 -				
i	Subtract line 1f from line 1c If zero or less, enter -0-					
j	If there is an amount other than zero on either reporting section 4911 tax for this year?	line 1h or line 1i, did the organization file Form 4720				
j		line 1h or line 1i, did the organization file Form 4720	┌─ No			

	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)							
	Lobbying Expe	nditures During	4-Year Avera	ging Period				
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c)2014	(d)2015	(e) Total		
2a	Lobbying nontaxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
c	Total lobbying expenditures							
d	Grassroots nontaxable amount							
e	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							
			·	Sche	dule C (Form 990	or 990-EZ) 2015		

Return Reference

Sche	edule C (Form 990 or 990-EZ) 2015				Ρá	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	TOP				
		(/	a)		(b)	
activ	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity		No		Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local	Yes		٦		
_	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo			
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				20,075
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	Other activities?		Νo			
j	Total Add lines 1c through 1i					20,075
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	5 01 (c)(5),	or s	ectio	n
			-		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		-	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).	2a	i			
a b	Current year Carryover from last year	2b	<u> </u>			
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess					
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
P	art IV Supplemental Information					
Pro	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	up list)	. Part I	I-A.I	ines 1	and
	see instructions), and Part II-B, line 1 Also, complete this part for any additional information		,	, •		

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE D (Form 990)

Department of the

Internal Revenue Service

Treasury

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 <u>www.irs.gov/form990</u>.

DLN: 93493053003287 OMB No 1545-0047

Inspection

	me of the organization bum Academy		Empi	oyer identification number
	Jan. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		31-1	011901
Pa		r Advised Funds or Other Similar ed "Yes" on Form 990, Part IV, line 6.		or Accounts.
	· · · · · · · · · · · · · · · · · · ·	(a) Donor advised funds	(b)	Funds and other accounts
	Total number at end of year			
	Aggregate value of contributions to (during year)			
}	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor a funds are the organization's property, subject to		onor advis	sed Yes No
	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or donor advisor, or for	any other	r purpose Yes No
		ete if the organization answered "Yes'	on Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the			
	Preservation of land for public use (e g , recreducation)		an histor	ically important land area
	Protection of natural habitat	Preservation of	a certifie	d historic structure
	Preservation of open space			
	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution i	n the form	of a conservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme		2b	
С	Number of conservation easements on a certified	` '	2c	
d	Number of conservation easements included in (a historic structure listed in the National Register		2d	
	Number of conservation easements modified, tra	nsferred, released, extinguished, or termina	ated by th	e organization during the
	tax year ▶			
	Number of states where property subject to cons	ervation easement is located ▶		
	Does the organization have a written policy regar violations, and enforcement of the conservation e		andling of	☐ Yes ☐ No
	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enfo	rcing cons	servation easements during the
	A mount of expenses incurred in monitoring, insperior \$	ecting, nandling of violations, and enforcing	conserva	ition easements during the year
	Does each conservation easement reported on Ii (B)(i) and section $170(h)(4)(B)(ii)$?	ne 2(d) above satisfy the requirements of s	ection 17	0 (h)(4)
	In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financ		·
a r		ctions of Art, Historical Treasures ed "Yes" on Form 990, Part IV, line 8.	, or Oth	ner Similar Assets.
а	If the organization elected, as permitted under SI works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	assets held for public exhibition, educatio	n, or resea	arch in furtherance of public
b	If the organization elected, as permitted under SI works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, educatio		

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

(i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Par	t IIII	Organizations Maintaining (continued)	Collections of	Art, His	torical	Trea	asures, or (Other Similar A	ssets
3		the organization's acquisition, acc tion items (check all that apply)	ession, and other re	ecords, ch	eck any	of the	following that	are a significant us	e of its
а	F	Public exhibition		d		oan or	exchange pro	grams	
b		Scholarly research		e	Го	ther			
c	┌ F	Preservation for future generations							
4	Provid Part X	le a description of the organization'	's collections and e	xplaın hov	they fur	rther t	he organizatio	n's exempt purpose	ın
5		g the year, did the organization soli s to be sold to raise funds rather th							s No
Pai	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form s	990, Pa	rt IV,	line 9, or re	ported an amou	nt on Form 990,
1a		organization an agent, trustee, cus ed on Form 990, Part X?	stodian or other inte	ermediary	for conti	ributio	ns or other as	sets not	s No
ь	If"	Yes," explain the arrangement in P	art XIII and comple	ete the fol	lowing ta	ble		Am	ount
c		Jinning balance	are Alli and compre	ete the for	io ming ta	DIC	10		
d	_	ditions during the year					10		
e		tributions during the year					16		
f		ling balance					1f		
2a	Did the agreement on making an agreement on Forms 000 Book V large 24 for a common making large trade large and background background by								
								·	
b		s," explain the arrangement in Part							
ΡŒ	rt V	Endowment Funds. Comple	(a)Current year	(b)Pric			Two years back		(e)Four years back
1a	Beain	ning of year balance	149,923	(D)FIIC	149,923	+	149,923	149,923	149,923
b	_	ibutions	15,000		· ·		,	,	<u>, </u>
c	Net in losses	vestment earnings, gains, and s	278		6	5	99	271	170
d		s or scholarships			-6	5	-99	-271	-170
e	Other	expenditures for facilities rograms	278						
f	A dmir	nistrative expenses							
g	End o	f year balance	164,923		149,923	3	149,923	149,923	149,923
_		· · · · ·							
2	Provid	le the estimated percentage of the	current y ear end ba	alance (lın	e 1g, col	lumn (a)) held as		
а	Board	designated or quasi-endowment ▶	0 %						
b	Perma	anent endowment ▶ 100 000 %							
c	•	orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c	0 %						
3a	·		·		hat ara l	hald a	nd administers	d for the	
за	organı	rere endowment funds not in the pos ization by	-	allization	ilat ale i	ileiu ai	nu aummistere		Yes No
		related organizations				•			i(i) No
b		lated organizations s" on 3a(ii), are the related organiz			 Schedule	R? .	•		3b 100
4		tibe in Part XIII the intended uses	·					· · · · <u>· · · · · · · · · · · · · · · </u>	,,,
Par	rt VI	Land, Buildings, and Equip			randa				
		Complete if the organization a		Form 99	90, Part	: IV, I	ine 11a.See	Form 990, Part >	(, line 10.
		Description of property			(a) st or other (investme		(b) Cost or other ba (other)	Accumulated (c)depreciation	(d)Book value
1a	Land					-	1,200,6	527	1,200,627
b	Building	gs							
		old improvements					465,4	172 442,75	95 22,677
	Faunm						947 4		-

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

5,076,936

6,579,604

5,076,936

Part VII	Investments—Other Securities. Cor See Form 990, Part X, line 12.	nplete if the orga	nızatıon answered 'Yes	on Form 990, Part IV, line 11b.
	(a) Description of security or category (including name of security)		(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financia	al derivatives			obstate and at year market value
	-held equity interests			
(3)0 ther				
	nn (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII	Investments—Program Related. Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11c.see	Form 990 Part Y line 13
	(a) Description of investment		(b) Book value	(c) Method of valuation
		+		Cost or end-of-year market value
		+		
Part IX	onn (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization	n answered 'Yes' on	Form 990, Part IV, line 1	1d See Form 990, Part X, line 15
	(a) Descr			(b) Book value
=	(1)			
	omn (b) must equal Form 990, Part X, col (B) line 1 Other Liabilities. Complete if the organization		d 'Yes' on Form 990. P	▶ art IV. line 11e or 11f.
	See Form 990, Part X, line 25.	_		
1.	(a) Description of liability	(b) Book value	:	
Federal inc	ome taxes			
A served D	sumall.	155	2.27	
Accrued Pa	аугон	155,3	327	
			_	
	nn (b) must equal Form 990, Part X, col (B) line 25)	155,		

Schedule D (Form 990) 2015

656,727

5.582.049

Schedule D (Form 990) 2015

1	Total revenue, gains, and other support per audited financial statements	1	5,752,631
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	70,183
3	Subtract line 2e from line 1	3	5,682,448
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 XIII) 4b 656,727		
c	Add lines 4a and 4b	4c	656,727
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	6,339,175
Part	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s pei	Return.
1	Total expenses and losses per audited financial statements	1	4,995,505
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities 2a		
b	Prior year adjustments		
c	Other losses]	
d	Other (Describe in Part XIII)]	
e	Add lines 2a through 2d	2e	70,183
3	Subtract line 2e from line 1	3	4,925,322
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		

b Other (Describe in Part XIII) Add lines 4a and 4b . . c

Return Reference

Supplemental Information

Part XIII

information

Part V, Line 4

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) .

Investment expenses not included on Form 990, Part VIII, line 7b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

PARTICIPATE AND BENEFIT FROM THEM

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Explanation

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

THE INCOME OF THE FUNDS IS TO BE USED TO SUPPORT THE EDUCATIONAL ACTIVITIES

OF MARBURN ACADEMY, SUCH AS PROVIDE HIGH-NEED SCHOLARSHIPS TO STUDENTS REQUIRING FINANCIAL AID ABOVE AND BEYOND THE ACADEMY'S TYPICAL AWARD, AND ALSO PROVIDE FINANCIAL ASSISTANCE AWARDS FOR EXTRACURRICULAR ACTIVITIES TO ALLOW STUDENTS WHO MIGHT OTHERWISE BE ABLE TO AFFORD THESE ACTIVITIES TO

656,727

4c

5

Schedule D (Form 990) 2015	Page 5
Part XIII Supplemental	Information (continued)
Return Reference	Explanation
Part XI, Line 4b - Other Adjustments	SCHOLARSHIP REPORTED NET TO REVENUE IN THE FINANCIAL STATEMENTS 656,727
Part XII, Line 2d - Other Adjustments	DIRECT EXPENSE OF FUNDRAISING INCOME 54,771
Part XII, Line 4b - Other Adjustments	SCHOLARSHIP REPORTED NET TO REVENUE IN THE FINANCIAL STATEMENTS 656,727
Sch D Part V I	THE OTHER ASSETS BEING REPORTED are due to construction in progress. Due to the organization running a successful capital campaign, they were able to build a new school. The school will be utilized beginning of 2017.

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DLN: 93493053003287

SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2015

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►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.

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

Treasury Internal Revenue Service

Department of the

ervi	ce					
	e of the organization m Academy		Employer identificati	on nur	nber	
arbu	III Academy		31-1011901			
Pa	rt I					
					YES	NO
1	-	on have a racially nondiscriminatory policy toward students by statement in trument, or in a resolution of its governing body?	its charter, bylaws,	1	Yes	
2	_	ion include a statement of its racially nondiscriminatory policy toward studen ues, and other written communications with the public dealing with student ad larships?		2	Yes	
3	the period of solicit that makes the poli	n publicized its racially nondiscriminatory policy through newspaper or broad ation for students, or during the registration period if it has no solicitation pro cy known to all parts of the general community it serves? If "Yes," please de ou need more space use Part II	ogram, ın a way	3	Yes	
4	Does the organizati	on maintain the following?				
а	Records indicating	the racial composition of the student body, faculty, and administrative staff?		4a	Yes	
b	Records documenti basis?	ng that scholarships and other financial assistance are awarded on a racially	nondiscriminatory	4b	Yes	
С	·	gues, brochures, announcements, and other written communications to the p sions, programs, and scholarships?	ublic dealing	4c	Yes	
d	Copies of all materi	al used by the organization or on its behalf to solicit contributions?		4d	Yes	
	If you answered "No	o" to any of the above, please explain If you need more space, use Part II		-		
5 a	Does the organizati Students' rights or	on discriminate by race in any way with respect to privileges?		5a		No
b	Admissions policies	5?		5b		No
С	Employment of facu	ılty or admınıstratıve staff?		5c		No
d	Scholarships or oth	er financial assistance?		5d		No
е	Educational policies	57		5e		No
	Use of facilities?			5f		No
g	Athletic programs?			5g		No
h	Other extracurricul If you answered "Ye	ar activities? es" to any of the above, please explain If you need more space, use Part II		5h		No
6 a	Does the organizati	on receive any financial aid or assistance from a governmental agency?		6a	Yes	
b	Has the organizatio	n's right to such aid ever been revoked or suspended?		6b		No
7	Does the organizati	es" to either line 6a or line 6b, explain on Part II ion certify that it has complied with the applicable requirements of sections 4), 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Po		7	Yes	

Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)

Return Reference Explanation Schedule E. Part I. Line 3 Schedule E. Part I. Line 6

MARBURN A CADEMY HAS A POLICY WHEREBY ALL THE SOLICITATIONS FOR STUDENTS, PUBLICATIONS, BROCHURES, AND OTHER ADS STATE THAT THEY DO NOT DISCRIMINATE ON THE BASIS OF RACE. THE OHIO DEPARTMENT OF EDUCATION PROVIDES NON-PUBLIC AUXILIARY SERVICES AND NON-PUBLIC ADMINISTRATIVE COST REIMBURSEMENTS TO MARBURN A CADEMY THE NON-PUBLIC A UXILIA RY SERVICES PROGRAM IS AUTHORIZED UNDER 3317 06 AND 3317 024 OF THE OHIO REVISED CODE PAY MENTS ARE MADE ON A PER PUPIL BASIS TO THE PUBLIC SCHOOL DISTRICT WHERE THE NON-PUBLIC SCHOOL IS LOCATED. THE PUBLIC SCHOOL DISTRICT. UPON REQUEST FROM THE NON-PUBLIC SCHOOL. PROVIDES 1) TEXTBOOKS, 2) DIAGNOSTIC, THERA PEUTIC, AND REMEDIAL PERSONNEL SERVICES, AND 3) EDUCATION EQUIPMENT TO THE NON-PUBLIC SCHOOL STUDENTS NON-PUBLIC ADMINISTRATIVE COST REIMBURSEMENTS TO THE SCHOOL ARE REIMBURSEMENTS FOR SERVICES MANDATED BY THE STATE TO PERFORM CERTAIN FUNCTIONS SUCH AS TAKING ATTENDANCE. KEEPING STUDENT RECORDS. MEETINGS WITH PARENTS. TRANSPORTATION. ACCREDITATION TASKS, ETC

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DLN: 93493053003287

Employer identification number

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ

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

OMB No 1545-0047

2015

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arburn Academy			31-101190	1
Part I Fundraising Activities.Comple Form 990-EZ filers are not requir			on Form 990, Part I	V, line 17.
Indicate whether the organization raised fund	ds through any of th	he following activities C	heck all that apply	
a Mail solicitations		e Solicitation of n	on-government grants	
b Internet and email solicitations		f Solicitation of g	overnment grants	
c Phone solicitations		g Special fundrais	ing events	
d In-person solicitations				
Did the organization have a written or oral ag or key employees listed in Form 990, Part V services?			1 6	∕es
b If "Yes," list the ten highest paid individuals to be compensated at least \$5,000 by the of		users) pursuant to agree	ements under which the	fundraiser is
(i) Name and address of individual or entity (fundraiser)	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
4	Yes No			
1				
2				
3				
3				
4				
5				
6				
7				
8				
9				
10				
otal	>			
List all states in which the organization is reging registration or licensing	stered or licensed	to solicit contributions c	or has been notified it is	exempt from

	•	
Part II	Fundraising	Events

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

	receipts greater than \$5,000		. On Point 990-62, line		ts with gross
		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events
		GALA (event type)	(event type)		(add col (a) through col (c))
		,,,,		,	,,,
ikie					
Revenue	1 Gross receipts	293,865			293,865
	2 Less Contributions	192,005			192,005
	3 Gross income (line 1 minus line 2)	101,860			101,860
	4 Cash prizes	,			,
	5 Noncash prizes				
	6 Rent/facility costs	7,660			7,660
nse	7 Food and beverages	24,664			24,664
Expenses	8 Entertainment	5,150			5,150
	9 Other direct expenses	11,597		5,700	17,297
Disect	10 Direct expense summary Add lines 4	1 through 9 ın column (d)		54,771
	11 Net income summary Subtract line 1	0 from line 3, column (d	1)		47,089
Pai	Tt III Gaming. Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	e 19, or reported mor	e than \$15,000 on
Revenue		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
Se Se	2 Cash prizes				
Expenses					
	3 Noncash prizes				
Direct	4 Rent/facility costs				
<u> </u>	5 Other direct expenses				
		Yes %	┌ Yes%_	☐ Yes%	
	6 Volunteer labor	No	│ No	No	
	7 Direct expense summary Add lines 2	2 through 5 in column (c	1)		
	8 Net gaming income summary Subtra	ct line 7 from line 1, col	lumn (d)		
9	Enter the state(s) in which the organiza	tion conducts gaming a	struitios		1
a	Is the organization licensed to conduct				T Yes T No
b	If "No," explain				
L0a	Were any of the organization's gaming I	icenses revoked, suspe	nded or terminated during	the tax year?	Yes No
b	If "Yes," explain				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data Schedule I
(Form 990) | Grants and C
Governments
Complete if the organize
Department of the
Treasury | Information about Schedule

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

lacktriangle Information about Schedule I (Form 990) and its instructions is at $\underline{www.irs.qov/form990}$.

OMB No 1545-0047

2015

DLN: 93493053003287

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Schedule I (Form 990) 2015

Name of the organization						Employer identification	on number
Marburn Academy						31-1011901	
Part I General Information	n on Grants and	d Assistance				<u> </u>	
 Does the organization maintain rethe selection criteria used to aw Describe in Part IV the organization 	ard the grants or as	sistance?				tance, and	√ Yes No
Part III Grants and Other Assista that received more than \$				plete if the organization	answered "Yes" on Fo	orm 990, Part IV, line 21	, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Enter total number of section 50Enter total number of other organ		5				· · · · • -	

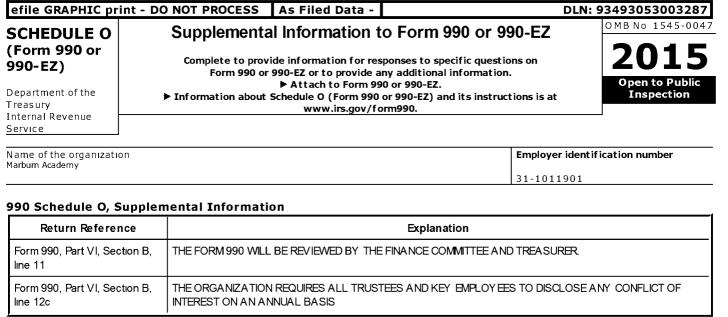
Cat No 50055P

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, Jine 22 Part III can be duplicated if additional space is needed

(a)Type of grant or assistanc	е	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIP AWARD (FINANC)	IAL AID)	116	656,816			
Part IV Supplemental In	format	ion. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.
Return Reference E	Explanation	on				

PART III, COLUMN (A) 1 MEMBERSHIP OF THE FINANCIAL AID COMMITTEE CONSISTS OF THE HEADMASTER, THE ADMISSIONS DIRECTOR, AND THE FINANCE DIRECTOR 2 THIS COMMITTEE SHALL BE RESPONSIBLE FOR RECOMMENDING TO THE FINANCE COMMITTEE THE MAXIMUM SCHOLARSHIP AWARD A QUALIFYING STUDENT MAY RECEIVE MINORITY OR DISADVANTAGED "HIGH NEED" STUDENTS, WHO QUALIFY FOR ADDITIONAL FUNDS (WHICH MAY BE RAISED SOLELY FOR THIS PURPOSE), WILL BE EXEMPT FROM THIS LIMIT $\,\,$ 3 $\,$ THIS COMMITTEE SHALL BE RESPONSIBLE FOR RECOMMENDING TO THE FINANCE COMMITTEE A PER CAPITA AVERAGE SCHOLARSHIP AMOUNT AND FOR

 $oxed{\mathsf{ESTABLISHING}}$ THE GOAL FOR AVERAGE TUITION PAYMENT PER STUDENT FOR EACH ACADEMIC YEAR $\,4\,$ A SCHOLARSHIP REPORT SHALL BE PREPARED EVERY YEAR BY THE ADMISSIONS DIRECTOR OUTLINING THE DISTRIBUTION OF SCHOLARSHIP FUNDS $\,\,5$ PARENTS/GUARDIANS, WHOSE CHILDREN ARE CURRENTLY ENROLLED AT MARBURN ACADEMY, WILL RECEIVE PREFERENCE IN THE DISTRIBUTION OF SCHOLARSHIP FUNDS, IF THEY MAKE APPLICATION FOR REENROLLMENT PRIOR TO THE SPRING DEADLINE A COVER LETTER (MAILED WITH THE CONTRACT) WILL BE SENT TO MARBURN ACADEMY PARENTS INDICATING TO THEM THAT IN ORDER TO QUALIFY FOR THIS PREFERENCE THEY MUST RETURN THEIR CONTRACT AND COMPLETED FINANCIAL AID FORM PRIOR TO THE DEADLINE DATE FOLLOWING THIS DATE, THE REMAINING SCHOLARSHIP FUNDS WILL BE MADE TO NEW STUDENTS AND RETURNING STUDENTS ON A FIRST COME FIRST SERVED BASIS



990 Schedule O, Supplemental Information

Return

Reference

Section C. line 18

Explanation Form 990. Part VI. ANY CHANGES TO THE HEADMASTER'S COMPENSATION ARE REVIEWED AND APPROVED BY THE BOARD OF

Section B. line 15a DIRECTORS, CHANGES TO THE FINANCE DIRECTOR'S COMPENSATION ARE REVIEWED AND APPROVED BY THE HEADMASTER OF THE SCHOOL The Board uses studies from the National Association of Independent Schools to obtain comparability data Form 990. Part VI. THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS. CONFLICT OF INTEREST POLICY. AND FINANCIAL

STATEMENTS AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference Explanation

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PLIBLIC INSPECTION LIPON REQUEST

line 19	THE GROWN LEGIST OF STANDARY MEDICINE ESTIMATE AND ESTIMA
FORM 990. PART XI. LINE 2C	THE ORGANIZATION HAS A FINANCE COMMITTEE TO PROVIDE OVERSIGHT OF THE FINANCIAL STATEMENT

Form 990 Part VI Section C

AUDIT FUNCTION