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GEORGIA - HURRICANE IRMA

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

► Do not enter social security numbers on this form as it may be made public.

Open to Public

	nal Revenue		- inform	ation about Form 990 and its instr	uctions is at ww	/w.irs.gov/ii	ormegu.	$\mathbb{V}_{\mathbb{L}^2}$		Inspection	
A	For the 2	016 calend	lar year, or tax year b	eginning	, 2016, a	and ending					
В	Check if app	licable	C Name of organization	The King's Academy	, Inc. c/	o Jamey	Wood	D Employ	er ider	ntification number	
	Address	s change	Doing business as					58-	2484	1442	
	Name o	change	Number and street (or P	D box if mail is not delivered to street a	ddress)	Room/sui	te	E Telepho	ne nun	nber	
	Initial re	eturn	471 Arnold Mil	ll Road				(770) 977-3784			
	Funal retu	urn/terminated	City or town, state or prov	ince, country, and ZIP or foreign postal	code						
	Amend	ed return	Woodstock		GA	30188		G Gross r	eceipts	\$3,472,892.	
	Applica	ition pending	F Name and address of pri	icipal officer		ľ		group return			
		_	Jamey Wood 471	Arnold Mill Road Woodst	ock GA	30,1.88) H	(b) Are all s	ubordinates ttach a list (include	nd? Yes No	
匸	Tax-exen	npt status	X 501(c)(3) 501(c) () ▼ (insert no)	4947(a)(1) or	527	,, ,,,,,			a delibrio)	
J	Websit	e: b th	ekingsacademy.	org	0	н	(c) Group e	xemption nu	mber	>	
K	Form of o	rganization	X Corporation Trust	Association Other	L Ye	ear of formation	1999	Ms	state of	legal domicile GA	
Pa	rt I	Summar	y								
				ssion or most significant activi	ties Edi	ucation	provid	led in	a Cl	hristian based,	
ë	pa	rent-i	nvolved, and c	lassically traine	d & instr	ucted c	lassr	oom.		·	
and			-				- -				
Governance										·	
ò		eck this box		ation discontinued its operation						1	
∘ಶ			•	ers of the governing body (Pa					3		
Activities	1			in calendar year 2016 (Part \					5	234	
Ĭ				if necessary)					6	225	
₽	7a Tot	tal unrelate	d business revenue fro	n Part VIII, column (C) line 1	2/]			7a		
	b Net	t unrelated	business_taxable_incon	m Part VIII, column (C) line 1 ne from Form 990-L, line 34.	VED	<u> </u>	<u></u> .		7b	0.	
		<u>=</u>		22	S		Pı	rior Year		Current Year	
Ð			and grants (Part VIII, lıı	(A III (141) (I A)		1		78,1	82.	258,594.	
Revenue		•	ce revenue (Part VIII, l	ne 2g) [:[[] · · · · · · · ·	⊗		2	<u>,781,4</u>	69.	3,167,546.	
ě	1		· ·	(A), lines 3,4, and 7d)						239.	
щ				lines 5,6d, 8¢, 9¢, 10c, and		1		39,3		46,513.	
				11 (must equal Part VIII, colu			<u> </u>	<u>, 898, 9</u>	77.	3,472,892.	
			· ·	t IX, column (A), lines 1-3)			ļ			 	
	14 Benefits paid to or for members (Part IX, column (A), line 4)										
S							├ ──-┴	,782,6	73.	1,947,153.	
Expenses			• ,	(, column (A), line 11e)							
×	b Tot	tal fundrais	ing expenses (Part IX,	∞lumn (D), line 25) ►		0.	 				
ш	17 Oth	her expense	es (Part IX, column (A),	lines 11a-11d, 11f-24e)				898,9		1,101,629.	
	l	-	·	st equal Part IX, column (A), I			2	<u>,681,6</u>	23.	3,048,782.	
		venue less	expenses Subtract line	e 18 from line 12	<u></u>	<u> </u>		217,3	54.	424,110.	
96 of							Beginnin	g of Curre	ıt Year	End of Year	
Asset; Belar	20 101		Part X, line 16)					,407,2		5,049,893.	
% <u>5</u> 5			(Part X, line 26)				2	<u>, 095, 3</u>	<u>35.</u>	3,313,882.	
žZ			fund balances Subtrac	t line 21 from line 20	<u> </u>	<u> </u>	1	,311,9	01.	1,736,011.	
Pa	rt II	Signatur	e Block								
Und	er penalties o	of perjury, I dec	lare that I have examined this	eturn, including accompanying schedul on all information of which preparer has	es and statements,	and to the best	of my knowle	edge and bel	ef, It Is	true, correct, and	
	piete Deciare	audit of prepart	9/2010/10/1	1 hood	any knowledge			-) -)	. /-	701-7	
		Signatu	re of officer	· vocas					0/2	201 	
Sig	gn	. •	U					-			
He	re		print name and title				Princ	ipal (Otti	cer	
			reparer's name	Preparer's signature		Date	r	<u> </u>	7	PTIN	
		, ,	·	' -	_	l	_	Check	ıf	Į.	
Pa			B. Paulk	Bruce B. Paulk		12/12/1	- /	self-employe	-	P00906465	
	eparer e Only	Firm's name			LLC			Eirm'e Eiki I	• ^^	1063663	
US	e Omy	Firm's addre			GB 3000			Firm's EIN		2-1863662	
	. the 100	diagnas #	Alpharetta		GA 3000			Phone no	(67	78) 361-6735	
				er shown above? (see instruc				· · · · ·	<u>··</u>	. X Yes No	
BA	A For Pa	perwork R	reduction Act Notice.	see the separate instruction	1S. //	TEEA	0101 11/16	5/16		Form 990 (2016)	

TEEA0101 11/16/16

Dat	till Statement of Program Service Accomplishments	42 Tage Z
<u>rai</u>	Check if Schedule O contains a response or note to any line in this Part III	П
1	Briefly describe the organization's mission	····
•	Education provided in a Christian based	
	parent-involved, and classically trained & instructed classroom.	
	parent-involved, and classically chained a instructed classroom.	
	Did the organization undertake any significant program services during the year which were not listed on the prior	
2	Form 990 or 990-EZ?	Voc V No
	If 'Yes,' describe these new services on Schedule O	Yes X No
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Van 🗔 Na
3	If 'Yes,' describe these changes on Schedule O	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by a Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exand revenue, if any, for each program service reported	expenses penses,
4 a	(Code) (Expenses \$ 2,683,506. including grants of \$ 0.) (Revenue \$	3,472,892.)
	Elementary school (K-12) Education provided in a Christian based,	
	parent-involved, and classically trained & instructed classroom.	
4 6	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4 0	c (Code) (Expenses \$ including grants of \$) (Revenue \$)
40	d Other program services (Describe in Schedule O)	
•	(Expenses \$ including grants of \$) (Revenue \$)
4	a Total program service expenses ► 2,683,506.	
BAA		Form 990 (2016)

Form 990 (2016) The King's Academy, Inc. c/o Jamey Wood

Part IV Checklist of Required Schedules

58-2484442

Page 3

			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	x	ı
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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_		х
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		Х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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_		х
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		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	<u> </u>
	b Did the organization report an amount for investments — other secunties 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	11 b		x
	c 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	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e		Х
	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	11 f		_X
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
	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		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	Х	
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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	14b		x
15		15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
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		х
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		х
19		19		х
_				

58-2484442 Page 4 Part IV. Checklist of Required Schedules (continued) Νo 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20a Х b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 Х 21 Х 22 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and Х 24a 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 to defease 24c d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? . . . 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Х transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I. 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I Х 25b Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member 27 X of any of these persons? If 'Yes,' complete Schedule L, Part III. f, pi Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b Х X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M . . . 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II X 32 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, 34 Х X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Х organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI Х 37

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	m 990 (2016) The King's Academy, Inc. c/o Jamey Wood	58-248444	2	F	age
Pa	Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V	· · · · · · · · · · · · · · · · · · ·	٠.	<u></u>	·Γ
				Yes	No
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	a ∫0	*** * *	2-2 20	* 1
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	b 0		<u>.</u>	
	c Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortable gaming		# 3 ()	
	(gambling) winnings to prize winners?	· · · · · · · · · · · · · · · · · · ·	1 c		X
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2	a 234			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax return	ıs?	2 b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1	3.4	,	* !
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a	* 1	Ϋ́
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 b		
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over a			
•	financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)?	4 a		X
	b If 'Yes,' enter the name of the foreign country		8 5 5	7 ()	A & .
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	counts (FBAR)			1)
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	• •	5 a	*~ 4.	Ϋ́Χ
_	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact		5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
			-50		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the solicit any contributions that were not tax deductible as charitable contributions?		6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contribution not tax deductible?	s or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).		3 2 3		
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go services provided to the payor?	oods and	7 a		х
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
	c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was				
	Form 8282?		7 c		x
	d if 'Yes,' indicate the number of Forms 8282 filed during the year	d	in the H	* * 4	e
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con	ntract?	7 e	* acc. ic %	X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contrain	ct?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form	m 8899			
	as required?		7 g		
	Form 1098-C?		7 h	1	1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the sponsoring	& -2 ³	2.34	3
	organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.			. W. W. W.	2 . 1
	a Did the sponsoring organization make any taxable distributions under section 4966?		9 a	" "	
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9 Б		
10	Section 501(c)(7) organizations. Enter		i (3	# \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	* * \(\lambda \)
	a Initiation fees and capital contributions included on Part VIII, line 12	al	9 1 3		7 4 6
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10	+			, »
11	Section 501(c)(12) organizations. Enter	<u>~1</u>	2.5		3 37 37
	a Gross income from members or shareholders.	al	13.8		200
	b Gross income from other sources (Do not net amounts due or paid to other sources		1 de 20		3 . 7
	against amounts due or received from them)	ь	3 1 2	333	***
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12 a		,a
_	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12	1		# * * .	₹ , °£3.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			100	* 3
	a is the organization licensed to issue qualified health plans in more than one state?	· · · · · · · · · · · · · · · · · · ·	13a	اعتماد	all or i
	Note. See the instructions for additional information the organization must report on Schedule O		5.3.4	· C.	1 2) . 8
	b Enter the amount of reserves the organization is required to maintain by the states in		2 3 J.	192	- 3
	which the organization is licensed to issue qualified health plans	ь	ر ک ^{ی کی} د. تاریخ		
	c Enter the amount of reserves on hand	c		(* 1	
14	a Did the organization receive any payments for indoor tanning services during the tax year?		14a	- 3 & 30	X

Form	1990(2016) The King's Academy, Inc. c/o Jamey Wood 58-2484442		F	Page 6
Par	Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	ın		
<u> </u>	tion A. Governing Body and Management		· · · ·	· A
Sec	tion A. Governing Body and Management		17.	1
1 a	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
2 2	DENTER the number of voting members included in line 1a, above, who are independent	2	X	
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		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6 7 a		X
t	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8 a	X	
t	Each committee with authority to act on behalf of the governing body?	86	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rever	าue C	ode.))
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		X
t	o 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		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
Ł	Describe in Schedule O the process, if any, used by the organization to review this Form 990	4 7	x 4x	% č.
12 a	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		
t	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	ļ —
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	a The organization's CEO, Executive Director, or top management official	15a	Х	
Ł	o Other officers or key employees of the organization	15b	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	3 Å-		4 3
16 a	a 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	3 3 3 mm ~	X
	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 organization's exempt status with respect to such arrangements?	16b		* * * * * * * * * * * * * * * * * * * *
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply	avaılab	le	
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	the public during the tax year	le to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records Annual Mill Poad Woodstock CA 20199	70) (
		,,,,		4 1 1 1 A

Page 7

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

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

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

Check this box if neither the organization no	or any related organi	Lauo	11 60	(C)		ieu a	iiy c	I I I I I I I I I I I I I I I I I I I	Ctor, or trustee	
(A) Name and Title	(B) Average hours per	than	one both	do no box, t	ot che unless fficer truste	ck mor s perso and a e)	n	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation from the organization and related organizations
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	
(1) Jamey Wood	40.00									
Director		Х		Х	<u> </u>			52,320.	0.	0
(2) Allen Wood	1.00		ļ	l		[ļ			
Director		Х			<u>L</u>	<u> </u>		0.	0.	0
(3) Kristi Brannen Director	40.00	x						52,320.	0.	0
(4) Tom Brannen	1.00									
Director		Х						0.	0.	0
(5) Wes Cantrell Director	1.00	х		х				0.	0.	0
(6) Jane Cantrell Director	1.00	х						0.	0.1	0
_(7)_David_Breaden Director	1.00	x						0.	0.	. 0
(8) Sandra Breaden Director	40.00	x						34,650.	0.1	0
(9) Rhonda Anderson Director	1.00	х						0.	0.	0
(10)										
(11)										
(12)										
(13)										
<u></u>					†-	-	-			

\$100,000 of compensation from the organization

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

Form	990 • V	(2016) The King	's Acade	emy,	, Inc. c/o 3	Jamey Wood		58-2484442	Page
	37.	Check if Schedule O		enon	se or note to any lu	ne in this Part VIII			Г
				(A)	Se of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b d e f	Federated campaigns Membership dues Fundraising events Related organizations . Government grants (contribution all other contributions, gifts, graimilar amounts not included a noncash contributions included.)	ons)	1 a 1 b 1 c 1 d 1 e 1 f S	24,059. 234,535.				
a S	h	Total. Add lines 1a-1f .				258,594.			
Program Service Revenue	2 a	Tuition/Admiss: Activities	ions	6	Business Code 611110 611110	2,993,445. 174,101.	2,993,445. 174,101.	0.	0.
Ë	e								<u> </u>
gra	f	All other program service	revenue .	-					
Ę	وا	Total. Add lines 2a-2f				3,167,546.		10 3 4.27 94. 7	
_	3 Investment income (including dividends, interest and other similar amounts)								<u> </u>
	4	•				239.	239.	0.	0.
	l i	Income from investment			•				
	5	Royalties				7 8 80 2 W 1988 S	3.633		
	l b	Gross rents	(i) Real	577.					
	1	Net rental income or (los			·	34 677		and a second of the second	
	7 a	Gross amount from sales of assets other than inventory	(i) Securiti		(ii) Other	34,677.	0.	0.	34,677.
	c	D Less cost or other basis and sales expenses							
Other Revenue	8 a	Gross income from fundr (not including. \$	24,05 on line 1c)	9 <u>.</u> . a	,				
٥	9 a	Gross income from gami See Part IV, line 19 Less direct expenses .	ng activities	. a					
	10 a	 Net income or (loss) from Gross sales of inventory, and allowances Less cost of goods sold Net income or (loss) from 	less return	s . a . b					All and the state of the state
	┈	Miscellaneous Revenu		T	Business Code				
	11 a	Other_Income_		6	611110	11,836.	11,836.	2. (Å. 28.) 0.	0.
	ı b)		j		I	I	1	

d All other revenue e Total. Add lines 11a-11d

12 Total revenue. See instructions

11,836

3,179,621

3,472,892.

Ο.

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must co				
<u> </u>	Check if Schedule O contains a res				
Do n 6b, 7	ot include amounts reported on lines b, 8b, 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				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				The second section
•	trustees, and key employees	139,290.	139,290.	0.	0.
6	disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages	1,657,740.	1,657,740.	0.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)			·	
9	Other employee benefits				
10	Payroll taxes	150,123.	150,123.	0.	0.
11	Fees for services (non-employees)				
	Management				
	Legal				
	Accounting	,			
_	Lobbying		2	****	
	Professional fundraising services See Part IV, line 17.	, , ,			
-	Investment management fees				
_	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion	810.	0.	810.	0.
13	Office expenses	32,412.	0.	32,412.	0,
14	Information technology				
15	Royalties				<u> </u>
16	Occupancy				<u> </u>
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
20	Interest	81,953.	81,953.	0.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	90,379.	90,379.	<u> </u>	0.
23	Insurance	47,629.	0.	47,629.	0.
24	covered above (List miscellaneous expenses		3413		
	of line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
á	Maintenance Projects	27,283.	0.	27,283.	0.
ŧ	Cirriculum Materials	0.	0.	0.	0.
	Property Maintenance	115,252.	0.	115,252.	0.
	Miscellaneous	15,834.	0.	15,834.	0.
	All other expenses	690,077.	564,021.	126,056.	0.
25	Total functional expenses. Add lines 1 through 24e	3,048,782.	2,683,506.	365,276.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here Infollowing SOP 98-2 (ASC 958-720)				

59,630

44,843.

216,408.

260,040.

100,268.

0.

Form 990 (2016) The King's Academy, Inc. c/o Jamey Wood 58-2484442 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 1 2 867,729 1,493,482. 3 3 4 115,332. 112,585 4 Loans and other receivables from current and former officers, directors, 5 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 II of Schedule L . . . 6 7 Notes and loans receivable, net 7 8 9 Prepaid expenses and deferred charges 10,069 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 10 b 10 c 2,416,853 ,336,606. Investments - publicly traded securities 11 11 Investments - other secunties See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,407,236 5,049,893. 16 199,497 17 17 18 18 19 19 405,993 449,159. 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 odka Khádírov 22 35,936 195,171 23 2,388,275. 23 Unsecured notes and loans payable to unrelated third parties 258,738 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 25 095,335 26 ,313,882 26 Organizations that follow SFAS 117 (ASC 958), check here > X and complete STEPHEN FRE 1 Balances lines 27 through 29, and lines 33 and 34. 1,220,504 27 Unrestricted net assets ,635,743. 28

28 Fund Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 늄 Capital stock or trust principal, or current funds Net Assets Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds . . .

Johnson (1) LYUZ.ÈrĞ ijĬ 30 31 32 33 1,311,901 1,736,011

34

29

91,397

3,407,236

BAA

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32

33

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5,049,893. Form 990 (2016)

Forn	1990 (2016) The King's Academy, Inc. c/o Jamey Wood	8-2	48444	:2	Pag	ge 1 2
Pa	TXI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					. [
1	Total revenue (must equal Part VIII, column (A), line 12)		1	3,4	72,8	92.
2	Total expenses (must equal Part IX, column (A), line 25)	. [2	3,0	48,7	82.
3	Revenue less expenses Subtract line 2 from line 1 · · · · · · · · · · · · · · · · · ·	· . [3		24,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4	1,3	11,9	01.
5	Net unrealized gains (losses) on investments	• • [5			
6	Donated services and use of facilities	· . [6			
7	Investment expenses	• • [7			
8	Prior period adjustments	· • L	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. L	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))		10	1,7	36,0	<u>11.</u>
Га	t XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII	· · ·		<u></u>		\perp
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				表入	33
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				\$ % L	95 × .
	ın Schedule O				· 31	* · · ·
2 :	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed or	on a				* /* * (
	separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis			N.		` £ \$
	Were the organization's financial statements audited by an independent accountant?	• •		2 b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both			6 1	* * * * * * * * * * * * * * * * * * * *	
	Separate basis Consolidated basis Both consolidated and separate basis			3 %		\$ ".
	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit		· '4 · %	**	* .4
	review, or compilation of its financial statements and selection of an independent accountant?			2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain				*	€ 48.
_	in Schedule O			12.1	3.23	\$ 1.4 4
3 :	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	gle · · ·	<i>.</i>	3 a		x
ı	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require	d aud	lit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	<u> </u>	3 b		
BAA				Form	990 (20	016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name o	me of the organization Employer identification number									
	King's Academy, Inc.					58-248444				
Part	Reason for Public Cha	rity Status (All or	ganizations must co	mplete	this pa	art.) See instruction	ns.			
The o	rganization is not a private foundati	on because it is (For I	ines 1 through 12, check	only on	e box)		\mathcal{M}			
1	A church, convention of church	•				ı)(i).	02			
2	X A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))									
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	A medical research organization	on operated in conjunc	tion with a hospital desci	nbed in s	ection 1	70(b)(1)(A)(iii) Enter the	ne hospital's			
	name, city, and state			<i>_</i> -						
5	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)									
6	A federal, state, or local govern	nment or governmenta	l unit described in sectio	n 170(b)(1)(A)(v).				
7	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)									
8	A community trust described in	section 170(b)(1)(A)	(vi). (Complete Part II)							
9	An agricultural research organ	zation described in se	ction 170(b)(1)(A)(ix) o	perated i	n conjun	ction with a land-grant o	college			
_	or university or a non-land-grain	nt college of agriculture	e (see instructions) Ente	r the nar	ne, city, a	and state of the college	or			
	university	.				· 				
10	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)									
11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).									
12	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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g									
а	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B.									
b	Type II. A supporting organiza management of the supporting must complete Part IV, Section	ı organizatıon vested ır	trolled in connection with the same persons that	its supp control o	orted org r manage	ganization(s), by having e the supported organiz	control or ation(s) You			
C	Type III functionally integrat organization(s) (see instruction					unctionally integrated w	rith, its supported			
d	Type III non-functionally inte functionally integrated The organistructions) You must comp	anization generally m	ust satisfy a distribution	connecti requirem	on with it ent and a	ts supported organization attentiveness require	on(s) that is not ement (see			
е	Check this box if the organizate integrated, or Type III non-fund	ion received a written	determination from the II	RS that it	ıs a Тур	e I, Type II, Type III fun	ctionally			
f	Enter the number of supported or	ganızatıons								
g	Provide the following information	about the supported or	ganızatıon(s)							
	(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is organizatii in your go docun	on listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
				Yes	No					
(A)										
727				 	<u> </u>					
<u>(B)</u>				ļ						
(C)				<u> </u>						
(D)				<u> </u>						
<u>(E)</u>		18/8 - 19-10- ACCC - 19	MAN TO TOWN OF THE	1 277.5.5.5	needle 1		 			
Total										

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

Schedule A (Form 990 or 990-EZ) 2016

b 10%-facts-and-circumstances test—2015. 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.

	dule A (Form 990 or 990-EZ) 2016			Inc. c/o J		58-2484442	Page 3
Par	Support Schedule for (Complete only if you check	ed the box on line 1	10 of Part I or if the	e organization faile	(a)(2) ed to qualify under	Part II If the organization	ation
<u>.</u>	fails to qualify under the test	s listed below, plea	ise complete Part	11)			
		(-) 0040	(1-) 0040	(0) 2011	(4) 2045	(1) 2040	10/7
1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
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		t.				
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5				<i>Y</i>		
<i>7</i> a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b		/			1	
8	Public support. (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Caler	dar year (or fiscal year beginning in) 🟲	(a) 2012	(b) ∕2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6				}		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalues and income from similar sources						
to	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b			<u> </u>	<u> </u>		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	stop here	<u> </u>				▶
Sec	tion C. Computation of Pu						
15	Public support percentage for 20	16 (line 8, column (f) divided by line	13, column (f))		15	િ
16	Public support percentage from 2	015 Schedule A, F	art III, line 15.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · ·	16	상
Sec	ction D. Computation of In	vestment Inco	me Percentag	ge			
17	Investment income percentage for				(f))		ક
18	Investment income percentage from	•			-		8
	33-1/3% support tests—2016. If /is not more than 33-1/3%, check	the organization di	d not check the b	ox on line 14, and li	ine 15 is more than	n 33-1/3%, and line 1	
į	33-1/3% support tests—2015. If line 18 is not more than 33-1/3%,						

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	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
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	
,	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination	31
•	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	{ 3e
4:	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below	4:
		1.873

- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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-	C.1	🔆	
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			(Sec.)
	10b		<u> </u>

Sche	dule A (Form 990 or 990-EZ) 2016 The King's Academy, Inc. c/o Ja Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	mey	Wood 58-248	34442 Page 6
Par 1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N	Nov 20), 1970 (explain in Part VI) See
 Sec	instructions. All other Type III non-functionally integrated supporting organizations matter than the instruction A — Adjusted Net Income	ust co	mplete Sections A through (A) Prior Year	n E (B) Current Year (optional)
1	Net short-term capital gain	1		
	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		
Sec	tion 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)			
a	Average monthly value of secunties	1 a		
Ŀ	Average monthly cash balances	1 b		
	Fair market value of other non-exempt-use assets	1 c	i	
	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		
Sec	tion 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	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
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	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

Par	N Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organizat	ions (continued)	
	ion D - Distributions			Current Year
_	Amounts paid to supported organizations to accomplish exempt purpose	es		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organization	s,	
3	Administrative expenses paid to accomplish exempt purposes of suppor	ted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions	ion is responsive (provide	details	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(ıii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required — explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016			
а	A. 有"别的"会说,"我就是我就是我们的"的"我"的"我"。			
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			
—h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			· Langer section
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D,		Market Market	
	line 7 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			Carrier and Marie Cong
8	Breakdown of line 7			TO THE WOOD
			Marine Marine	湖"。影响中,建
t	Excess from 2013			
	Excess from 2014	a the two the two		State that his
	Excess from 2015			
	Cycens from 2016			

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Schedule A (Form 990 or 990-EZ) 2016

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 2016

n990. Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

	The King's Academy, Inc. c/o	_		58-2484442
Par	Organizations Maintaining Donor A Complete if the organization answere	Advised Funds or Ot ed 'Yes' on Form 990,	her Similar Fund Part IV, line 6.	
		(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year		·	
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor ad are the organization's property, subject to the organization	visors in writing that the ass ization's exclusive legal con	sets held in donor adv	ised funds
6	Did the organization inform all grantees, donors, an for chantable purposes and not for the benefit of the impermissible private benefit?	e donor or donor advisor, or	for any other purpose	e conferring
Par	Conservation Easements. Complete if the organization answer	ed 'Yes' on Form 990.	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the			
•	Preservation of land for public use (e.g., recrea	_		historically important land area
	Protection of natural habitat	,	└	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation of	contribution in the form	n of a conservation easement on the
	last day of the tax year			
				Held at the End of the Tax Year
	Total number of conservation easements			
	Total acreage restricted by conservation easements			
	Number of conservation easements on a certified h			2 c
•	Number of conservation easements included in (c) structure listed in the National Register			
3	Number of conservation easements modified, transtax year ►	ferred, released, extinguish	ed, or terminated by t	he organization during the
4	Number of states where property subject to conser	vation easement is located	-	
5	Does the organization have a written policy regards	ng the periodic monitoring, i	inspection, handling o	f violations,
	and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, in	specting, handling of violation	ons, and enforcing co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspec ►\$	ting, handling of violations,	and enforcing consen	vation easements during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requ	irements of section 1	70(h)(4)(B)(ı) · · · · · · · Yes No
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to the conservation easements	conservation easements in i organization's financial stat	ts revenue and exper ements that describes	nse statement, and balance sheet, and street the organization's accounting for
Pa	Organizations Maintaining Collection Complete if the organization answer	tions of Art, Historica ed 'Yes' on Form 990,	al Treasures, or Part IV, line 8.	Other Similar Assets.
1	a If the organization elected, as permitted under SFA art, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its financial s	d for public exhibition, educa	ation, or research in fu	tement and balance sheet works of irtherance of public service, provide,
	 If the organization elected, as permitted under SFA historical treasures, or other similar assets held for following amounts relating to these items 	AS 116 (ASC 958), to report public exhibition, education	in its revenue statem i, or research in furthe	ent and balance sheet works of art, rance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line	1		. \$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, his amounts required to be reported under SFAS 116	storical treasures, or other s (ASC 958) relating to these	ımılar assets for finan ıtems	cial gain, provide the following
	a Revenue included on Form 990, Part VIII, line 1			▶\$
	b Assets included in Form 990, Part X			

				Jamey Wood	58-248			Page
Part ill Organizations Maintai	ning Colle	ctions	of Art, Histo	rical Treasures, o	r Other Similar Ass	ets (co	ontin <u>u</u>	ıed)
Using the organization's acquisition items (check all that apply)	, accession, a	nd other i	records, check	any of the following that	are a significant use of its	s collection	on	
a Public exhibition			d Loan o	r exchange programs				
b Scholarly research			e Other					
c Preservation for future generat	ions		<u>—</u>					
Provide a description of the organize Part XIII		ions and	explain how the	y further the organization	n's exempt purpose in			
5 During the year, did the organization to be sold to raise funds rather than	n to be maintai	ned as pa	art of the organi	zation's collection?		Yes	[No
Part IV Escrow and Custodia line 9, or reported an a	I Arrangem mount on Fo	i ents. C orm 990	Complete if th D, Part X, line	ne organization ansi è 21.	wered 'Yes' on Form	1 990, F	²art I\	∕,
1 a Is the organization an agent, truste on Form 990, Part X?				· · · · · · · · · · · · · · · ·	ets not included	Yes	[No
b If 'Yes,' explain the arrangement in	Part XIII and o	complete	the following ta	ole				
						Amount		
c Beginning balance								
d Additions during the year								
e Distributions during the year					. 1 e			
f Ending balance								
2 a Did the organization include an am						Yes		No
b If 'Yes,' explain the arrangement in							[
Part V Endowment Funds. C	omplete if t	he orga	nization ans	wered 'Yes' on Forn	n 990, Part IV, line 1	10.		
	(a) Current		(b) Prior year				our years	s back
1 a Beginning of year balance	(-)	/				1		
b Contributions								
b Contributions						+		
c Net investment earnings, gains, and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses						<u> </u>		
g End of year balance								
2 Provide the estimated percentage	of the current	vear end	balance (line 1	, column (a)) held as				
a Board designated or quasi-endowi		,	8	,,				
b Permanent endowment	9							
	°		0_					
c Temporarily restricted endowment			_					
The percentages on lines 2a, 2b, a	and 2c should	equal 100	0%					
3 a Are there endowment funds not in	the possessio	n of the o	rganization tha	are held and administer	ed for the	-		
organization by	,						Yes	No
(i) unrelated organizations						. 3a(i)		
(ii) related organizations						. 3a(ii)		
b If 'Yes' on line 3a(ii), are the relate						. 3b		
4 Describe in Part XIII the intended								┸
			. C Gridowinorit	<u></u>		-		
Part VI Land, Buildings, and Complete if the organization			es' on Form	000 Part IV line 11	la See Form 000 D	art V II	ine 10	1
	Zation answ	eleu i	es on Form	990, Faltiv, ille i i	ia. See Foiiii 990, F			
Description of property	<u></u>		or other basis restment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) E	Book va	alue ———
1a Land				795,535.			795	<u>, 535</u>
b Buildings				2,464,603.	690,302.	1	,774	,301
c Leasehold improvements				966,440.	247,919.			,521
d Equipment				63,560.	15,311.			,249
e Other		 		03,360,	10,011.		- 40	1447
Total. Add lines 1a through 1e (Column			100 Part V coli	mp (R) line 10c \	1		226	606
	r (u) must equa	air Oilli 9	SU, FAILA, COIL	пп (Б), ште тос)			, 336	
BAA					Sched	dule D (Fo	orm 99	iu) 2

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Schedule D (Form 990) 2016 The King's Academy	/, Inc. c/o Jan	ney Wood	58-2484442	Page 3
Part VII Investments - Other Securities.	Vas' on Form 000	Dort IV line 11h See Fe	arm 000 Dort V line	- 40
 Complete if the organization answered " (a) Description of security or category (including name of security) 	(b) Book value		Cost or end-of-year market va	
(1) Financial derivatives	(b) Book value	(C) Metriod of Valuation	Cost of end-of-year market va	
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)	-			
(E)				
(F) (G)		<u> </u>		
(H)		· · · · · · · · · · · · · · · · · · ·		
(I)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)		We sale the St		7. 1.35m
Part VIII Investments - Program Related.	Vaa' an Farm 000	Dort IV June 11e Coe Fe		
Complete if the organization answered ' (a) Description of investment	(b) Book value	(c) Method of valuation		
(1)	(b) Book value	(c) Mounda of Valuation C	703t of end-of-year mark	et value
(2)		 		
(3)				
(4)				
(5)				
(6)	<u> </u>	<u> </u>		
(7)		 		-
(8)	<u> </u>	 	-··-	
(10)		 	······································	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13).		19 St 201 Care	: 12,865;	6. ³²
Part X Other Assets. Complete if the organization answered	'Voo' on Form 000	Port IV line 11d See Fe	arm 000 Port V line	- 15
	escription	raitiv, line 11d. See 11	(b) Book	
(1)				
(2)				
(3)				
(4)				
(6)				
(7)		·—————————————————————————————————————		
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15)			
Part X Other Liabilities.				
Complete if the organization answered 'Yes' on	Form 990, Part IV, line	11e or 11f. See Form 990, Par	t X, line 25	
(a) Description of liability (1) Federal income taxes	(b) Book value			
(2)				
(3)				
(4)				* \$347 6.4
(5)				14 S. 10 1
(6) (7)				
(8)				
(9)				
(10)				
(11)	- 			~ % · · · · · ·
Total. (Column (b) must equal Form 990, Part X, column (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo		ancial statements that reports the org	anization's liability for uponts	* . *.
tax positions under FIN 48 (ASC 740) Check here if the text of the footnote			•	" □
BAA	TEEA3303 08/15/16		Schedule D (Form	1 990) 2016

Page 3

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

BAA

SCHEDULE E (Form 990 or 990-EZ)

Schools

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

OMB No 1545-0047 2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

	e King's Academy, Inc. c/o Jamey Wood 58-2484	142			
Par	rt le			, · · · ·	
				YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, othe governing instrument, or in a resolution of its governing body?	r 	. 1	x	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		. 2	X	38
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe If 'No,' please explain If you need more space, use Part II		3.8	X	
			- 8		
4	Does the organization maintain the following?		-		(2%), (, , *
·	a Records indicating the racial composition of the student body, faculty, and administrative staff?		غَنِيْدَا 4 a		š'
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?			 	
c	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		40		
	d Copies of all material used by the organization or on its behalf to solicit contributions?	• • •	4 d		├─
	If you answered 'No' to any of the above, please explain If you need more space, use Part II			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, ,
5	Does the organization discriminate by race in any way with respect to		- -		
	a Students' nghts or privileges?			<u> </u>	X
	b Admissions policies?				Х
	c Employment of faculty or administrative staff?				Х
	d Scholarships or other financial assistance?				Х
•	e Educational policies?		. 5 e	ļ	Х
1	f Use of facilities?		. 5f		X
,	g Athletic programs?		. 5 g		Х
ı	h Other extracurricular activities?		. 5 h	8.3	X
			-		
6	Does the organization receive any financial aid or assistance from a governmental agency?		-\ 6a		x
	b Has the organization's right to such aid ever been revoked or suspended?		6 b	 	X
7	If you answered 'Yes' on either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections	. •			
	4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If		. <u>K</u> .3	<u> Laka</u> .	ľ. * .

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The King's Academy, Inc. c/o Jamey Wood

Employer identification number

58-2484442

Part 1 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Cor	rected?
•	(a) Harrie of disquarries person	person and organization	(-,	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2	Enter the amount of tax incurred by the organization managers or disqualified persons during the year under		
	section 4958	► \$	
3	Enter the amount of tax, if any on line 2, above, reimbursed by the organization	▶ \$	

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

	(b) Relationship with organization	of loan from th	(d) Loan to or from the organization?		(e) Onginal principal amount	(f) Balance due	(g) In default?		by boa	Approved (i) Writt agreem mrittee?		tten nent?
	ł ł		To	From			Yes	No	Yes	No	Yes	No
(1) Betty Brannen	Mother of Director	Loan	Х		50,000.	31,712.		Х	х		Х	
(2) Wesley Cantrell	Father of Director	Loan	Х		360,000.	228,328.		Х	Х		Х	
(3)							l				-	
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
otal		<i>.</i>			▶\$	260,040.	¥,	<u>رِيْنِ ا</u>	ರೆ'ಜ್ಞ'	W.	:	ŵ!

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
_(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990 or 990-EZ) 2016

Schedule L (Form 990 or 990-EZ) 2016	The King's Academy.	Inc. c/r	o Jamev	Wood

58-2484442

Page 2

Part IV Business Transactions Involving Interested Persons.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization (c) Amount of transaction (d) Description of trans		(d) Description of transaction	(e) Shanng of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information
Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization		Employer Identification number
=	ny, Inc. c/o Jamey Wood	58-2484442
Pt VI, Line 2	Jamey & Allen Wood, both directors, are relate	ed by marriage.
Pt VI, Line 2	Tom & Kristi Brannen, both directors, are rela	ated by marriage.
Pt VI, Line 2	Wes & Jane Cartrell, both directors, are related	ted by marriage.
Pt VI, Line 2	David & Sandra Breaden, both directors, are re	elated by marriage.
Pt VI, Line 11b	A copy of Form 990 and its related attachement members of the governing board for their review	-
Pt VI, Line 12c	Directors are queried of known and possible corroutine meetings of the directors.	nflicts of interest at the
Pt VI, Line 15b	Directors review and approve compensation arrand or organizations that provide program serv	_
	Upon written request, governing documents, points is made available for public inspection during	
Pt VI, Line 19	at the organization's business office. Directors review and approve compensation arra	angements for individual
Pt VI, Line 15a	and or organizations that provide program serv	

TEEA4901 08/16/16