

Form 990-EZ

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax section 501(c), 527, or 4947(a)(1) of the leteral Tax

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

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

▶ Information about Form 990-EZ and its instructions is at www.irs gov/form990

Open to Public Inspection

		1	ar year, or tax year deginning 01/01 , 2016, and e		12/31	, 20	16
B	Check if ap		C Name of organization	1	D Employer id	lentification number	r
닑	Address of	4	INTELLECT PREPARATORY ACADEMY			1-3540054	
片	Name char	-	Number and street (or P O box, if mail is not delivered to street address) Room	n/suite	E Telephone n	umber	
Ħ	Initial return	m n/terminated	6040 Bradford Drive Unit A		75	7-610-4423	
Ö	Amended		City or town state or province, country, and ZiP or foreign postal code	2	F Group Exe	mption	
	Application	n pending	Suffolk, VA, 23435	7	Number 1	<u> </u>	
Ġ	Account	ing Method	☐ Cash	н с	heck 🕨 🗹	if the organization	ış not
	Website		//ipreparatoryacademy.org	re	equired to att	tach Schedule B	
<u>J</u>	Tax-exen	npt status (che	eck only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐	527 (1	orm 990, 99	0-EZ, or 990-PF)	
		organization					
L	Add line:	s 5b. 6c, and	7b to line 9 to determine gross receipts if gross receipts are \$200,000 or more,	or if total a	assets	-	
		umn (B) belov	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ		. ▶ g	<u> </u>	0
	art l		ue, Expenses, and Changes in Net Assets or Fund Balances (s				
		Check if	f the organization used Schedule O to respond to any question in this	s Part I			. 🗆
_	_1 _	Contribution	ons, gifts,_grants, and_similar_amounts received		1_		<u> </u>
	2	Program s	service revenue including government fees and contracts		2		0
	3	Membersh	nip dues and assessments		3		0
	4	Investmen	it income		. 4		
	5a	Gross amo	ount from sale of assets other than inventory 5a		0		
	b	Less: cost	t or other basis and sales expenses		0 - 3		
	C	Gain or (lo	ss) from sale of assets other than inventory (Subtract line 5b from line 5	a) .	. 5c		0
	6	Gaming ar	nd fundraising events		2 2 22		
	a	Gross inc	come from gaming (attach Schedule G if greater than		معرب المرابع ما يا أو در	İ	
9	;	\$15,000)	· · · · · · · · 6a		0 55		
Royonia	b	Gross inco	ome from fundraising events (not including \$ 0 of con	tributions	3	ł	
ã	2		raising events reported on line 1) (attach Schedule G if the				
_	·	sum of su-	ch gross income and contributions exceeds \$15,000)		0 5 -2		
	c	Less. dire	ct expenses from gaming and fundraising events . 6c		0 (2.23)		
	d	Net incom	ne or (loss) from gaming and fundraising events (add lines 6a and 6b	and sub	tract	}	
		line 6c)			· · 6d		0
	7a	Gross sale	es of inventory, less returns and allowances		o EE		
	b	Less cost	t of goods sold		0		
	С	Gross pro	fit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c		0
	8	Other reve	enue (describe in Schedule O)	•	. 8		0
	9	Total reve	enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9		0
	10	Grants an	d similar amounts paid (list in Schedule O)		10		0
	11	Benefits p	paid to or for members RECEIVED ,		11		0
4	g 12	Salaries, c	other compensation, and employee benefits.		12		0
Ì	13	Profession	nal fees and other payments to independe thoutractors 9 2018		. 13		0
900000	ያ 14	Occupano	cy, rent, utilities, and maintenance		14		0
Ü	آ کا 15 ک	Printing, p	publications, postage, and shipping		15		0
	16	Other exp	penses (describe in Schedule 0) OGDEN, UT		16		0
	17	Total exp	enses. Add lines 10 through 16		. ▶ 17		0
_	10		(deficit) for the year (Subtract line 17 from line 9)		. 18		0
3	ธุ์ 19		s or fund balances at beginning of year (from line 27, column (A)) (mu	st agree			
Ì	19 20		ear figure reported on prior year's return)		. 19		0
1	20	Other cha	inges in net assets or fund balances (explain in Schedule O).		20	1	0
Ž	21		s or fund balances at end of year. Combine lines 18 through 20 .		▶ 21	 	
F			ation Act Notice, see the separate instructions. Cal No 1	06421		Form 990-EZ	

Form _e 3	990-FZ (2	016]					Page 2
Par		Balance Sheets (see the instructions for					
		Check if the organization used Schedule	O to respond to an				<u> </u>
	•				A) Beginning of year	L,	(B) End of year
22	Cash	, savings, and investments .		· · · · <u>L</u>		22	0
23		and buildings		· <u> </u>		23	0
24	Othe	r assets (describe in Schedule O)	<u> </u>	<u> </u>		24	0
25						25	<u> </u>
26		I liabilities (describe in Schedule O)				26	<u>' ° o</u>
27		assets or fund balances (line 27 of column				27	0
Par	t III	Statement of Program Service Accomp	•		•	1	_
		Check if the organization used Schedule			Part III 🔠	,,,	Expenses quired for section
What	t is the	organization's primary exempt purpose?	See Schedule O, Stat	ement 2			(c)(3) and 501(c)(4)
Desc	cribe th	e organization's program service accomplis	shments for each of	its three largest pr	ogram services,	org	anizations; optional for
as m	neasure	d by expenses. In a clear and concise ma	anner, describe the			oth	ers)
perso	ons ber	nefited, and other relevant information for ea	ch program title			ļ	
28	Intelle	ct Preparatory Academy is a nonprofit school t	that was founded in 2	016 that serves a dyi	namic learning		
	comm	unity for students Pre-Kindergarten through G	rade 12. At Intellect P	reparatory Academy	, we believe in	1	
	(Conti						
	(Grant	s \$ 0) If this amount	includes foreign gra	nts, check here	. ▶ 🗆	28.	a 0
29			**********************			İ	
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						-	-
	(Grant	s\$) If this amount	includes foreign gra	nts, check here	<u> 🕨 🔲 </u>	29	a
30							
						ı	
	(Grant		includes foreign gra		<u> ▶ □</u>	30	a
31	Other	program services (describe in Schedule O)					}
	(Grant	s \$ 0) If this amount	includes foreign gra	nts, check here .	▶ 🗆	31	
		program service expenses (add lines 28a t	through 31a)	<u> </u>	. <u> </u>	32	- L
Par	rt IV	List of Officers, Directors, Trustees, and Key				instr	
		Check if the organization used Schedule	O to respond to ar		Part IV		<u> </u>
		6-2 Bloom	(b) Average hours per week	(c) Reportable compensation		yee (d	e) Estimated amount of
		(a) Name and title	devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans and deferred compensate		other compensation
-					 	-	
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				L			orm 990-EZ (2016)

Fолт у 990	0-EZ (2015)	AEC)	Pa	ige 3
Part '		irements	in the		
	instructions for Part V) Check if the organization used Schedule O to respond to any question				✓
				Yes	No
33 .	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," p detailed description of each activity in Schedule O		33		✓.
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a co- copy of the amended documents if they reflect a change to the organization's name. Otherwise, exp				
	change on Schedule O (see instructions)		34	\rightarrow	_✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from activities (such as those reported on lines 2, 6a, and 7a, among others)?	. [35a		✓
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Sci Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III.) notice,	35b 35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of ne during the year? If "Yes," complete applicable parts of Schedule N	-	36		<u> </u>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a	ol			
ь	Did the organization file Form 1120-POL for this year?		37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee any such loans made in a prior year and still outstanding at the end of the tax year covered by this retui		38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b		٠.٠		ำกำ
39	Section 501(c)(7) organizations. Enter:	-	,		, . ;
a	Initiation fees and capital contributions included on line 9				
b 40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year und	er er	1		
100	section 4911 ▶ 0 , section 4912 ▶ 0 ; section 4955 ▶	0			•
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section	on 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a parthat has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L.	rior year Part I	40b		1
c			, -		
	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	0			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	0	* 35		٠, ١
е	All organizations. At any time during the tax year, was the organization a party to a prohibited ta transaction? If "Yes," complete Form 8886-T	x shelter	40e		-
41	List the states with which a copy of this return is filed ▶ VA				
42a	The organization's books are in care of ▶ Christina Parker Telephone no	o. > 7	57-61	0-442	3
h	Located at ► 6040 Bradford Drive Unit A, Suffolk, VA 23435 ZIP + 4 I At any time during the calendar year, did the organization have an interest in or a signature or other author		234	35 Yes	No
Ü	a financial account in a foreign country (such as a bank account, securities account, or other financial account		42b	163	√
	If "Yes," enter the name of the foreign country. ►	lank and			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign E Financial Accounts (FBAR).	oank and	7.7 5		
С	At any time during the calendar year, did the organization maintain an office outside the United State If "Yes," enter the name of the foreign country:	s?	42c		√
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43		•	▶ □
		ــــــــــــــــــــــــــــــــــــــ		Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 completed instead of Form 990-EZ	must be	44a		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 completed instead of Form 990-EZ	must be	44b		
С	Did the organization receive any payments for indoor tanning services during the year?		44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," pi	ovide an	44d		
45a			45a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity with meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed in		2 - 7/4 2 - 7/4 2 - 7/4		7,7
	Form 990-EZ (see instructions)	· · ·	45b	1	✓

опи 99	0-EZ (20	0,''\$)						F	age 4
46		ne organization engage, directly o			behalf of or in	n oppositi	on	Yes	No
		ndidates for public office? If "Yes		, Part I	<u> </u>	<u> </u>	46	<u> </u>	<u>√</u>
art		Section 501(c)(3) organization		otiona 47, 40h and	EQ and som	مطة مغمات	. tobloo	for he	
		All section 501(c)(3) organizati 50 and 51.	ons must answer que	stions 47-49b and	oz, and com	piete tne	e tables	tor iin	es
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47	D.4 4	ha arangatian angga in labbin			_ :_ affa_4 d.			Yes	No
41		he organization engage in lobby ? If "Yes," complete Schedule C, I		section builth) electio	n in ellect at	inng the		<u>.</u>	؍ ا
40	-					• •	47		
48 40a		e organization a school as describe					48		Η,
49a	15 43/-	he organization make any transfeles," was the related organization a	s to an exempt non-cha	intable relateo organiz	ation?	•	. 49		⊢ ▼
b 50		plete this table for the organization			or thee office		49		<u></u>
30		loyees) who each received more t							
	СПР	byces, who each received more t		1	(d) Health b		2, GIIICI	TTOTIC	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions to benefit plans, ar	employee d deferred	(e) Estima	ated amo ompensa	
				<u> </u>	compens	ation			
None		••••••		1		ì			
					 				
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				1	1	1			
		I number of other employees paid		. • _ ()					
f 51	Com \$100	plete this table for the organizat 0,000 of compensation from the o	ion's five highest comp organization. If there is n	ensated independent one, enter "None"					e th
	Com \$100	plete this table for the organizat	ion's five highest comp organization. If there is n	ensated independent			receive		e th
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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt chantable trust. ► Attach to Form 990 or Form 990-EZ.

Open to Public

▶ Information about Schedula A (Form 990 or 990-EZ) and its instructions is at www.ira.gov/form990. Inspection Name of the organization Employer Identification Entellect Prena vatory Acad emy, Inc 81254 (XIS Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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). ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(ரிர்). hospital's name, city, and state 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 331/2% 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 1/2% 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.) 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 ☐ 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 (Ill 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) d 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 II, Type III, Type IIII functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . Provide the following information about the supported organization(s). (iii) Type of organization (described on lines 1-10 (v) Amount of monetary (i) Name of supported organization (I) EIN (bv) to the organization (vi) Amount of sted in your gove support (see other support (see above (see instructions)) document? instructions) Instructions (A) (8) (C) (D) (E)

Total

chodule	A (Form 930 or 990-EZ) 2016						Page 2
Part 1		tions Descr	ibed in Secti	ons 170(b)(1)	(A)(iv) and 1	70(b)(1)(A)(vi	i) - 166
	(Complete only if you checked the Part III. If the organization fails to	e box on line	5, /, or 8 of	Partior II the	ease comolei	i falled to qua	ality under
· cotic	on A. Public Support	quality unde	i the tests ha	teu below, pi	ease complet	(Craitin)	
	lar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	(4) 20 12	30, 20,0	(-7.3.4.4.	,		
	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	*	-	-/ '	-1	-	
	governmental unit or publicly supported organization) included on line_1 that exceeds_2%_of_the amount_	:	-:	/. 	- <u>-</u>	÷	
	shown on line 11, column (f)		. /				
6	Public support. Subtract line 5 from line 4						
	on B. Total Support	f=1.004D	1 0 2017	(-) 0014	(d) 2015	(e) 2016	(f) Total
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(0) 2015	(6) 2016	(i) i otai
7 8	Gross income from interest, dividends.		 /				
0	payments received on securities loans, rents, royalties and income from similar sources						
9	Net Income from unrelated business activities, whether or not the business is regularly carried on						
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	49- /-	18.	- (ii 72	4. 4.) -	
12	Gross receipts from related activities, etc.	. (see instructi	ions) .			12	
13	First five years. If the Form 990 is for the			d, third, fourth			
	organization, check this box and stop he			<u>·</u>	· · · · ·	•	· · <u></u>
	on C. Computation of Public Suppo			4 (5)		441	%
14	Public support percentage for 2016 (line					15	
15 16a	Public support percentage from 2015 Sci 33's% support test—2016. If the organ box and stop here. The organization qua	ization did no	t check the bo	x on line 13, a	nd line 14 is 33	'מ' or more,	check this
ъ	331/3% support test—2015. If the organithis box and stop here. The organization	ization did not I qualifies as a	check a box o publicly suppo	on line 13 or 16 orted organizat	Sa, and line 15 ion	is 331/2% or n	nore, check
	10%-facts-and-circumstances test—2 10% or more, and if the organization m Part VI how the organization meets the organization	eets the "facts "facts-and-cin	s-and-circumst cumstances" te	ances" test, clast. The organi	neck this box a zation qualifles	and stop here as as a publicly	. Explain in supported ► □
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization is Explain in Part VI how the organization is supported organization	ation meets the "fac	he "facts-and- ts-and-circum	circumstances stances" test.	" test, check t	this box and on qualifies as	stop hero. s a publicly
18	Private foundation. If the organization d	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	599

Schedule A (Form 990 or 990-EZ) 2016

instructions .

Schedu	la A (Form 990 or 990-EZ) 2016						Page 3
Part		tions Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked the						under Part II
- ·	If the organization falls to qualify	under the te	sts listed bel	ow, please co	omplete Part	<u>II.) / </u>	
	on A. Public Support	,		r	1	1 / 22	
	dar year (or fiscal year beginning in)	(8) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")		}	ļ		1/	
2	Gross receipts from admissions, merchandise			 ~	 	 	
•	sold or services performed, or facilities				/	il .	1
	furnished in any activity that is related to the organization's tax-exempt purpose		ĺ	į	/		
3	Gross receipts from activities that are not an			 	 	 	-
٠	unrelated trade or business under section 513	(i	ł	1 /	1	
4	Tax revenues levied for the	} 				· 	
•	organization's benefit and either paid	Ì	ļ	1		1	1
	to or expended on its behalf				1/		
5	The value of services or facilities				/	1	
	furnished by a governmental unit to the	}		1 /	'	1	
	organization without charge	L			ł	<u> </u>	
6	Total, Add lines 1 through 5			/		<u> </u>	
_7a	Amounts included on lines-1, 2, and 3-	l-	}— —	├ <i>─</i> /	∤	-	
	received from disqualified persons		<u> </u>		 		
þ	Amounts included on lines 2 and 3	1	l	1 /	1	Į	· I
	received from other than disqualified	1	ł .	1 /			1
	persons that exceed the greater of \$5,000 or 1 % of the amount on line 13 for the year		1	17	}		1
_	Add lines 7a and 7b			/	 	+	
8	Public support. (Subtract line 7c from	e 1, ≥ ±.	Special Contracts	// 開発:	LEAST TO L	· Zelande Trotte	
·	line 6.)	11.00	Secretary Local	in Serial	AND THE PARTY OF T	100 mg 1	
Secti	ion B. Total Support	Len . Thenak , and	/	-Kap37	Carrent and Street	· I TRACE GRANTE	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	1 - 47 - 57 -	/		1-7-2-3	1 15/-5:5-	
10a	Gross income from interest, dividends,		/				
	payments received on securities loans, rents,		/		1		1
	royalties and income from similar sources .				<u> </u>	<u> </u>	
b	Unrelated business taxable income (less		/				
	section 511 taxes) from businesses	[1 /	•	ſ		
	acquired after June 30, 1975		 /	ļ	ļ	 	
	Add lines 10a and 10b	ļ	! /		ļ		
11	Net income from unrelated business	1	1/				
	activities not included in line 10b, whether or not the business is regularly carried on	ľ ;	<u>-</u>	1	1	1	ľ
40	• •	 /	 	 	 	+	 -
12	Other income. Do not include gain or loss from the sale of capital assets	i /	1			i	1
	(Explain in Part VI.)	1 /	ļ				į.
13	Total support. (Add lines 9, 10c, 11,	 /-	 	 	 	 	
	and 12.)	1 /	ļ]			1
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third, fourth	n, or fifth tax v	ear as a sec	tion 501(c)(3)
	organization, check this box and stop he	~ .					· · · 🗡 🗖
Sect	on C. Computation of Public Support						_
16	Public support percentage for 2016 (line	8, column (f) d	ivided by line	13, column (f))		. 15	96
_16	Public support percentage from 2015 Sc	hedule A, Part	III, line 15 .	<u></u>	_ <u></u>	. 18	%
Sect	ion D. Computation of investment in						
17	Investment income percentage for 2016				mn (f)) .	17	%
18	Investment income percentage from 201	5 Schedule A	Part III, line 17			. [18]	%
19a		uzation did not	check the bo	x on the 14. a	notine 15 is r	nore than 331	a%, and line
	17 is not more than 331/x96, check this box						
ь	331/x% support tests - 2015. If the organization and the same state of the same stat						
	fine 18 is not more than 331/3%, check this/		_				_
20	Private foundation. If the organization d	ia not check a	DOX ON line 14	, 198, OF 19D,			
	,				Sc	hedule A (Form	990 or 990-EZ) 2016

Company of the state of the sta

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 and D. and complete Part IV) Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	on 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.	Yes No
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
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a
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.	3b
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.	3c
4a	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.	44 MEE 2 2
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.	4b
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)(8) purposes.	4c
6a	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 (l) 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
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?	########### 6b
6 6	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.	Sc Teles File Ro Elizabeth
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 77 if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	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
Þ	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.	Photo Habic cit 4 Post Hebra 223
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.	9c
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	10a
ь	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.)	総理 原本 (等)

Schedul	♦ A (Form 990 or 990+EZ) 2018		<u>F</u>	age D
Part	Supporting Organizations (continued)		 1	No.
	the state of the fall of the second of the state of the fall of the state of the st	-	Yes	No
11 .	Has the organization accepted a gift or contribution from any of the following persons? 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?	118		
h	A family member of a person described in (a) above?	11b	_	
c	The second secon	11c		
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	ر زنم	11.15	\$3in
	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	E	. 9.3	134
	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	-	- '2	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	<u> </u>	- 75.	17.
_		1 2000	i.kiu	52223
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	140.74	445 445 445 445 445 445 445 445 445 445	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	7	- 4	
	supervised, or controlled the supporting organization.	2		2::
Section	on 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	44.	111	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	5,	1.4	
	or management of the supporting organization was vested in the same persons that controlled or managed	<u> </u>	<u>, 139</u>	(a.+1
	the supported organization(s).	1	<u>l</u>	
Sect	on D. All Type III Supporting Organizations		12.5	·
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	j	136	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		300	4
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	P #4 67	11:22
			17	Gran .
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	33.	2	13.5
	the organization maintained a close end continuous working relationship with the supported organization(s).	2		لستا
3	By reason of the relationship described in (2), did the organization's supported organizations have a	15-6 14	100	12.7
•	significant voice in the organization's investment policies and in directing the use of the organization's		(문학호) 기념(항)	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	35.0	-	3,011
	supported organizations played in this regard.	3		<u> </u>
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	Instru	ction	s).
a	☐ The organization satisfied the Activities Test. Complete line 2 below			
ь	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see in	struc	ions).
			Yes	
2	Activities Test. Answer (a) and (b) below.	17.4 32	THE !	19579.1
8	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	35.0	12.0	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	31.7	兴建	問記
	how the organization was responsive to those supported organizations, and how the organization determined		7 . 25	
	that these activities constituted substantially eli of its activities.	28		
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	200	12,50	1341
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	40	"	[#]
	reasons for the organization's position that its supported organization(s) would have engaged in these	*		
	activities but for the organization's involvement.	2b		L
3	Parent of Supported Organizations. Answer (a) and (b) below.	***	17.04	
a	and the attended to the second of the attended to the attended		1 7.07	17:50
	trustees of each of the supported organizations? Provide details in Part VI.	3a	⊢ _	1000000
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	4-	تنند	逐点
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	ــــــــــــــــــــــــــــــــــــــ	

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	-age v
1 Check here if the organization satisfied the Integral Part Test as a qualifying) tru	st on Nov 20, 1970 (explain	in Part VI). See
• Instructions, All other Type III non-functionally integrated supporting organisection A - Adjusted Net Income	rizat	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		<u> </u>
2 Recovenes of prior-year distributions	2		
3 Other gross income (see instructions)	3	_	
4 Add lines 1 through 3.	4		
6 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)	в		
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)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	2	MARCH CONTRACTOR	
_a Average monthly value of secuntles	1a		
b Average monthly cash balances	16		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	10		
e Discount claimed for blockage or other factors (explain in detail in Part VI)	1913		The state of the s
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		Election and the second	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	11	THE PARTY OF THE P	
2 Enler 65% of line 1.	2	OC. SERING AVERSON	
3 Minimum asset amount for phor year (from Section B, line 8, Column A)	3	- Francisco de Alexandre de Alexandre	
4 Enter greater of line 2 or line 3.	4	EFERTAL CENTRAL SPECIES	
5 Income tax imposed in prior year	5	PER CONTRACTOR OF THE PARTY OF	
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-functional instructions)	јју іп	tegrated Type III supporting	organization (see

Schedule A (Form 990 or 990-EZ) 2018

-	Other distribution (describes Describes Of the Market Control of the Control of t	-					
<u>-</u>	Other distributions (describe in Part VI) See instructions.						
	Total annual distributions. Add lines 1 through 6				-	 	
8	Distributions to attentive supported organizations to which	1					
	(provide details in Part VI). See instructions.					 -	
9_	Distributable amount for 2016 from Section C, line 6					 	
10	Line 8 amount divided by Line 9 amount						-
_]	(i)	(ii) Underdistrib		0:-	(ili) stributable
Se	ection E - Distribution Allocations (see Instructions)	Excess	Distributions	Pre-201			unt for 2018
			~~~	111		71110	0310 101 2010
1_	Distributable amount for 2016 from Section C, line 6		in jan jan	となる		84 B + 511	
	Underdistributions, if any, for years prior to 2016		HATTER BUN'			<b>建設</b>	
-2	(reasonable cause required = explain in Part VI) See	<b>ċ-</b> −			- —	2:	
	Instructions.					1272	£ 45.81
3_	Excess distributions carryover, if any, to 2016:	<u> </u>	-1	TRÉET.		p.o.  1	Toglis ().
a	The second second second second		- Casallana	100000	1 1/4/27		remarkable to
b	Control of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the s		102 1211	<b>可以可能的</b>			
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4	Distributions for 2016 from			,::"		٤.	- 2,
	Section D, line 7. \$	١.	: \$ £ £	23.2.	ر اع: ر	差	7, 💯 📆
a	Applied to underdistributions of prior years	6.	一直 图 图 3 -			42500	SILL PROPERTY.
b	Applied to 2018 distributable amount	经会计	1 65 THE 1	THE SERVE	は行政権		
C	Remainder Subtract lines 4a and 4b from 4					经汇	
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	any. Subtract lines 3g and 4a from line 2. For result	1.5	12-18-325				<b>没有</b> 抗
	greater than zero, explain in Part VI. See instructions.	ř.,	e is an				-11-11016
6	Remaining underdistributions for 2016. Subtract lines 3h	ES de la		STUTTE COLUMN			
•	and 4b from line 1. For result greater than zero, explain in	150	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1200	120	1	
	Part VI. See instructions		1		7-5	1	
7	Excess distributions carryover to 2017. Add lines 3j	j			144	遥.	1
-	and 4c.			- 12.5			
8	Breakdown of line 7:	ŧС;!,	MATERIALI.	1 1945 1951	1.67-102	a habit	:::: <b>2011</b> 1116
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<del>-</del>	Excess from 2013 .	::-	12.618.512.22	12400727			/ 1= *Unit#84%
Ē	Excess from 2014	<del>                                     </del>	. 322	335-5		6-127	रम् प्रदेशीय
<u>d</u>	Excess from 2015	<del> </del>	* * * * * * * * * * * * * * * * * * *	1117 1		+	1,1,2,1
-	Excess from 2016	<u> </u>		10-25-2			3.1247878
		L^**	errestister (				90 or 890-EZ) 201

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

3 Administrative expenses paid to accomplish exempt purposes of supported organizations

1 - Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported

organizations, in excess of income from activity

5 Qualified set-aside amounts (prior IRS approval required)

4 Amounts paid to acquire exempt-use assets

Schodute A (Form 990 or 990-EZ) 2018

Section D - Distributions

ragues A (Fe	am 990 or 990-E2) 2017 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.)	٠ <b>٤</b>
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### 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.

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

20**16** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
INTELLECT PREPARATORY ACADEMY

Employer identification number

81-3540054

t			YES	h
	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	1	
	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	1	
	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	· · ·	
	The organization has a non-racially discrimination policy that has been disclosed to the public		,	3
		, ,		
				*
	Does the organization maintain the following?	요 :		
)	Records indicating the racial composition of the student body, faculty, and administrative staff?  Records documenting that scholarships and other financial assistance are awarded on a racially	4a	1	
:	nondiscriminatory basis?  Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	4b		+
	with student admissions, programs, and scholarships?	4c		1
l	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	/	+
	ir you answered No to any or the above, please explain. If you need more space, use Part II	3."		1
				. .
3	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		-
b	Admissions policies?	5b	_	1
C	Employment of faculty or administrative staff?	5c		+
d	Scholarships or other financial assistance?	5d		$\downarrow$
9	Educational policies?	5e		+
f	Use of facilities?	5f	-	+
9	Athletic programs?	5g		$\frac{1}{1}$
h	Other extracurricular activities?	5h	<u> </u>	4
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	2 ⁽¹⁾	4	
			- 1 - 1 - 1	3 1
a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	=   <del>*</del> ~= ;	4
	Has the organization's right to such aid ever been revoked or suspended?	6b		1
	If you answered "Yes" on either line 6a or line 6b, explain on Part II	رون المين		6
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II.	7		丩.

Part II	Form 990 or 990-EZ) 2016  Supplemental Information Provide the explanations required by Part Lilines 3, 4d, 5h, 6h, and 7, as	Page 2
rartii	Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions)	
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## SGHEDULE 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.

2016

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Total Total De Tibe	inspection		
Name of the organization	Employer identification number		
INTELLECT PREPARATORY ACADEMY	81-3540054		
Form 990-EZ, Part IV - Patricia Parker is the President of the organization and Christina Parker is the Vice President.			
Farm DOD CT Cond V Long CO. NIA			
Form 990-EZ, Part V, Line 42a - N/A			
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