

### **Entry 1 School Information**

Created: 07/29/2016 Last updated: 07/31/2016

Please be advised that you will need to complete this cover page (including signatures) <u>before</u> all of the other tasks assigned to you by your authorizer are visible on your task page. While completing this task, please ensure that you select the correct authorizer or you may not be assigned the correct tasks.

### Page 1

#### a. SCHOOL NAME AND BEDS#

(Select name from the drop down menu)

INTERNATIONAL LEADERSHIP CS (NYC CHANCELLOR) 321000860904

#### **b. CHARTER AUTHORIZER**

(For technical reasons, please re-select authorizer name from the drop down menu).

NYCDOE-Authorized Charter School

#### c. DISTRICT / CSD OF LOCATION

NYC CSD 10

#### d1. SCHOOL INFORMATION

PRIMARY ADDRESS	PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS
3030 Riverdale Avenue Bronx, New York 10463	718-562-2300	718-562-2235	elopez@ilchs.org

#### d2. PHONE CONTACT NUMBER FOR AFTER HOURS EMERGENCIES

Contact Name	Elaine Ruiz Lopez

Title	CEO
Emergency Phone Number (###-####)	(No response)

### e. SCHOOL WEB ADDRESS (URL)

www.ilchs.org

#### f. DATE OF INITIAL CHARTER

01/2006

### g. DATE FIRST OPENED FOR INSTRUCTION

09/2016

# h1. APPROVED SCHOOL MISSION (Regents, NYCDOE, and Buffalo BOE authorized schools only)

MISSION STATEMENT

(No response)

# h2. KEY DESIGN ELEMENTS (Regents, NYCDOE, and Buffalo BOE authorized schools only)

KEY DESIGN ELEMENTS (Brief description)

Variable 1	Academically Rigorous College Prep
Variable 2	Accelerated Instruction in 60/90 Minute Blocks
Variable 3	Extended Day
Variable 4	High Academic and Behavioral Expections
Variable 5	(No response)
Variable 6	(No response)
Variable 7	(No response)
Variable 8	(No response)
Variable 9	(No response)

Variable 10 (No response)	
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### i. TOTAL ENROLLMENT ON JUNE 30, 2016

380

### j. GRADES SERVED IN SCHOOL YEAR 2015-16

Check all that apply

Grades Served 9, 10, 11, 12

# **k1. DOES THE SCHOOL CONTRACT WITH A CHARTER OR EDUCATIONAL MANAGEMENT ORGANIZATION?**

No

### Page 2

#### **11. FACILITIES**

Does the school maintain or operate multiple sites?

No, just one site.

### 12. SCHOOL SITES

Please list the sites where the school will operate for the upcoming school year.

	Physical Address	Phone Number	District/CSD	Grades Served at Site	School at Full Capacity at Site	Facilities Agreement
Site 1 (same as primary site)	3030 Riverdale Ave	718-562- 2300	CSD 10	9-12	Yes	Own
Site 2						
Site 3						

### 12a. Please provide the contact information for Site 1.

	Name	Work Phone	Alternate Phone	Email Address
School Leader	Dr. Elaine Ruiz Lopez	917-587-6407	718-562-2300	elopez@ilchs.org
Operational Leader				
Compliance Contact				
Complaint Contact				

### m1. Is the school or are the school sites co-located?

No

### Page 3

n1. Were there any revisions to the school's charter during the 2015-16 school year? (Please include approved or pending material and non-material charter revisions).

Yes

### **n2. Summary of Charter Revisions**

	Category (Select Best Description)	Specific Revision (150 word limit)	Date Approved by BOT (if applicable)	Date Approved by Authorizer (if applicable)
1	Change in School Name	During Renewal we requested the addition of the word "High" in our school name to read International Leadership Charter High School	Spring of 2014	NA
2	Change in Maximum	During our 2015 Renewal our increase in enrollment was	Spring of 2015	June 2015

	Approved Enrollment	approved from 352 to 440 at full growth.	
3			
4			
5			

### o. Name and Position of Individual(s) Who Completed the 2015-16 Annual Report.

Elaine Ruiz Lopez

p. Our signatures below attest that all of the information contained herein is truthful and accurate and that this charter school is in compliance with all aspects of its charter, and with all pertinent Federal, State, and local laws, regulations, and rules. We understand that if any information in any part of this report is found to have been deliberately misrepresented, that will constitute grounds for the revocation of our charter. Check YES if you agree and then use the mouse on your PC or the stylist on your mobile device to sign your name).

### **Responses Selected:**

Yes

### Signature, Head of Charter School

Elini And Sport

### **Signature, President of the Board of Trustees**

#### Date

2016/07/31

### Thank you.



Last updated: 07/30/2016

### Page 1

### 1. NEW YORK STATE REPORT CARD

Provide a direct URL or web link to the most recent New York State School Report Card for the charter school (See https://reportcards.nysed.gov/).

(Charter schools completing year one will not yet have a School Report Card or link to one. Please type "URL is not available" in the space provided).

https://data.nysed.gov/reportcard.php?year=2015&instid=800000059326



Created: 07/31/2016 Last updated: 08/01/2016

### Page 1

#### PROGRESS TOWARD CHARTER GOALS

The following tables reflect formatting in the online portal required for Board of Regents-authorized charter schools and NYCDOE-authorized charter schools only. Schools should list Progress Toward Charter Goals by August 1, 2016. If the goals are based on student performance data that the school will not have access to before August 1, 2016 (e.g., the NYS Assessment results), explain this in the "2015-2016 Progress Toward Attainment of Goal" column. The information can be updated when available. Please complete and submit no later than November 1, 2016.

#### 1. ACADEMIC STUDENT PERFORMANCE GOALS

### **2015-16 Progress Toward Attainment of Academic Goals**

	Academic Student Performance Goal	Measure Used to Evaluate Progress Toward Attainment of Goal	Goal - Met, Partially Met, or Not Met	If Not Met, Describe Efforts School Will Take
Academic Goal 1	ILCHS shall make AYP in English as measured by 80% or greater of 2012 cohort passing rate on the New York State English Regents Exam.	NYS Regents Comprehensive English Exams	Met 95%	
Academic Goal 2	ILCHS shall make AYP in Mathematics by 75% or > of 2012 cohort passing rate on the New York State Regents exams in Integrated Algebra.	NYS Regents Exams Integrated Algebra	Met 87%	
	75% or > of			

Academic Goal 3	students who sit annually for NYS Regents Exam in Living Environment will pass this assessment.	NYS Regents Exam in Living Environment	Met 80%
Academic Goal 4	ILCHS shall outperform neighboring community high schools in History as measured by the NYS Regents Exams.	NYS Regents Exams  US History & Government  Global History & Geography	Met 93% Met 85%
Academic Goal 5	ABSOLUTE MEASURE  75% of 2012 cohort continuously enrolled will graduate within four years.	Percentage of Students graduating from 2012 Cohort who were continuously enrolled.	Met 93%
Academic Goal 6	ABSOLUTE MEASURE  Student retention rates will exceed those of neighboring community district high schools as measured by data collected on daily attendance.	Daily Average Attendance on ATS	Met 95%
Academic Goal 7	75% of students who sit annually for the NYS Regents exams will have a 20% higher pass rate as compared to the high schools in the community district in which the charter school is located.	NYS Report Cards School Based Regent Results	Met 20% Higher Pass Rate
Academic Goal 8	Greater than 80% of seniors will graduate college ready and receive	As measured by the college acceptance letters	Met 90% of students

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### 2. Do have more academic goals to add?

No

### 3. Do have more academic goals to add?

(No response)

## Page 2

### 4. ORGANIZATIONAL GOALS

### **2015-16 Progress Toward Attainment of Organizational Goals**

	Organizational Goal	Measure Used to Evaluate Progress	Goal - Met, Partially Met, or Not Met	If Not Met, Describe Efforts School Will Take
Org Goal 1	To complete the construction of a 28,000 brand new school building with Café, Science labs, library, comfortable learning spaces and an area for recreation.	Move in ready space and relocation by January 2016 with all necessary DOB permits.	Met	
Org Goal 2	To furnish 20 learning spaces, several offices, a library and two science labs.	Demonstrated evidence of Teaching and Learning taking place throughout the building.	Met	
Org Goal 3	To establish an Adolescent Health and Wellness Clinic to treat and address student	Documented decrease of students in crisis and need for	Partially Met. Pending State Office of Health approval of official collaboration with Urban Health	

	health issues to improve learning and student outcomes.	hospitalization and long term absences.	medical organization as an intermediary for our school based health clinic.	
Org Goal 4				
Org Goal 5				

### 5. Do you have more organizational goals to add?

No

### **6. FINANCIAL GOALS**

### **2015-16 Progress Toward Attainment of Financial Goals**

	Financial Goals	Measure Used to Evaluate Progress	Goal - Met, Partially Met, or Not Met	If Not Met, Describe Efforts School Will Take
Financial Goal 1	To maintain and sustain fiscal viability post construction of our new school building.	Maintaining a positive cash flow and reducing the need to borrow from line of credit.	Partially Met	
Financial Goal 2	To replenish the cash savings and reserve that was maintained previous to expenditures toward facilities expansion by June 2017.	Bank Statements that reflect a savings of at least \$500,000 by June 2017.	Pending	
Financial Goal 3	To increase the Days of Cash on Hand post 6/30/17 to 1.0.	Debt to Income Ratio as required by the covenants as outlined by the Trustees on Bond.	Partially Met.	
Financial Goal 4	To reduce the number of unpaid invoices at least by 95% by Fiscal Year ending 2017.	As measured by Aging Reports and Accounts Payable.	Pending.	

Financial Goal 5				
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### **Entry 4 Expenditures per Child**

Last updated: 07/31/2016

### Page 1

#### **Financial Information**

This information is required of ALL charter schools. Provide the following measures of fiscal performance of the charter school in Appendix B (Total Expenditures and Administrative Expenditures Per Child):

### 1. Total Expenditures Per Child

To calculate **'Total Expenditures per Child'** take <u>total expenditures</u> (from the unaudited 2015-16 Schedule of Functional Expenses) and <u>divide by</u> the year end FTE student enrollment. (Integers Only. No dollar signs or commas).

Note: The information on the Schedule of Functional Expenses on pages 41-43 of the Audit Guide can help schools locate the amounts to use in the two per pupil calculations: <a href="http://www.p12.nysed.gov/psc/AuditGuide.html">http://www.p12.nysed.gov/psc/AuditGuide.html</a>

Line 1: Total Expenditures	5730907
Line 2: Year End FTE student enrollment	377
Line 3: Divide Line 1 by Line 2	15195

### 2. Administrative Expenditures per Child

To calculate 'Administrative Expenditures per Child' To calculate "Administrative Expenditures per Child" first add together the following:

- 1. Take the <u>relevant portion</u> from the 'personnel services cost' <u>row</u> and the 'management and general' <u>column</u> (from the unaudited 2015-16 Schedule of Functional Expenses)
- 2. Any contracted administrative/management fee paid to other organizations or corporations
- 3. Take the total from above and <u>divide</u> it by the year-end FTE enrollment. The relevant portion that must be included in this calculation is defined as follows:

Administrative Expenditures: Administration and management of the charter school includes the activities and personnel of the offices of the chief school officer, the finance or business offices, school operations personnel, data management and reporting, human resources, technology, etc. It also includes those administrative and management services provided by other organizations or corporations on behalf of the charter school for which the charter school pays a fee or other compensation. Do not include the FTE of personnel whose role is to directly support the instructional program.

#### Notes:

The information on the Schedule of Functional Expenses on pages 41-43 of the Audit Guide can help schools locate the amounts to use in the two per pupil calculations: <a href="http://www.p12.nysed.gov/psc/AuditGuide.html">http://www.p12.nysed.gov/psc/AuditGuide.html</a>.

Employee benefit costs or expenditures should not be reported in the above calculations.

Line 1: Relevant Personnel Services Cost (Row)	181619
Line 2: Management and General Cost (Column)	5730908
Line 3: Sum of Line 1 and Line 2	5912527
Line 5: Divide Line 3 by the Year End FTE student enrollment	15677

### Thank you.



## **Entry 6b Additional Financial Docs**

Last updated: 07/31/2016

The additional items listed below should be uploaded <u>if applicable</u>. Please explain the reason(s) if the items are not included. Examples might include: a written management letter was not issued; the school did not expend federal funds in excess of the Single Audit Threshold of \$750,000; the corrective action plan will be submitted by the following date (should be no later than 30 days from the submission of the report); etc.

### Page 1

### 1. Management Letter

https://nysed-cso-reports.fluidreview.com/media/assets/survey-uploads/84010/6279452-8mMlunnVv3/ILCHS%20990-%206-30-15%20-%20final.pdf

### **Explanation for not uploading the Management Letter.**

written management letter not issued.

#### 2. Form 990

https://nysed-cso-reports.fluidreview.com/media/assets/survey-uploads/84010/6279452-FINDqRIBTE/ILCHS%20990-%206-30-15%20-%20final.pdf

### Explanation for not uploading the Form 990.

(No response)

### 3. Federal Single Audit

Note: A copy of the Federal Single Audit must be filed with the Federal Audit Clearinghouse. Please refer to OMB Uniform Guidelines for the federal filing requirements.

(No response)

### **Explanation for not uploading the Federal Single Audit.**

Not applicable school is not part of a federal audit and did not spend more than the threshold amount.

### 4. CSP Agreed Upon Procedure Report

(No response)

### **Explanation for not uploading the procedure report.**

Not Applicable.

### 5. Evidence of Required Escrow Account

https://nysed-cso-reports.fluidreview.com/media/assets/survey-uploads/84010/6279452-pN6H0Nalce/TD%20Bank.pdf

### **Explanation for not uploading the Escrow evidence.**

(No response)

#### 6. Corrective Action Plan

A **Corrective Action Plan** for Audit Findings and Management Letter Recommendations, which must include:

- a. The person responsible
- b. The date action was taken, or will be taken
- c. Description of the action taken
- d. Evidence of implementation (if available)

(No response)

### Explanation for not uploading the Corrective Action Plan.

NA

### KOCH GROUP & CO., LLP 333 SEVENTH AVENUE, FLOOR 8 NEW YORK, NY 10001-5118 (212) 631-0700

May 17, 2016

INTERNATIONAL LEADERSHIP CHARTER SCHOOL 322 WEST 231ST BRONX, NY 10463

Dear Client:

Your 2014 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Enclosed is your New York Annual Financial Report for Charitable Organizations. The original should be signed on page one. Two distinct officials of the organization must sign. No fee is payable with the filing of this report. Mail the report on or before November 16, 2015 to:

NYS OFFICE OF THE ATTORNEY GENERAL CHARITIES BUREAU REGISTRATION SECTION 120 BROADWAY NEW YORK, NY 10271

Please be sure to call us if you have any questions.

Sincerely,

MIAOLING LIN

### Form **990**

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public.

2014

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2014 calendar year, or tax year beginning 2014, and ending 7/01 , 2015 В D Employer identification number Check if applicable: INTERNATIONAL LEADERSHIP CHARTER SCHOOL Address change 74-3161540 322 WEST 231ST Name change BRONX, NY 10463 Initial return (718) 562-2300 Final return/terminated Amended return G Gross receipts \$ 4,700,743. Application pending **F** Name and address of principal officer: H(a) Is this a group return for subordinates? DR. ELAINE RUIZ LOPEZ Yes **H(b)** Are all subordinates included? If 'No,' attach a list. (see instructions) Yes SAME AS C ABOVE Tax-exempt status X 501(c)(3) 501(c) ( ) < (insert no.) 4947(a)(1) or 527 Website: ► WWW.ILCHS.ORG **H(c)** Group exemption number ▶ X Corporation Other ► L Year of formation: 2006 Form of organization: Association M State of legal domicile: NY Part I Summary Briefly describe the organization's mission or most significant activities: THE INTERNATIONAL LEADERSHIP CHARTER SCHOOL ("THE SCHOOL"), A 501(C)(3) TAX-EXEMPT ORGANIZATION, IS A PUBLIC CHARTER Governance HIGH SCHOOL LOCATED IN BRONX, NEW YORK. THE SCHOOL OPENED IN JANUARY 2006 AND CURRENTLY OPERATES CLASSES FOR NINTH TO TWELVE GRADE. Check this box ► | if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) ..... 3 6 Number of independent voting members of the governing body (Part VI, line 1b) ... 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . . . 5 41 Total number of volunteers (estimate if necessary)..... 6 20 7a Total unrelated business revenue from Part VIII, column (C), line 12 ... 0. **b** Net unrelated business taxable income from Form 990-T, line 34..... 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 268,173. 227,654. 4,165,448. 4,446,419. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)...... 1,780. 7,436. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 19,234. 10,872. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 4,446,273 4,700,743. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4) ..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... 1,839,762 2,036,466. **16a** Professional fundraising fees (Part IX, column (A), line 11e)..... **b** Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 17 2,850,349 2,588,618. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)...... 4,690,111. 4,625,084. Revenue less expenses. Subtract line 18 from line 12..... -243,838.75,659. **Beginning of Current Year** End of Year Total assets (Part X, line 16)..... 20,121,333 20,362,758 21 Total liabilities (Part X, line 26)..... 18,867,647 19,029,364. Net assets or fund balances. Subtract line 21 from line 20..... 22 1,253,686. 1,333,394 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Here CEO DR. ELAINE RUIZ LOPEZ Type or print name and title Print/Type preparer's name Preparer's signature Check MIAOLING LIN MIAOLING LIN self-employed P00431817 **Paid** Preparer ► KOCH GROUP & CO., LLP **Use Only** Firm's EIN ► 13-4195975 Firm's address 333 SEVENTH AVENUE, FLOOR 8

NEW YORK, NY 10001-5118

May the IRS discuss this return with the preparer shown above? (see instructions)

Nο

(212) 631-0700

Yes

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
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.			
	<b>a</b> Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .	11 a	Х	
	<b>b</b> Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>	11 b		Х
	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		
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
	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>b</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		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	Х	V
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	<b>b</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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	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		X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	<b>b</b> If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

## Form 990 (2014) INTERNATIONAL LEADERSHIP CHARTER SCHOOL Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Х
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		Χ
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
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	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes', complete Schedule L, Part II.</i>	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	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):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA Form **990** (2014)

## Form 990 (2014) INTERNATIONAL LEADERSHIP CHARTER SCHOOL Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
				Yes	No	
1 a	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	8				
ı	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0				
•	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1 c		Х	
2 8	<b>a</b> 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	41				
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2 b	Χ		
•	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)					
3 :	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a		Х	
	<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	ļ.	3 b			
		-				
	<ul> <li>a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If 'Yes,' enter the name of the foreign country: ►</li> </ul>		4 a		X	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)					
<b>.</b>	<b>a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	1	E o		Х	
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	L	5 a 5 b		X	
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	l-	5 c		Λ	
	-	F	30			
6 8	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6 a		Х	
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6 b			
	Organizations that may receive deductible contributions under section 170(c).					
i	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7 a		Х	
ı	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	[	7 b			
(	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7 c		Х	
(	d If 'Yes,' indicate the number of Forms 8282 filed during the year					
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7 e		X	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7 g			
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7 h			
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8			
9	Sponsoring organizations maintaining donor advised funds.		3			
	a Did the sponsoring organization make any taxable distributions under section 4966?		9 a			
	<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	-	9 b			
	Section 501(c)(7) organizations. Enter:					
	a Initiation fees and capital contributions included on Part VIII, line 12					
	<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <b>10 b</b>					
11	Section 501(c)(12) organizations. Enter:					
ä	a Gross income from members or shareholders					
ı	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)					
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a			
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	j				
	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	a Is the organization licensed to issue qualified health plans in more than one state?	[	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.					
ı	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
	c Enter the amount of reserves on hand				37	
	a Did the organization receive any payments for indoor tanning services during the tax year?	-	14a		Х	
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		14b	000	(2014)	
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Form 990 (2014) INTERNATIONAL LEADERSHIP CHARTER SCHOOL 74-3161540 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI...... Section A. Governing Body and Management Yes Nο 1 a Enter the number of voting members of the governing body at the end of the tax year......
If there are material differences in voting rights among members 6 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ...... 2 Χ 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 Χ Did the organization make any significant changes to its governing documents Χ since the prior Form 990 was filed?.... 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? ..... 5 X Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 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 Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Χ 12 c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 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? Χ a The organization's CEO, Executive Director, or top management official..... 15 a **b** Other officers or key employees of the organization..... 15 b Χ If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Χ taxable entity during the year?..... 16 a 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 16b organization's exempt status with respect to such arrangements?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records:

BRONX NY 10463 (718) 562-2300

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DR.ELAINE RUIZ LOPEZ 322 WEST 231ST

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

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

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

- 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 nor any related organization compensated any current officer, director, or trustee. (C) Position (do not check more than one box, unless person is both an officer and a (A) (B) (E) (F) Name and Title Reportable compensation from Reportable compensation from Estimated amount of other Average hours director/trustee) per week (list any hours for compensation from the organization the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) Officer Institutional employee ndividual trustee tighest compensated omor emplayee and related related organizations organiza tions i trustos below dotted line) (1) JOHN-PAUL GONZALEZ 2.5 CHAIRMAN Χ Χ 0 0 0. 0 (2) DR. ELAINE RUIZ LOPEZ 60 **CEO** 0 Χ Χ 166,925 0. 15,500. (3) LUPITA SAMUELS 2.5 **SECRETARY** 0 Χ Χ 0 0. 0 ANA KOESSLER 2.5 **TREASURER** Χ Χ 0 0 0 0. (5) ELISSA RAMOS 2.5 Χ **MEMBER** 0 0 0 0. DOREEN BERMUDEZ 2.5 (6) PARENT REP 0 Χ 0 0 0. (7) (8) (9) (10)(11)(12) (13)(14)

**BAA** TEEA0107L 02/27/14 Form **990** (2014)

, ,	(B)			· (0	<del>)</del>	· ·		•		•	· · ·
(A) Name and title	Average hours per week	offic	, unle cer ar	theck ess pe nd a o	erson direct	e than one is both an or/trustee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations		(F) Estima amount o compens	ited f other
	(list any hours for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officor	key emplayee	Former Highest compensated employee	the organization (W-2/1099-MISC)	relatéd organizations (W-2/1099-MISC)		from i organiz: and rel organiza	the ation ated
(15)											
<u>(16)</u>											
(17)		=									
(18)											
<u>(19)</u>											
<u>(20)</u>											
(21)											
(22)											
(23)		•									
<u>(24)</u>		-									
(25)		-									
1 b Sub-total						<b>&gt;</b>	166,925.	0		15	,500.
c Total from continuation sheets to Part VII, Section	on A					▶	0.	0			0.
d Total (add lines 1b and 1c)							166, 925. more than \$100,00	0 00 of reportable co	-		,500.
Tom the organization 1										Ye	s No
3 Did the organization list any <b>former</b> officer, direction line 1a? If 'Yes,' complete Schedule J for such	tor, or tru h individu	stee, al	key	em	ploy	ee, or h	ighest compensat	ed employee		3	X
<b>4</b> For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	50,00	00?	If 'Y	′es'	complet	e Schedule J for			4 \ \	ζ
5 Did any person listed on line 1a receive or accrume for services rendered to the organization? If 'Yes										5	Х
Section B. Independent Contractors	4 1					1 11		¢100.000 -f			
Complete this table for your five highest compensor compensation from the organization. Report comper									ear.		
(A) Name and business address  (B) Description of services							( <b>C)</b> npensa				
PROCIDA CONSTRUCTION CORP OF NY 456 EAST 1						IY 1045			4	•	,013.
PERKINS EASTMAN ARCHITECT 115 5TH AVENUE NEW YORK, NY 10003 ARCHITECT					DDD 0			<u>,201.</u>			
JONES LANG LASALLE AMERICAS, INC 330 MADIS	ON AVEN	UE N	IEW	YUR	w,	MI 100	PROJECT MGMT	relo		182	,761.
2 Total number of independent contractors (including I		ited t	o the	ose	liste	d above)	who received more	e than			
\$100,000 of compensation from the organization	<b>-</b> 3										

(A) (B) (C) Total revenue Related or exempt function revenue revenue	(D)  Revenue excluded from tax under sections
revenue	512-514
Ta Federated campaigns	
Business Code  2 a PER PUPIL FUNDING  b  c  d  e  f All other program service revenue  g Total. Add lines 2a-2f	
3 Investment income (including dividends, interest and	
other similar amounts) 7,436.  4 Income from investment of tax-exempt bond proceeds .   5 Royalties	7,436.
(i) Real (ii) Personal  6 a Gross rents	
assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)	
8 a Gross income from fundraising events (not including. \$ of contributions reported on line 1c).  See Part IV, line 18	
b Less: direct expensesb  c Net income or (loss) from fundraising events	
9 a Gross income from gaming activities. See Part IV, line 19 a	
b Less: direct expenses b  c Net income or (loss) from gaming activities  ▶	
10 a Gross sales of inventory, less returns and allowances	
Miscellaneous Revenue Business Code	
11a SENIOR DUES       900099       17,450.         b MISCELLANEOUS REVENUE       900099       1,784.         c	17,450. 1,784.
d All other revenue	
e Total. Add lines 11a-11d	26,670.

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check it Schedule O contains a renot include amounts reported on lines 7b, 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	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	166,926.	116,848.	46,739.	3,339.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,172,764.	862,095.	300,679.	9,990.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,1,2,701.	002,033.	300,013.	3,330.
9	Other employee benefits	137,013.	100,118.	35,531.	1,364.
10	Payroll taxes	559,763.	409,032.	145,162.	5,569.
11	, , ,				
	Management				
	Legal	42,807.		42,807.	
	Accounting	44,500.		44,500.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
y	(A) amount, list line 11g expenses on Schedule 0)	114,530.	66,000.	48,530.	
12	Advertising and promotion	38,935.	38,935.		
13	Office expenses	41,892.	41,892.		
14	Information technology				
15	Royalties				
16	Occupancy	711,550.	519,946.	184,524.	7,080.
17	Travel	18,892.	13,805.	4,899.	188.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	473,665.		473,665.	
21	Payments to affiliates				
22	· · · · · · · · · · · · · · · · · · ·	51,213.		51,213.	
	Insurance	82,586.	60,347.	21,417.	822.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
ā	UTILITIES	161,718.	118,171.	41,938.	1,609.
ŀ	OURRICULUM AND TEXTBOOK	157,888.	157,888.		
	STUDENT MEALS	145,114.	145,114.		
	OTHER_EXPENSES	135,706.	62,571.	73,135.	
	All other expenses	367,622.	212,544.	152,716.	2,362.
25	Total functional expenses. Add lines 1 through 24e	4,625,084.	2,925,306.	1,667,455.	32,323.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► if following SOP 98-2 (ASC 958-720)				

### Part X Balance Sheet

		Check if Schedule O contains a response or note to	any line	e in this Part X			
					<b>(A)</b> Beginning of year		( <b>B</b> ) End of year
	1	Cash — non-interest-bearing			71,572.	1	71,307.
	2	Savings and temporary cash investments	682,734.	2	30,695.		
	3	Pledges and grants receivable, net	,	3	,		
	4	Accounts receivable, net			92,406.	4	40,224.
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated er Part II of Schedule L	·	5	,		
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)( employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete		6			
2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
4	9	Prepaid expenses and deferred charges			934.	9	64,034.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	2 744 209			
	b	Less: accumulated depreciation.	10b	152,395.	2,606,702.	10 c	2,591,814.
	11	Investments – publicly traded securities			2,000,702.	11	2,001,014.
	12	Investments – other securities. See Part IV, line 11		<u> </u>		12	
	13	Investments – program-related. See Part IV, line 11.				13	
	14	Intangible assets		14	604,060.		
	15	Other assets. See Part IV, line 11.	16,666,985.	15	16,960,624.		
	16	Total assets. Add lines 1 through 15 (must equal line		<u> </u>	20,121,333.	16	20,362,758.
	17	Accounts payable and accrued expenses	1,017,647.	17	529,200.		
	18	Grants payable		2,02.,01.,	18	02372001	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities	17,750,000.	20	17,750,000.		
o o	21	Escrow or custodial account liability. Complete Part IV	,	21	,		
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated th	<u> </u>		23		
	24	Unsecured notes and loans payable to unrelated third		<u> </u>	100,000.	24	100,000.
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Comp	100,000.	25	650,164.		
	26	Total liabilities. Add lines 17 through 25			18,867,647.	26	19,029,364.
8		Organizations that follow SFAS 117 (ASC 958), check hellines 27 through 29, and lines 33 and 34.	X and complete	, ,		,	
Ę.	27	Unrestricted net assets			1,253,686.	27	1,333,394.
₩.	28	Temporarily restricted net assets				28	
B	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.					
0	30	Capital stock or trust principal, or current funds		30			
돯	31	Paid-in or capital surplus, or land, building, or equipm		31			
Ą	32	Retained earnings, endowment, accumulated income,		32			
et	33	Total net assets or fund balances		<u> </u>	1,253,686.	33	1,333,394.
Z	34	Total liabilities and net assets/fund balances		<u> </u>	20,121,333.	34	20,362,758.

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Pai	¹t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.		<u></u>	<u> </u>	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,7	00,7	743.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,6	25,0	084.
3	Revenue less expenses. Subtract line 2 from line 1	3		75,6	559.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments.	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	9		4,0	)49.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,3	33,3	394.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	d on a			
ı	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 separat basis, consolidated basis, or both:	е			
	X Separate basis Consolidated basis Both consolidated and separate basis				
(	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 8	3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				Х
ı	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	lit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		
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TEEA0112L 05/28/14

#### 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

Open to Public

Inspection

Schedule A (Form 990 or 990-EZ) 2014

Name of the organization Employer identification number INTERNATIONAL LEADERSHIP CHARTER SCHOOL 74-3161540 Part I 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 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 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.) 5 6 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.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 11 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.** Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations ..... g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (v) Amount of monetary (vi) Amount of other (iv) Is the organization listed in your governing organization support (see instructions) support (see instructions) (see instructions)) document? Yes No (A) (B) (C) (D) (E) Total

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

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	<b>(f)</b> Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support	T						
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	<b>(f)</b> Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
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							
12	Gross receipts from related activ	rities, etc (see ins	tructions)					
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ird, fourth, or fifth t	tax year as a sectio	n 501(c)(3)	<b>&gt;</b>	
	tion C. Computation of Pu							
	Public support percentage for 20	• •	.,				%	
15	Public support percentage from	2013 Schedule A,	Part II, line 14			15	%	
16 a	16a 33-1/3% support test — 2014. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
b 33-1/3% support test — 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
17 a	17 a 10%-facts-and-circumstances test — 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
ŀ	<b>b 10%-facts-and-circumstances test</b> — <b>2013.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	tructions ►	

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

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

Sec	Section A. Public Support						
	dar year (or fiscal yr beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions and membership fees						
	received. (Do not include						
2	any 'unusùal grants.') Gross receipts from admis-						
_	sions, 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						
7	organization's benefit and						
	either paid to or expended on						
5	its behalf						
•	facilities furnished by a						
	governmental unit to the						
_	organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1.						
, ,	2, and 3 received from						
	disqualified persons						
Ł	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						
8	<b>Public support</b> (Subtract line 7c from line 6.)						
	tion B. Total Support		т	1	1		
Calen	dar year (or fiscal yr beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	<b>(f)</b> Total
	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from						
	similar sources						
t	Unrelated business taxable income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
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.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11 and 12.)						
14	First five years. If the Form 990	is for the organize	l ation's first secon	I nd third fourth o	r fifth tay vear as	a section 501	(c)(3)
	organization, check this box and	stop here		, ama, rourur, o	······································		······ ►
Sec	tion C. Computation of Pul	blic Support P	ercentage				
	Public support percentage for 20	•	• •				15 %
16	Public support percentage from 2	2013 Schedule A,	Part III, line 15	<u></u>	<u></u>		16 %
Sec	tion D. Computation of Inv						
17	Investment income percentage for	or <b>2014</b> (line 10c,	column (f) divide	ed by line 13, colu	mn (f))		17 %
18	Investment income percentage for						18 %
19 a	<b>33-1/3% support tests</b> – <b>2014.</b> If is not more than 33-1/3%, check	the organization this box and <b>sto</b>	did not check the <b>p here.</b> The organ	box on line 14, a nization qualifies a	and line 15 is more	than 33-1/39 orted organiza	%, and line 17
t	33-1/3% support tests - 2013. If line 18 is not more than 33-1/3%	the organization	did not check a b	ox on line 14 or li	ne 19a, and line 1	6 is more tha	in 33-1/3%, and
20			-		•		

#### Part IV Supporting Organizations

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

### **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was			
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)	2		
	and (c) below	3a		
	<b>b</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 <b>Part VI</b> 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	3с		
4	<b>a</b> Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
	<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
	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 <b>Part VI</b> what controls the organization used to ensure that			
5	all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c 5a		
	<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990)</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)	8		
9	<b>a</b> 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 <b>Part VI</b>	9a		
	<b>b</b> Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI</i>	9b		
	c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		
10	a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below.	10a		
	<b>b</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.)	10b		

Pa	art IV	Supporting Organizations (continued)			
				Yes	No
11		he organization accepted a gift or contribution from any of the following persons?			
	<b>a</b> A pers	son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the ining body of a supported organization?	11a		
	<b>b</b> A fam	nily member of a person described in (a) above?	11b		
	<b>c</b> A 359	% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		
Se	ction E	B. Type I Supporting Organizations			
				Yes	No
1	or ele Part \ If the direct	directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in the supported organization(s) effectively operated, supervised, or controlled the organization's activities. Organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year.	1		
2	Did the that of the benefit	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Se	ction (	C. Type II Supporting Organizations			<u>I</u>
				Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s)	1	100	
Se	ction [	D. All Type III Supporting Organizations			
				Yes	No
1	organ year,	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	-				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)				
3	By revoice all time	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard.	3		
Se	ction E	E. Type III Functionally-Integrated Supporting Organizations			
1	011				
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
	a	he organization satisfied the Activities Test. Complete line 2 below.			
	<b>b</b> T	he organization is the parent of each of its supported organizations. Complete line 3 below.			
	<b>c</b> T	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	s).		
2	. Activi	ties Test. Answer (a) and (b) below.		Yes	No
	suppo orgar respo	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was ensive to those supported organizations, and how the organization determined that these activities constituted			
	subst	antially all of its activities	2a		
	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the nization's involvement.	2b		
3	J	nt of Supported Organizations. <b>Answer (a) and (b) below.</b>			
	<b>a</b> Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in</i> <b>Part VI</b>	3a		
	b Did th	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its ported organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2014 INTERNATIONAL LEADERSHIP CHARTER SCHOOL 74-3161540 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year (A) Prior Year Section A — Adjusted Net Income (optional) 1 Net short-term capital gain..... 2 2 Recoveries of prior-year distributions. Other gross income (see instructions). 3 Add lines 1 through 3..... 4 Depreciation and depletion..... 5 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). Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)..... 8 (B) Current Year (A) Prior Year Section B — Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a 1b c Fair market value of other non-exempt-use assets ..... 1c d Total (add lines 1a, 1b, and 1c)..... 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Subtract line 2 from line 1d ..... 3 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 7 Recoveries of prior-year distributions. Minimum Asset Amount (add line 7 to line 6)..... 8

Current Year

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

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Schedule A (Form 990 or 990-EZ) 2014

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)					
Sec	ection D — Distributions							
1	Amounts paid to supported organizations to accomplish exempt purp							
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purposes of sup							
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								
8	Distributions to attentive supported organizations to which the organization <b>Part VI</b> ). See instructions							
9	Distributable amount for 2014 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-2014	(iii) Distributable Amount for 2014				
1	Distributable amount for 2014 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)							
3	Excess distributions carryover, if any, to 2014:							
а								
b								
С								
d								
е	From 2013							
1	Total of lines 3a through e							
g	Applied to underdistributions of prior years							
h	Applied to 2014 distributable amount							
i	Carryover from 2009 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f							
4	Distributions for 2014 from Section D,							
	line 7: \$							
	Applied to underdistributions of prior years							
	Applied to 2014 distributable amount.							
	Remainder. Subtract lines 4a and 4b from 4							
5	Remaining underdistributions for years prior to 2014, if any.  Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)							
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)							
7	Excess distributions carryover to 2015. Add lines 3j and 4c							
8	Breakdown of line 7:							
а								
b								
С								
d	Excess from 2013							
е	Excess from 2014							

BAA

Schedule **A** (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

# Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

Name of the organization		Employer identification number
INTERNATIONAL LEADERSHIP CHAR	TER SCHOOL	74-3161540
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	$\overline{X}$ 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation
	501(c)(3) taxable private foundation	
	our (o)(o) taxable private realization	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
<b>Note.</b> Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a	Special Rule. See instructions.
General Rule		
For an organization filing Form 990, 990-EZ property) from any one contributor. Complet	, or 990-PF that received, during the year, contributions tot the Parts I and II. See instructions for determining a contribu-	aling \$5,000 or more (in money or utor's total contributions.
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi),	I (c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 e year, total contributions of the greater of (1) \$5,000 or ( 0-EZ, line 1. Complete Parts I and II.	, 16a, or 16b, and that
during the year, total contributions of more t	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, children or animals. Complete Parts I, II, and III.	from any one contributor, literary, or educational
during the year, contributions exclusively fo \$1,000. If this box is checked, enter here the charitable, etc., purpose. Do not complete a	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received r religious, charitable, etc., purposes, but no such contribute total contributions that were received during the year for my of the parts unless the <b>General Rule</b> applies to this orgule, etc., contributions totaling \$5,000 or more during the years.	tions totaled more than an <i>exclusively</i> religious, panization because
990-PF), but it <b>must</b> answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Soe 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 9	990-EZ or on its Form 990-PF,

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1 of

1 of **Part 1** 

Name of organization

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number 74-3161540

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FEDERAL FUNDING TITLE I		Person X Payroll
	400 MARYLAND AVENUE, SW	\$151,281.	Noncash
	WASHINGTON , DC 20202		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	FEDERAL FUNDING TITLE I I		Person X Payroll
	400 MARYLAND AVENUE, SW	\$ <u>6,</u> 908.	Noncash
	WASHINGTON , DC 20202		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	FEDERAL FUNDING IDEA		Person X Payroll
	400 MARYLAND AVENUE, SW	\$18,689.	Noncash
	WASHINGTON , DC 20202		(Complete Part II for noncash contributions.)
(a)	(b)	(c) Total	(d) Type of contribution
Number	Name, address, and ZIP + 4	contributions	Type of contribution
Number 4	FEDERAL FUNDING - FOOD		Person X
	EEDEDAI EUNDING - EOOD		
	FEDERAL FUNDING - FOOD	contributions	Person X Payroll
	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW	contributions	Person X Payroll Noncash  (Complete Part II for
4	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  (b)	\$42,776.	Person X Payroll Noncash (Complete Part II for noncash contributions.)  (d) Type of contribution  Person X
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4	\$42,776.	Person X Payroll Noncash (Complete Part II for noncash contributions.)  (d) Type of contribution
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK	\$ 42,776.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)  Type of contribution  Person X Payroll
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199	\$ 42,776.	Person X Payroll
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199  HOUSTON , TX 77210	\$42,776.  Contributions  \$42,776.  Total contributions  \$5,000.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)  Type of contribution  Person X Payroll Noncash  (Complete Part II for noncash contributions.)  (Type of contributions.)
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199  HOUSTON , TX 77210	\$42,776.  Contributions  \$42,776.  Total contributions  \$5,000.	Person X Payroll
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199  HOUSTON , TX 77210	\$42,776.  Contributions  \$42,776.  Total contributions  \$5,000.	Person X Payroll

Name of organization

Page

T to

1 of Part II

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number 74-3161540

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
			•

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

1 to

of Part III

Name of organization
INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number

74-3161540

t	or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ompleting Part III, enter the total of (Enter this information once. See i	f exclusively religious, charitable, etc.,	NZ
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
	N/A 			
-	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
-	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to tran	sferee

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8)

# SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	INTERNATIONAL LEADERSHIP C	HARTER SCHOOL		74-3161540
Par	Organizations Maintaining Dono	ds or Accounts.		
- 0	Complete if the organization ans	wered 'Yes' to Form 990,	Part IV, line	6.
		(a) Donor advised fu	nds	(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 do are the organization's property, subject to the	organization's exclusive legal co	ontrol?	Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing of the donor or donor advisor, o	that grant fund or for any other	s can be used only purpose conferring Yes No
Par	Conservation Easements. Complete if the organization ans	wered 'Ves' to Form 990	Part IV line	7
1	Purpose(s) of conservation easements held b			<i>7</i> .
'	Preservation of land for public use (e.g.,	·	_ ' ' ' ' '	f a historically important land area
	Protection of natural habitat	ecreation of education)		f a certified historic structure
	Preservation of open space		r reservation c	i a certified flistofic structure
2	Complete lines 2a through 2d if the organization	hold a gualified conservation contr	ibution in the for	m of a conservation easement on the
_	last day of the tax year.	neid a quaimed conservation conti	ibulion in the ion	ii of a conservation easement on the
				Held at the End of the Tax Year
a	Total number of conservation easements			2a
Ł	Total acreage restricted by conservation ease	ments		2b
c	Number of conservation easements on a certi	fied historic structure included in	(a)	2c
c	Number of conservation easements included in	n (c) acquired after 8/17/06, and	not on a histor	ic <b>2 d</b>
3	structure listed in the National Register			
3	tax year	risierreu, reieaseu, extiriguisileu, u	i terrimated by t	the organization during the
4	Number of states where property subject to conse	ervation easement is located ►		
5	Does the organization have a written policy re		inspection, har	– dling of violations.
	and enforcement of the conservation easeme			
6	Staff and volunteer hours devoted to monitoring, $\ \ \blacktriangleright$	inspecting, and enforcing conserva-	ation easements	during the year
7	Amount of expenses incurred in monitoring, insp	ecting, and enforcing conservation	easements durir	ng the year
	▶\$	3,		
8	Does each conservation easement reported o and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requ	uirements of sec	tion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements.	s conservation easements in its re to the organization's financial sta	venue and exper atements that de	se statement, and balance sheet, and escribes the organization's accounting for
Pav	t III Organizations Maintaining Colle	ections of Art. Historical T	reasures or	Other Similar Assets
r ai	Complete if the organization ans	wered 'Yes' to Form 990,	Part IV, line	8.
1 a	If the organization elected, as permitted unde art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its final	eld for public exhibition, education	or research in f	ue statement and balance sheet works of urtherance of public service, provide,
Ł	If the organization elected, as permitted unde historical treasures, or other similar assets held following amounts relating to these items:	or public exhibition, education, or	research in furthe	erance of public service, provide the
	(i) Revenue included in Form 990, Part VIII,			
	(ii) Assets included in Form 990, Part X			
	If the organization received or held works of art, amounts required to be reported under ${\sf SFAS}$	116 (ASC 958) relating to these	items:	
	Revenue included in Form 990, Part VIII, line	1		· .
L	Accets included in Form 990 Part X			<b>▶</b> Ċ

Part III Organizations Maintaining C	Collections of Art, Histo	orical Treasures, or	Other Similar Ass	ets (continued)
3 Using the organization's acquisition, access items (check all that apply):	ion, and other records, check a	any of the following that a	re a significant use of its	collection
a Public exhibition	<b>d</b> Loan	or exchange programs		
<b>b</b> Scholarly research	e Other			
c Preservation for future generations		-		
4 Provide a description of the organization's or Part XIII.	collections and explain how the	y further the organization	's exempt purpose in	
5 During the year, did the organization soli to be sold to raise funds rather than to be	cit or receive donations of art e maintained as part of the o	t, historical treasures, organization's collection?	r other similar assets	Yes No
Part IV Escrow and Custodial Arrar line 9, or reported an amoun	<b>ngements.</b> Complete if t nt on Form 990, Part X,	the organization an Iine 21.	swered 'Yes' to For	m 990, Part IV,
1 a Is the organization an agent, trustee, cus on Form 990, Part X?	stodian, or other intermediary	for contributions or oth	er assets not included	Yes No
<b>b</b> If 'Yes,' explain the arrangement in Part				
	•			Amount
c Beginning balance			1с	
<b>d</b> Additions during the year			1d	
e Distributions during the year			1 e	
f Ending balance			1f	
2a Did the organization include an amount of	on Form 990, Part X, line 21,	for escrow or custodial	account liability?	Yes No
<b>b</b> If 'Yes,' explain the arrangement in Part	XIII. Check here if the explan	nation has been provide	d in Part XIII	
Part V Endowment Funds. Comple				
	Current year (b) Prior yea	r (c) Two years back	k (d) Three years back	(e) Four years back
1 a Beginning of year balance				
<b>b</b> Contributions				
c Net investment earnings, gains, and losses				
<b>d</b> Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				
<b>g</b> End of year balance				
2 Provide the estimated percentage of the	current year end balance (lin	e 1g, column (a)) held	as:	
a Board designated or quasi-endowment ▶	<u> </u>			
<b>b</b> Permanent endowment ▶	% *			
c Temporarily restricted endowment ►	% %			
The percentages in lines 2a, 2b, and 2c	should equal 100%.			
<b>3 a</b> Are there endowment funds not in the posse organization by:	ession of the organization that	are held and administere	d for the	Yes No
(i) unrelated organizations				3a(i)
(ii) related organizations				3a(ii)
<b>b</b> If 'Yes' to 3a(ii), are the related organiza	tions listed as required on So	chedule R?		. 3b
4 Describe in Part XIII the intended uses of	f the organization's endowme	ent funds.		
Part VI Land, Buildings, and Equipr	nent.			
Complete if the organization	answered 'Yes' to Forn	n 990, Part IV, line	11a. See Form 99	0, Part X, line 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land		2,530,000.		2,530,000.
<b>b</b> Buildings				
c Leasehold improvements				
<b>d</b> Equipment		214,209.	152,395.	61,814.
e Other				
Total. Add lines 1a through 1e. (Column (d) m	ust equal Form 990, Part X, o	column (B), line 10c.).		2,591,814.
DAA			Sahad	Julo <b>D</b> (Form 990) 2014

Part VII	Investments – Other Securities.		N/A	
	Complete if the organization answered			
	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	f-year market value
	ial derivatives			
	y-held equity interests			
(3) Other				
(A) (B) (C) (D) (E)				
(B)				
(C)				
(D)				
(E)				
(F) (C)				
(F) (G) (H)				
(l)				
	and (b) much and Farm 000 Park V advant (D) line 12)			
	nn (b) must equal Form 990, Part X, column (B) line 12.)		N/A	
Part VIII	Complete if the organization answered	'Yes' to Form 990	. Part IV. line 11c. See Form 99	0. Part X. line 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-	
(1)		• • •	• •	-
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Colum	nn (b) must equal Form 990, Part X, column (B) line 13.).			
	Other Assets.	'Vac' to Farm 000	Part IV line 11d See Form 00	20 Part V line 15
Total. (Colum	Other Assets. Complete if the organization answered		, Part IV, line 11d. See Form 99	
Total. (Colum Part IX	Other Assets. Complete if the organization answered (a) Des	'Yes' to Form 990 scription	, Part IV, line 11d. See Form 99	(b) Book value
Total. (Colum Part IX	Other Assets. Complete if the organization answered (a) Des		, Part IV, line 11d. See Form 99	<b>(b)</b> Book value 11,022,455.
Total. (Column Part IX (1) CON (2) RES	Other Assets. Complete if the organization answered (a) Des		, Part IV, line 11d. See Form 99	(b) Book value
Total. (Column Part IX (1) CON (2) RES (3) SEC (4)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE		, Part IV, line 11d. See Form 99	(b) Book value 11,022,455. 5,795,432.
(1) CON (2) RES (3) SEC (4)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE		, Part IV, line 11d. See Form 99	(b) Book value 11,022,455. 5,795,432.
(1) CON (2) RES (3) SEC (4) (5) (6)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE		, Part IV, line 11d. See Form 99	(b) Book value 11,022,455. 5,795,432.
(1) CON (2) RES (3) SEC (4) (5) (6) (7)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE		, Part IV, line 11d. See Form 99	(b) Book value 11,022,455. 5,795,432.
Total. (Column Part IX)  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE		, Part IV, line 11d. See Form 99	(b) Book value 11,022,455. 5,795,432.
Total. (Column Part IX)  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE		, Part IV, line 11d. See Form 99	(b) Book value 11,022,455. 5,795,432.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE CURITY DEPOSITS	scription		(b) Book value 11,022,455. 5,795,432. 142,737.
(1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE CURITY DEPOSITS  Diumn (b) must equal Form 990, Part X, column (E)	scription		(b) Book value 11,022,455. 5,795,432.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE CURITY DEPOSITS  Diumn (b) must equal Form 990, Part X, column (E) Other Liabilities.	Scription  B), line 15.)		(b) Book value 11,022,455. 5,795,432. 142,737.
(1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Assets. Complete if the organization answered (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE CURITY DEPOSITS  Diumn (b) must equal Form 990, Part X, column (E)	Scription  B), line 15.)		(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X	Other Assets. Complete if the organization answered  (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE CURITY DEPOSITS  Summ (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' to Fo  (a) Description of liability eral income taxes	3), line 15.)rm 990, Part IV, line 11		(b) Book value 11,022,455. 5,795,432. 142,737.
(1) Column (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10) Total. (Column (2) ACC (2) ACC (2) ACC (2) (3) (4) (5) (6) (6) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	Other Assets. Complete if the organization answered  (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE CURITY DEPOSITS  Olumn (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' to Fo  (a) Description of liability eral income taxes CRUED INTEREST PAYABLE	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
(1) COM (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Co  Part X  (1) Fede (2) ACC (3) COM	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Column Part X  (1) Fede (2) ACC (3) CON (4) LIN	Other Assets. Complete if the organization answered  (a) Des ISTRUCTION IN PROGRESS STRICTED CASH HELD BY TRUSTEE CURITY DEPOSITS  Olumn (b) must equal Form 990, Part X, column (E) Other Liabilities. Complete if the organization answered 'Yes' to Fo  (a) Description of liability eral income taxes CRUED INTEREST PAYABLE	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  (1) Fede (2) ACC (3) CON (4) LIN (5)	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  (1) Fede (2) ACC (3) CON (4) LIN (5) (6)	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  (1) Fedee (2) ACC (3) CON (4) LIN (5) (6) (7)	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  (1) Fede (2) ACC (3) CON (4) LIN (5) (6) (7) (8)	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  (1) Fedee (2) ACC (3) CON (4) LIN (5) (6) (7)	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  (1) Fede (2) ACC (3) CON (4) LIN (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.
Total. (Column Part IX  (1) CON (2) RES (3) SEC (4) (5) (6) (7) (8) (9) (10)  Total. (Column Column Part X  (1) Fede (2) ACC (3) CON (4) LIN (5) (6) (7) (8) (9) (10) (11)	Other Assets. Complete if the organization answered  (a) Designation and the complete if the organization answered in the complete if the organization answered in the organization and the organization answered in the organization and the organization a	8), line 15.)	e or 11f. See Form 990, Part X, line 25	(b) Book value 11,022,455. 5,795,432. 142,737.

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

Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Re	turn.	
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	4,700,743.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2 a		
<b>b</b> Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	4,700,743.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5	4,700,743.
Part VII Personalistian of Expenses new Audited Financial Statemen	. L. MACH. E	) a t	_
Part XII Reconciliation of Expenses per Audited Financial Statemen	its with Expenses per i	teturr	1.
Complete if the organization answered 'Yes' to Form 990, Pa		teturr	1.
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line 12a.	teturr 1	
	art IV, line 12a.	1	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements	art IV, line 12a.	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	art IV, line 12a.	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities	2a 2b	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.	2a 2b 2c	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses	2a	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)	2a 2b 2c 2d	1	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.	2a 2b 2c 2d	1 2 e	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.	2a 2b 2c 2d	1 2 e	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.) SEE PART XIII	2a	1 2 e	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.) SEE PART XIII  c Add lines 4a and 4b	2a	1 2e 3	4,621,035. 4,621,035. 4,049.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.) SEE PART XIII	2a	1 2 e 3	4,621,035.

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### **PART X - FIN 48 FOOTNOTE**

IN JANUARY 2006 THE SCHOOL FILED AND RECEIVED APPROVAL OF ITS APPLICATION FOR TAX EXEMPT STATUS FROM THE INTERNAL REVENUE SERVICE UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS BEEN CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION AS DESCRIBED IN INTERNAL REVENUE CODE SECTION 509 (A)(1) AND 170 (B)(1)(A)(II).

MANAGEMENT BELIEVES THAT THE ORGANIZATION HAS NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION. THE SCHOOL IS NO LONGER SUBJECT TO INCOME

Schedule **D** (Form 990) 2014

Part XIII Supplemental Information (continued)

### PART X - FIN 48 FOOTNOTE (CONTINUED)

TAX EXAMINATION BY FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2011, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.

#### SCHEDULE D, PART XII, LINE 4B OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

DEPRECIATION	\$ 4,049.
TOTAL	\$ 4,049.

**BAA** TEEA3305L 08/25/14 Schedule **D** (Form 990) 2014

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

### **Schools**

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

74-3161540

INTERNATIONAL LEADERSHIP CHARTER SCHOOL
Part I

			YES	NO
1	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	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	V	
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	2	X	
	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	Χ	
	SEE PART II			
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4 a	Χ	
ı	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4 b	Х	
(	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4 c	Х	
(	Copies of all material used by the organization or on its behalf to solicit contributions?	4 d	Χ	
	If you answered 'No' to any of the above, please explain. If you need more space, use Part II.			
_	Does the organization discriminate by race in any way with respect to:			
5	a Students' rights or privileges?	5 a		Х
	Admissions policies?	5 b		
•	Admissions policies:	30		X
•	Employment of faculty or administrative staff?	5 c		X
(	Scholarships or other financial assistance?	5 d		Х
(	Educational policies?	5 e		Х
1	Use of facilities?	5 f		Χ
Ģ	Athletic programs?	5 g		Х
ı	Other extracurricular activities?	5 h		Х
	If you answered 'Yes' to any of the above, please explain. If you need more space, use Part II.			
۵.	Does the organization receive any financial aid or assistance from a governmental agency?	C -	37	
	Des the organization receive any financial aid or assistance from a governmental agency?  Has the organization's right to such aid ever been revoked or suspended?	6 a 6 b	Χ	Х
	If you answered 'Yes' to either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If			
	'No.' explain on Part II	7	X	

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

#### SCHEDULE E, LINE 3 - RACIALLY NONDISCRIMINATORY POLICY PUBLICIZED

THE SCHOOL IS REQUIRED TO ADHERE TO THE PROVISIONS OF SECTION 2854 (2) OF THE EDUCATION LAW TO GUIDE THE ADMISSION POLICIES AND PROCEDURES.

THE SCHOOL IS OPEN TO ANY STUDENT WHO IS QUALIFIED UNDER THE LAWS OF NEW YORK FOR ADMISSION TO A PUBLIC SCHOOL. ADMISSION OF STUDENTS WILL BE NOT BE LIMITED ON THE BASIS OF INTELLECTUAL ABILITY, MEASURES OF ACHIEVEMENT OR APTITUDE, ATHLETIC ABILITY, DISABILITY, RACE, CREED, NATIONAL ORIGIN, RELIGION, ANCESTRY, PROFICIENCY IN ENGLISH OR ANY OTHER GROUND THAT WOULD BE UNLAWFUL.ADMISSION TO ILCH IS FREE & OPEN TO ALL STUDENTS ELIGIBLE TO ATTEND PUBLIC SCHOOL IN NYC.

#### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

2014

Open to Public Inspection

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number 74-3161540

Pai	t I Questions Regarding Compensation		•	•	
				Yes	No
1 a	Check the appropriate box(es) if the organization provided any VII, Section A, line 1a. Complete Part III to provide any rele	of the following to or for a person listed in Form 990, Part evant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
I	If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described	n follow a written policy regarding payment or d above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimburs trustees, and officers, including the CEO/Executive Director	sing or allowing expenses incurred by all directors, r, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization us CEO/Executive Director. Check all that apply. Do not check establish compensation of the CEO/Executive Director, but	led to establish the compensation of the organization's any boxes for methods used by a related organization to explain in Part III.			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	$\fbox{X}$ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII or a related organization:	,			
		nt?	4 a		Х
		Inqualified retirement plan?	4 b 4 c		X
•	If 'Yes' to any of lines 4a-c, list the persons and provide the	•	40		X
	Only section 501(c)(3) 501(c)(4), and 501(c)(29) organization	ons must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a contingent on the revenues of:	, did the organization pay or accrue any compensation			
ä	The organization?		5 a		Х
ı	-		5 b		X
	If 'Yes' to line 5a or 5b, describe in Part III.				
6	For persons listed in Form 990, Part VII, Section A, line 1a contingent on the net earnings of:	, did the organization pay or accrue any compensation			
	The organization?		6 a		X
l	a Any related organization?		6 b		Х
7	For persons listed in Form 990, Part VII, Section A, line 1a	did the organization provide any non-fixed			
,	payments not described in lines 5 and 6? If 'Yes,' describe	in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or a to the initial contract exception described in Regulations se	ction 53.4958-4(a)(3)?			
	If 'Yes,' describe in Part III		8		Х
9	If 'Yes' to line 8, did the organization also follow the rebuttable section 53.4958-6(c)?	presumption procedure described in Regulations	9		

Schedule **J** (Form 990) 2014

74-3161540

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown o	of W-2 and/or 1099-MI	SC compensation	(C) Retirement	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(I)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
DR. ELAINE RUIZ LOPEZ	(i)	166,925.	0.	0.	0.	15,500.	182,425.	0.
1 CEO	(ii)	0.	<u>0</u> :	<del>0</del> .	† <u>ō.</u>	0.	0.	0.
	(i)			,			, ,	
2	(ii)				†		<del> </del>	
	(i)							
3	(ii)							
	(i)				L		L	
4	(ii)							
	(i)				<b>1</b>		<b>_</b>	
5	(ii)							
_	(i)				<b></b>		<b> </b>	
6	(ii)							
7	(i)				<b>+</b>		<b></b>	
7	(ii)							
8	(i) (ii)				+		<del> </del>	
	(i)							_
9	(ii)				<del> </del> -		+	
-	(i)							
10	(ii)				†		<del> </del>	
	(i)							
11	(ii)				T		T	
	(i)							
12	(ii)							
	(i)				<b>_</b>			
13	(ii)							
	(i)				<b>_</b>		L	
14	(ii)							
	(i)		<u> </u>		<b>↓</b>		<b></b>	
15	(ii)							
10	(i)				<b></b>		<b></b>	
16	(ii)							(5

BAA

TEEA4102L 06/19/14

Schedule **J** (Form 990) 2014

### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

TEEA4103L 10/17/14

#### **SCHEDULE K** (Form 990)

# **Supplemental Information on Tax-Exempt Bonds**

OMB No. 1545-0047

Complete if the organization answered 'Yes' on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 ► Attach to Form 990.
 ► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

INT	INTERNATIONAL LEADERSHIP CHARTER SCHOOL									74	74-3161540					
Par	t I Bond Issues															
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	rice	(1	) Desc	ription of pu	ırpose	Defe	g) ased	(h) On behalf of issuer		(i) Pooled financing	
											Yes	No	Yes	No	Yes	No
<b>A</b>	BUILD NYC RESOURCE CORP.	45-4040561	12008EBC9	3/01/2013	2,92	0,000.	SPEC.L	IMITEI	REV.OBL	IGATIONS		X		Χ		X
<b>B</b>	BUILD NYC RESOURCE CORP.	45-4040561	12008EBD7	3/01/2013	5,36	5,360,000. SPEC.LIMITED REV.OB		REV.OBL	IGATIONS		Χ		Χ		Χ	
	BUILD NYC RESOURCE CORP.	45-4040561	12008EBB1	3/01/2013	9,47	0,000.	SPEC.L	IMITEI	REV.OBL	IGATIONS		X		Χ		Χ
D																
Par	t II Proceeds				1	_	-		_							
						4		E	3	С				D		
	Amount of bonds retired					65,00	00.									
	Amount of bonds legally defeas															
3	3 Total proceeds of issue						00.									
4	Gross proceeds in reserve fund	ls														
	Capitalized interest from proceed															
	6 Proceeds in refunding escrows															
	7 Issuance costs from proceeds					24,89	90.									
	8 Credit enhancement from proceeds															
	9 Working capital expenditures from proceeds															
10	Capital expenditures from proce	eeds			13,5	52,45	55.									
11	Other spent proceeds															
12	Other unspent proceeds															
13	Year of substantial completion															
					Yes	No	,	es	No	Yes	No	)	Ye	s	No	,
14	Were the bonds issued as part	of a current refunding i	ssue?		. X											
15	Were the bonds issued as part	of an advance refunding	g issue?			Х										
16	Has the final allocation of proce	eeds been made?				Х										
17	Does the organization maintain of proceeds?	adequate books and re	ecords to support	the final allocation		Х										
Par	t III Private Business Us				1	ı	<u>l</u>			l l		I				
						4		E	3	C	;			D	)	
					Yes	No	,	es	No	Yes	No	,	Ye	s	No	,
1	Was the organization a partner property financed by tax-exemp	in a partnership, or a ropt bonds?	member of an LLO	C, which owned		Х										
2	Are there any lease arrangeme bond-financed property?	ents that may result in p	rivate business ι	use of		Х										

Part III Private Business Use (Continued)

		4	E	3	(	:		)
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		Х						
<b>b</b> If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		Х						
<b>d</b> If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		olo		90		olo		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		9/0		00		9/0		%
6 Total of lines 4 and 5		%		%				ଖ
7 Does the bond issue meet the private security or payment test?		Х						
8 a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
<b>b</b> If 'Yes', to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If 'Yes' to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							
Part IV Arbitrage								
	1	4	E	3	(	;		)
	Yes	No	Yes	No	Yes	No	Yes	No
Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If 'No' to line 1, did the following apply?								
a Rebate not due yet?		Х						
<b>b</b> Exception to rebate?		X						
c No rebate due?		X						
If 'Yes' to line 2c, provide in Part VI the date the rebate computation was performed.								
3 Is the bond issue a variable rate issue?		Х						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
<b>b</b> Name of provider		•						
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

TEEA4401L 06/18/14

Page 3

**Part IV Arbitrage** (Continued)

	i	Α		В		С		D
	Yes	No	Yes	No	Yes	No	Yes	No
<b>5 a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
<b>b</b> Name of provider		•		•		•		•
c Term of GIC.								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
<b>6</b> Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the requirements of section 148 ?	Х							

#### Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?.....

	Į.	4	E	3	(		I	D		
1	Yes	No	Yes	No	Yes	No	Yes	No		

**Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

#### ADDITIONAL INFORMATION

ON MARCH 21, 2013, BUILD NYC RESOURCE CORPORATION PROVIDED CONSTRUCTION AND PERMANENT FINANCING THROUGH THE ISSUANCE OF \$17,750,000 IN TAX-EXEMPT REVENUE BONDS (THE "SERIES 2013 BONDS"), WITH PRINCIPAL AMOUNTS, INTEREST RATES AND MATURITY DATES AS FOLLOWS: PRINCIPAL

**AMOUNTS** INTEREST RATES DUE DATES

JULY 1, 2023 \$ 2,920,000 5.00% 5.75% JULY 1, 2033 5,360,000 6.00% JULY 1, 2043 9,470,000

THE PROCEEDS FROM THE SALE OF THE BONDS, TOGETHER WITH OTHER AVAILABLE FUNDS, WERE USED TO (1) REFINANCE OR REIMBURSE THE SCHOOL FOR CERTAIN COSTS OF ACQUIRING, CONSTRUCTING, RENOVATING, EQUIPPING AND FURNISHING ITS FUTURE EDUCATIONAL FACILITY; (2) FUND THE SERVICE RESERVE FUND ESTABLISHED UNDER THE INDENTURE IN AN AMOUNT EQUAL TO THE DEBT SERVICE RESERVE FUND REQUIREMENT OF THE BONDS; (3) COVER INTEREST ON THE BONDS DURING CONSTRUCTION FOR A PERIOD OF SIXTEEN MONTHS; AND (4) PAY CERTAIN COSTS OF ISSUING THE SERIES 2013 BONDS.

THE BONDS ARE SECURED BY THE PLEDGE AND ASSIGNMENT TO THE TRUSTEE OF THE TRUST ESTATE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS. THE OBLIGATIONS OF THE SCHOOL UNDER THE LOAN AGREEMENT ARE SECURED BY THE MORTGAGES ASSIGNED TO THE TRUSTEE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS.

INTEREST ON THE BONDS IS PAYABLE INITIALLY ON JULY 1, 2013 AND SEMIANNUALLY THEREAFTER ON EACH JANUARY 1ST AND JULY 1ST COMPUTED ON THE BASIS OF A 360-DAY YEAR OF TWELVE 30-DAY MONTHS. THE AMOUNT OF THE INTEREST THAT WAS CAPITALIZED AS IT RELATED TO THE

74-3161540

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued)

#### ADDITIONAL INFORMATION (CONTINUED)

FINANCING OF THE SCHOOL'S FACILITY WAS \$551,999 FOR THE YEAR ENDED JUNE 30, 2015.

PRINCIPAL AND INTEREST PAYMENTS DUE ON THE BONDS BY FISCAL YEAR ARE AS FOLLOWS:

FISCAL	YEAR						
ENDEDP:	RINCIPAL	INTEREST	TOTAL				
2016	\$265,000	1,015,775	1,280,775				
2017	280,000	1,002,150	1,282,150				
2018	290,000	987,900	1,277,900				
2019	305,000	973,020	1,278,025				
2020	320,000	957,400	1,277,400				
2021							
AND							
THEREA	FTER						
	16,290,000	14,133,663	30,423,663				

INTERNATIONAL LEADERSHIP CHARTER SCHOOL USED THE PROCEEDS FROM THE SALE OF THE BONDS, TOGETHER WITH OTHER AVAILABLE FUNDS, WERE USED TO (1) REFINANCE OR REIMBURSE THE SCHOOL FOR CERTAIN COSTS OF ACQUIRING, CONSTRUCTING, RENOVATING, EQUIPPING AND FURNISHING ITS FUTURE EDUCATIONAL FACILITY; (2) FUND THE SERVICE RESERVE FUND ESTABLISHED UNDER THE INDENTURE IN AN AMOUNT EQUAL TO THE DEBT SERVICE RESERVE FUND REQUIREMENT OF THE BONDS; (3) COVER INTEREST ON THE BONDS DURING CONSTRUCTION FOR A PERIOD OF SIXTEEN MONTHS; AND (4) PAY CERTAIN COSTS OF ISSUING THE SERIES 2013 BONDS.

THE BONDS ARE SECURED BY THE PLEDGE AND ASSIGNMENT TO THE TRUSTEE OF THE TRUST ESTATE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS. THE OBLIGATIONS OF THE SCHOOL UNDER THE LOAN AGREEMENT ARE SECURED BY THE MORTGAGES ASSIGNED TO THE TRUSTEE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS.

TEEA4402L 08/20/14

#### 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.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number

74-3161540

#### FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

THE INTERNATIONAL LEADERSHIP CHARTER SCHOOL ("THE SCHOOL"), A 501(C)(3) TAX-EXEMPT ORGANIZATION, IS A PUBLIC CHARTER HIGH SCHOOL LOCATED IN BRONX, NEW YORK. THE SCHOOL OPENED IN JANUARY 2006 AND CURRENTLY OPERATES CLASSES FOR NINTH TO TWELVE GRADE.

THE SCHOOL'S CHARTER WAS RENEWED ON JUNE 16, 2015 FOR AN ADDITIONAL FIVE YEARS. THE MISSION OF THE SCHOOL IS TO PREPARE THE YOUNG MEN AND WOMEN OF THE BRONX NOT ONLY FOR THE DEMANDS OF HIGHER EDUCATION, BUT ALSO FOR LEADING LIVES OF MEANING. ITS TEACHING PHILOSOPHY PROVIDES POWERFUL LEARNING EXPERIENCES THAT STRESS ENGAGEMENT, DISCOVERY, AND THE ACTIVE APPLICATION OF LEARNING OF THE WORLD AROUND US.

#### FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

THE SCHOOL IMPLEMENTS AN ACADEMICALLY RIGOROUS REGENTS AND COLLEGE-PREPARATORY

CURRICULUM THAT ELEVATES STUDENTS' INTELLECTUAL CAPACITY AND PROVIDES A SUPERIOR HIGH

SCHOOL EDUCATION THAT HAS GAINED NATIONAL RECOGNITION PROVING THAT OUR ACADEMICALLY

RIGOROUS PROGRAM IS EFFECTIVE, DEDICATED TO EMPOWERING TOMORROW'S LEADERS. IN 2013,

THE SCHOOL PLACED IN THE TOP 1% OF HIGH SCHOOLS (#6 OUT OF 500 NYC HIGH SCHOOLS) AND

WAS THE RECIPIENT OF A BRONZE AWARD FROM THE US NEWS & WORLD REPORT FOR BEST HIGH

SCHOOLS 2013 NATIONALLY. THE SCHOOL'S ACADEMIC PROGRAM HAS PRODUCED A SCHOOL WITH A

GRADUATION RATE OF 96.2% (THE MAJORITY OF WHOM MATRICULATED INTO A 4-YEAR COLLEGE OR

UNIVERSITY) AND REGENT EXAM SCORES HIGHER THAN SCHOOLS IN ITS DISTRICT AND THE STATE.

ON MARCH 21, 2013 THE SCHOOL BECAME THE FIRST CHARTER SCHOOL TO SUCCESSFULLY CLOSE ON

A \$17,750,000 MUNICIPAL BOND FINANCING ISSUED BY BUILD NYC FOR A NEW FACILITY. WE

HAVE A STRATEGIC 18 MONTH PLAN FOR THE DESIGN AND CONSTRUCTION OF A STATE OF THE ART

SCHOOL FACILITY. THE NEW FACILITY WILL BE A 28,500 SQUARE FOOT, THREE-STORY, STATE OF

THE ART FACILITY THAT WILL CONTAIN 17 CLASSROOMS AND NINE FLEX ROOMS, SUPPORTING

STUDENT ACTIVITIES AND DEVELOPMENT SPACE, AND WITH THE CAPACITY TO ACCOMMODATE

#### FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

ENROLLMENT TO 400 STUDENTS. THE NEW FACILITY WILL BE LOCATED ON TWO CONTIGUOUS

PARCELS TOTALING 15,400 SQUARE FEET AT 322 WEST 231ST STREET IN THE KINGSBRIDGE

NEIGHBORHOOD OF THE BRONX, ONLY A FEW BLOCKS AWAY FROM THE SCHOOL'S CURRENT LOCATION

IN THE MARBLE HILL NEIGHBORHOOD. THE SCHOOL HAS AN EXTENDED SCHOOL DAY THAT FEATURES

60 AND 90 MINUTE CLASS PERIODS. STUDENTS RECEIVE 180 MINUTES PER WEEK IN EACH CORE

SUBJECT, WHICH ACCORDING TO MANAGEMENT IS VIEWED FAVORABLY BY BOTH PARENTS AND

TEACHERS. FURTHER SUPPORTING STUDENTS, THE SCHOOL OFFERS AFTER-SCHOOL TUTORING, AND

DURING JANUARY STUDENTS ARE REQUIRED TO ATTEND 'SATURDAY ACADEMY' FOR THREE HOURS.

THE PURPOSE OF SATURDAY ACADEMY IS TO PROVIDE STUDENTS WITH SUBJECT INTENSIVE STUDY

FOR REGENTS EXAMS.

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

A DRAFT OF THE FEDERAL FORM 990 IS FIRST REVIEWED BY THE CONTROLLER OF THE MANAGEMENT COMPANY. THE FINAL DRAFT OF THE FED FORM 990 IS THEN CIRCULATED TO BOARD MEMBERS FOR THEIR REVIEW AND COMMENTS PRIOR TO THE SIGNING AND FILING OF THE FEDERAL FORM 990 WITH THE IRS.

#### FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

ALL FINANCIAL STATEMENTS AND TAX RETURNS ARE OPEN FOR PUBLIC INSPECTION UPON REQUEST. ALL FINANCIAL STATEMENTS AND TAX RETURNS ARE SUBMITTED TO GRANT-MAKING GOVERNMENT AGENCIES. ALSO, THE ORGANIZATION TIMELY FILES ITS NYS CHAR 500 ANNUAL REPORT WITH THE OFFICE OF THE NY STATE ATTORNEY GENERAL. THE NYSOAG POSTS THE ORGANIZATION'S FINANCIAL STATEMENTS, FED 990 TAX RETURN AND THE NYS CHAR 500 ON ITS CHARITITES BUREAU INTERNET WEBSITE.

#### FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

DEPRECIATION ADJUSTMENT \$ 4,049.
TOTAL \$ 4,049.

2014

# **FEDERAL SUPPORTING DETAIL**

PAGE 1

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

74-3161540

INFO (	ON TAX E	XEMPT	BONDS	(SCH K)
<b>AMOU</b>	NT OF BO	ONDS RE	ETIRED	,
<b>BUILD</b>	NYC RES	SOURCE	CORP.	

RETIRED ON 7/1/2015 \$ 265,000. TOTAL \$ 265,000.

# CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to: NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271 2014

Open to Public Inspection

#### 1. General Information

For Fiscal Year Beginning (mm	/dd/yyyy)	07/01 / <b>2014</b> and E	nding (mm/dd/yyyy)	06/30/2015	
Check if Applicable:	Name of Organizat		<u> </u>		ication Number (EIN):
Address Change				74-31615	40
Name Change	INTERNATI	ONAL LEADERSHI	P CHARTER SCH	DOL	
Initial Filing	Mailing Address:			NY Registration I	Number:
Final Filing	322 WEST	231ST		40-76-93	
	City/State/Zip:			Telephone:	
Amended Filing	BRONX, NY Website:	7 10463		(718) 56 Email:	2-2300
Reg ID Pending	WWW.ILCHS	S ORG		FT.ODF7@T	LCHS.ORG
Check your organization's registration category:	7A only EPTL o			Find your registration category in Charities Registry at www.Char	n the
2. Certification					
See instructions for certification	n requirements. Imp	proper certification is a	violation of law that n	nay be subject to penalties.	
		·		<u> </u>	
We certify under penalties o they are true, co	f perjury that we re rrect and complete	viewed this report, incl in accordance with the	uding all attachments, laws of the State of N	and to the best of our knowled lew York applicable to this repo	ge and belief, ort.
Duraidant on Authorized Officer		DR. EL	AINE RUIZ L	CEO	
President or Authorized Officer:	Signature	Printed Name		ïtle	Date
Chief Financial Officer or Treasurer:	Signature	Printed Name	e 1	ïtle	Date
3. Annual Reporting Exer	mption				·
Check the exemption(s) that appl both categories (DUAL filers) th schedules, or additional attachr you must file applicable schedu	at apply to your requests are required.	gistration, complete on If vou cannot claim ar	ly parts 1, 2, and 3, and exemption or are a D	nd submit the certified Char500.	No fee,
	n did not engage a pr	ofessional fund raiser (F	PFR) or fund raising cou	s, government agencies, etc did nsel (FRC) to solicit contributions	
<b>3b. EPTL filing exemption</b> : G during the fiscal year.	ross receipts did not	exceed \$25,000 and the	e market value of assets	did not exceed \$25,000 at any tir	ne
4. Schedules and Attach	ments				
See the following page for a checklist of schedules and attachments to complete your filing.	co	o-venturer for fund rais	ing activity in NY Stat	raiser, fund raising counsel or ce? If yes, complete Schedule 4a	ì.
5. Fee					
next page to calculate your	7A filing fee:	EPTL filing fee:	Total fee:	Make a single check or r payable to: 'Department of I	

CHAR500 Annual Filing for Charitable Organizations (Updated November 2014)

### KOCH GROUP & CO., LLP 333 SEVENTH AVENUE, FLOOR 8 NEW YORK, NY 10001-5118 (212) 631-0700

May 17, 2016

INTERNATIONAL LEADERSHIP CHARTER SCHOOL 322 WEST 231ST BRONX, NY 10463

Dear Client:

Your 2014 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Enclosed is your New York Annual Financial Report for Charitable Organizations. The original should be signed on page one. Two distinct officials of the organization must sign. No fee is payable with the filing of this report. Mail the report on or before November 16, 2015 to:

NYS OFFICE OF THE ATTORNEY GENERAL CHARITIES BUREAU REGISTRATION SECTION 120 BROADWAY NEW YORK, NY 10271

Please be sure to call us if you have any questions.

Sincerely,

MIAOLING LIN

# Form **990**

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public.

2014

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2014 calendar year, or tax year beginning 2014, and ending 7/01 , 2015 В D Employer identification number Check if applicable: INTERNATIONAL LEADERSHIP CHARTER SCHOOL Address change 74-3161540 322 WEST 231ST Name change BRONX, NY 10463 Initial return (718) 562-2300 Final return/terminated Amended return G Gross receipts \$ 4,700,743. Application pending **F** Name and address of principal officer: H(a) Is this a group return for subordinates? DR. ELAINE RUIZ LOPEZ Yes **H(b)** Are all subordinates included? If 'No,' attach a list. (see instructions) Yes SAME AS C ABOVE Tax-exempt status X 501(c)(3) 501(c) ( ) < (insert no.) 4947(a)(1) or 527 Website: ► WWW.ILCHS.ORG **H(c)** Group exemption number ▶ X Corporation Other ► L Year of formation: 2006 Form of organization: Association M State of legal domicile: NY Part I Summary Briefly describe the organization's mission or most significant activities: THE INTERNATIONAL LEADERSHIP CHARTER SCHOOL ("THE SCHOOL"), A 501(C)(3) TAX-EXEMPT ORGANIZATION, IS A PUBLIC CHARTER Governance HIGH SCHOOL LOCATED IN BRONX, NEW YORK. THE SCHOOL OPENED IN JANUARY 2006 AND CURRENTLY OPERATES CLASSES FOR NINTH TO TWELVE GRADE. Check this box ► | if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) ..... 3 6 Number of independent voting members of the governing body (Part VI, line 1b) ... 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . . . 5 41 Total number of volunteers (estimate if necessary)..... 6 20 7a Total unrelated business revenue from Part VIII, column (C), line 12 ... 0. **b** Net unrelated business taxable income from Form 990-T, line 34..... 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 268,173. 227,654. 4,165,448. 4,446,419. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)...... 1,780. 7,436. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 19,234. 10,872. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 4,446,273 4,700,743. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4) ..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... 1,839,762 2,036,466. **16a** Professional fundraising fees (Part IX, column (A), line 11e)..... **b** Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 17 2,850,349 2,588,618. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)...... 4,690,111. 4,625,084. Revenue less expenses. Subtract line 18 from line 12..... -243,838.75,659. **Beginning of Current Year** End of Year Total assets (Part X, line 16)..... 20,121,333 20,362,758 21 Total liabilities (Part X, line 26)..... 18,867,647 19,029,364. Net assets or fund balances. Subtract line 21 from line 20..... 22 1,253,686. 1,333,394 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Here CEO DR. ELAINE RUIZ LOPEZ Type or print name and title Print/Type preparer's name Preparer's signature Check MIAOLING LIN MIAOLING LIN self-employed P00431817 **Paid** Preparer ► KOCH GROUP & CO., LLP **Use Only** Firm's EIN ► 13-4195975 Firm's address 333 SEVENTH AVENUE, FLOOR 8

NEW YORK, NY 10001-5118

May the IRS discuss this return with the preparer shown above? (see instructions)

Nο

(212) 631-0700

Yes

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (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		Х
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.			
	<b>a</b> Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .	11 a	Х	
	<b>b</b> Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>	11 b		Х
	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		
	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>b</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		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	Х	V
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	<b>b</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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	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
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	<b>b</b> If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

# Form 990 (2014) INTERNATIONAL LEADERSHIP CHARTER SCHOOL Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Х
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		Χ
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
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.	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes', complete Schedule L, Part II.</i>	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	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):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA Form **990** (2014)

# Form 990 (2014) INTERNATIONAL LEADERSHIP CHARTER SCHOOL Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1 a	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	8			
ı	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0			
•	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1 c		Х
2 8	<b>a</b> 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	41			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2 b	Χ	
•	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				
3 :	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a		Х
	<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	ļ.	3 b		
		-			
	<ul> <li>a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If 'Yes,' enter the name of the foreign country: ►</li> </ul>		4 a		X
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)				
<b>.</b>	<b>a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	1	E o		Х
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	L	5 a 5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	l-	5 c		Λ
	-	F	30		
6 8	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6 a		Х
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6 b		
	Organizations that may receive deductible contributions under section 170(c).				
i	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7 a		Х
ı	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	[	7 b		
(	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7 c		Х
(	d If 'Yes,' indicate the number of Forms 8282 filed during the year				
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7 e		X
1	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7 f		X
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7 g		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7 h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		3		
	a Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
	<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	-	9 b		
	Section 501(c)(7) organizations. Enter:				
	a Initiation fees and capital contributions included on Part VIII, line 12				
	<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <b>10 b</b>				
11	Section 501(c)(12) organizations. Enter:				
ä	a Gross income from members or shareholders				
ı	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)				
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	<b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year   12b	j			
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	a Is the organization licensed to issue qualified health plans in more than one state?	[	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
ı	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				
	c Enter the amount of reserves on hand				37
	a Did the organization receive any payments for indoor tanning services during the tax year?	-	14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		14b	000	(2014)
АΑ	TEEA0105L 05/28/14		rorm	990	(2014)

Form 990 (2014) INTERNATIONAL LEADERSHIP CHARTER SCHOOL 74-3161540 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI...... Section A. Governing Body and Management Yes Nο 1 a Enter the number of voting members of the governing body at the end of the tax year......
If there are material differences in voting rights among members 6 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ...... 2 Χ 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 Χ Did the organization make any significant changes to its governing documents Χ since the prior Form 990 was filed?.... 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? ..... 5 X Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 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 Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Χ 12 c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 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? Χ a The organization's CEO, Executive Director, or top management official..... 15 a **b** Other officers or key employees of the organization..... 15 b Χ If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Χ taxable entity during the year?..... 16 a 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 16b organization's exempt status with respect to such arrangements?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records:

BRONX NY 10463 (718) 562-2300

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DR.ELAINE RUIZ LOPEZ 322 WEST 231ST

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

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

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

- 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 nor any related organization compensated any current officer, director, or trustee. (C) Position (do not check more than one box, unless person is both an officer and a (A) (B) (E) (F) Name and Title Reportable compensation from Reportable compensation from Estimated amount of other Average hours director/trustee) per week (list any hours for compensation from the organization the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) Officer Institutional employee ndividual trustee tighest compensated omor emplayee and related related organizations organiza tions i trustos below dotted line) (1) JOHN-PAUL GONZALEZ 2.5 CHAIRMAN Χ Χ 0 0 0. 0 (2) DR. ELAINE RUIZ LOPEZ 60 **CEO** 0 Χ Χ 166,925 0. 15,500. (3) LUPITA SAMUELS 2.5 **SECRETARY** 0 Χ Χ 0 0. 0 ANA KOESSLER 2.5 **TREASURER** Χ Χ 0 0 0 0. (5) ELISSA RAMOS 2.5 Χ **MEMBER** 0 0 0 0. DOREEN BERMUDEZ 2.5 (6) PARENT REP 0 Χ 0 0 0. (7) (8) (9) (10)(11)(12) (13)(14)

**BAA** TEEA0107L 02/27/14 Form **990** (2014)

, ,	(B)			· (0	<del>)</del>	· ·		•		•	· · ·
(A) Name and title	Average hours per week	offic	, unle cer ar	theck ess pe nd a o	erson direct	e than one is both an or/trustee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations		(F) Estima amount o compens	ited f other
	(list any hours for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officor	key emplayee	Former Highest compensated employee	the organization (W-2/1099-MISC)	relatéd organizations (W-2/1099-MISC)		from i organiz: and rel organiza	the ation ated
(15)											
<u>(16)</u>											
(17)		=									
(18)											
<u>(19)</u>											
<u>(20)</u>											
(21)											
(22)											
(23)		•									
<u>(24)</u>		-									
(25)		-									
1 b Sub-total						<b>&gt;</b>	166,925.	0		15	,500.
c Total from continuation sheets to Part VII, Section	on A					▶	0.	0			0.
d Total (add lines 1b and 1c)							166, 925. more than \$100,00	0 00 of reportable co	-		,500.
Tom the organization 1										Ye	s No
3 Did the organization list any <b>former</b> officer, direction line 1a? If 'Yes,' complete Schedule J for such	tor, or tru h individu	stee, al	key	em	ploy	ee, or h	ighest compensat	ed employee		3	X
<b>4</b> For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	50,00	00?	If 'Y	′es'	complet	e Schedule J for			4 \ \	ζ
5 Did any person listed on line 1a receive or accrume for services rendered to the organization? If 'Yes										5	Х
Section B. Independent Contractors	4 1 ( 1 -					1 11		¢100.000 -f			
Complete this table for your five highest compensation from the organization. Report comper									ear.		
(A) Name and business addi	ress						Description of			( <b>C)</b> npensa	
PROCIDA CONSTRUCTION CORP OF NY 456 EAST 1						IY 1045			4	•	,013.
PERKINS EASTMAN ARCHITECT 115 5TH AVENUE N						NV 100	ARCHITECT	DDD 0			<u>,201.</u>
JONES LANG LASALLE AMERICAS, INC 330 MADIS	ON AVEN	UE N	IEW	YUR	w,	MI 100	PROJECT MGMT	relo		182	,761.
2 Total number of independent contractors (including I		ited t	o the	ose	liste	d above)	who received more	e than			
\$100,000 of compensation from the organization	<b>-</b> 3										

(A) (B) (C) Total revenue Related or exempt function revenue revenue revenue	(D)  Revenue excluded from tax under sections
revenue	512-514
Ta Federated campaigns	
Business Code  2 a PER PUPIL FUNDING  b  c  d  e  f All other program service revenue  g Total. Add lines 2a-2f	
3 Investment income (including dividends, interest and	
other similar amounts) 7,436.  4 Income from investment of tax-exempt bond proceeds .   5 Royalties	7,436.
(i) Real (ii) Personal  6 a Gross rents	
assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)	
8 a Gross income from fundraising events (not including. \$ of contributions reported on line 1c).  See Part IV, line 18	
b Less: direct expensesb  c Net income or (loss) from fundraising events	
9 a Gross income from gaming activities. See Part IV, line 19 a	
b Less: direct expenses b  c Net income or (loss) from gaming activities  ▶	
10 a Gross sales of inventory, less returns and allowances	
Miscellaneous Revenue Business Code	
11a SENIOR DUES       900099       17,450.         b MISCELLANEOUS REVENUE       900099       1,784.         c	17,450. 1,784.
d All other revenue	
e Total. Add lines 11a-11d	26,670.

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do not include amounts reported on lines 6b, 7b, 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	Benefits paid to or for members					
5	Compensation of current officers, directors, trustees, and key employees	166,926.	116,848.	46,739.	3,339.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.	
7	Other salaries and wages	1,172,764.	862,095.	300,679.	9,990.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,112,101.	002,033.	300,073.	3,330.	
9	Other employee benefits	137,013.	100,118.	35,531.	1,364.	
10	Payroll taxes	559,763.	409,032.	145,162.	5,569.	
11	, , ,					
	Management					
	Legal	42,807.		42,807.		
	Accounting	44,500.		44,500.		
	d Lobbying.					
	Professional fundraising services. See Part IV, line 17					
	Investment management fees					
y	(A) amount, list line 11g expenses on Schedule 0)	114,530.	66,000.	48,530.		
12	Advertising and promotion	38,935.	38,935.			
13	Office expenses	41,892.	41,892.			
14	Information technology					
15	Royalties					
16	Occupancy	711,550.	519,946.	184,524.	7,080.	
17	Travel	18,892.	13,805.	4,899.	188.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings					
20	Interest	473,665.		473,665.		
21	Payments to affiliates					
22	· · · · · · · · · · · · · · · · · · ·	51,213.		51,213.		
	Insurance	82,586.	60,347.	21,417.	822.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)					
ā	UTILITIES	161,718.	118,171.	41,938.	1,609.	
ŀ	OCURRICULUM AND TEXTBOOK	157,888.	157,888.		·	
	STUDENT MEALS	145,114.	145,114.			
	OTHER_EXPENSES	135,706.	62,571.	73,135.		
	All other expenses	367,622.	212,544.	152,716.	2,362.	
25	Total functional expenses. Add lines 1 through 24e	4,625,084.	2,925,306.	1,667,455.	32,323.	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here   if following  SOP 98-2 (ASC 958-720)					

## Part X Balance Sheet

		Check if Schedule O contains a response or note to	any line	in this Part X			
					<b>(A)</b> Beginning of year		( <b>B</b> ) End of year
	1	Cash — non-interest-bearing			71,572.	1	71,307.
	2	Savings and temporary cash investments			682,734.	2	30,695.
	3	Pledges and grants receivable, net			,	3	,
	4	Accounts receivable, net	92,406.	4	40,224.		
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			·	5	,
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)( employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete		6			
2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
4	9	Prepaid expenses and deferred charges			934.	9	64,034.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	2 744 209			
	b	Less: accumulated depreciation.	10b	152,395.	2,606,702.	10 c	2,591,814.
	11	Investments – publicly traded securities			2,000,102.	11	2,001,014.
	12	Investments – other securities. See Part IV, line 11		<u> </u>		12	
	13	Investments – program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	604,060.
	15	Other assets. See Part IV, line 11.			16,666,985.	15	16,960,624.
	16				20,121,333.	16	20,362,758.
	17	Accounts payable and accrued expenses			1,017,647.	17	529,200.
	18	Grants payable	2,02.,01.,	18	02372001		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities	17,750,000.	20	17,750,000.		
o o	21	Escrow or custodial account liability. Complete Part I'	V of Sch	edule D	,	21	,
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated th		23			
	24	Unsecured notes and loans payable to unrelated third parties			100,000.	24	100,000.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.			100,000.	25	650,164.
	26				18,867,647.	26	19,029,364.
8		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	re ►	X and complete	,		,
Ę.	27	Unrestricted net assets			1,253,686.	27	1,333,394.
şa	28	Temporarily restricted net assets			·	28	
B	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30			
	31	Paid-in or capital surplus, or land, building, or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			1,253,686.	33	1,333,394.
Z	34	Total liabilities and net assets/fund balances	20,121,333.	34	20,362,758.		

**BAA** Form **990** (2014)

Pai	¹t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.		<u></u>	<u> </u>	X	
1	Total revenue (must equal Part VIII, column (A), line 12)	evenue (must equal Part VIII, column (A), line 12)				
2	Total expenses (must equal Part IX, column (A), line 25)	expenses (must equal Part IX, column (A), line 25)				
3	Revenue less expenses. Subtract line 2 from line 1				559.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			586.	
5	Net unrealized gains (losses) on investments. 5					
6	Donated services and use of facilities					
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	9	4,04		)49.	
10				1,333,394.		
Part XII   Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?					X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis					
ı	<b>b</b> Were the organization's financial statements audited by an independent accountant?					
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
(	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3 8	3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				Х	
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit						
or audits, explain why in Schedule O and describe any steps taken to undergo such audits						
BAA			Form	990	(2014)	

TEEA0112L 05/28/14

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

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is

OMB No. 1545-0047 2014

Open to Public

Department of the Treasury Internal Revenue Service Inspection at www.irs.gov/form990. Name of the organization Employer identification number INTERNATIONAL LEADERSHIP CHARTER SCHOOL 74-3161540 Part I 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 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 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.) 5 6 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.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 11 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.** Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations ..... g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (v) Amount of monetary (vi) Amount of other (iv) Is the organization listed in your governing organization support (see instructions) support (see instructions) (see instructions)) document? Yes No (A) (B) (C) (D) (E) Total

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

Schedule A (Form 990 or 990-EZ) 2014

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	<b>(f)</b> Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support	T						
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	<b>(f)</b> Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
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							
12	Gross receipts from related activ	rities, etc (see ins	tructions)					
13	<b>First five years.</b> If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ird, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	<b>&gt;</b>	
	tion C. Computation of Pu							
	Public support percentage for 20	• •	.,				%	
15	Public support percentage from	2013 Schedule A,	Part II, line 14			15	%	
16 a	16a 33-1/3% support test — 2014. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
k	b 33-1/3% support test — 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
17 a	<b>17a 10%-facts-and-circumstances test</b> − <b>2014.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
ŀ	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	ind-circumstances	s' test, check this	box and stop her	<b>e.</b> Explain in Part	VI how the	
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

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

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

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions and membership fees						
	received. (Do not include						
2	any 'unusùal grants.') Gross receipts from admis-						
_	sions, merchandise sold or						
	services performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
-	organization's benefit and						
	either paid to or expended on its behalf						
5	The value of services or						
	facilities furnished by a						
	governmental unit to the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1,						
	2, and 3 received from						
	disqualified persons						
t	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year						
(	Add lines 7a and 7b						
	Public support (Subtract line						
	7c from line 6.)						
	tion B. Total Support		T		T		
Calen	dar year (or fiscal yr beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from						
	similar sources						
t	Unrelated business taxable income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
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						
	čapital assets (Explain in						
12	Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11 and 12.)						
14	First five years. If the Form 990	is for the organiza	ı ation's first. secor	പ nd. third. fourth. o	r fifth tax vear as	a section 501	(c)(3)
	organization, check this box and	stop here					· · · · · · · · · · · · · · · · · · ·
	tion C. Computation of Pul						
	Public support percentage for 20	•	• •				15 %
16	Public support percentage from 2	2013 Schedule A,	Part III, line 15				16 %
Sec	tion D. Computation of Inv						
17	Investment income percentage for	or <b>2014</b> (line 10c,	column (f) divide	ed by line 13, colu	mn (f))	<u> </u>	17 %
18	Investment income percentage for						18 %
19 a	a <b>33-1/3% support tests</b> — <b>2014.</b> If is not more than 33-1/3%, check	the organization this box and <b>sto</b>	did not check the <b>p here.</b> The orgar	box on line 14, a nization qualifies a	and line 15 is more as a publicly supp	e than 33-1/39 orted organiza	6, and line 17 httion ▶
t	33-1/3% support tests — 2013. If line 18 is not more than 33-1/3%	the organization	did not check a b	oox on line 14 or li	ne 19a, and line 1	6 is more tha	n 33-1/3%, and
20			-		·		

### Part IV Supporting Organizations

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

### **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was			
2	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)	2		
	and (c) below	3a		
	<b>b</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 <b>Part VI</b> 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	3с		
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
	<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> 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 <b>Part VI</b> 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	4c		
5	a 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 <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
	<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990)</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)	8		
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in Part VI	9a		
	<b>b</b> Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI</i>	9b		
	c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		
10	a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below.	10a		
	<b>b</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.)	10b		

Pai	rt IV	Supporting Organizations (continued)			
11	Has t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
	A per	son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	•	rning body of a supported organization?	11a		
		nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		
Sec	tion I	B. Type I Supporting Organizations			
1	Did th	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
·	or ele Part \( \) If the	tot at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. Organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
	appli	ed to such powers during the tax year	1		
2	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec		C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees			
		ch of the organization's supported organization(s)? If No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec		D. All Type III Supporting Organizations			
				Yes	No
1	Did th	he organization provide to each of its supported organizations, by the last day of the fifth month of the			
-	orgar	nization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	orgar	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	orgar	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	voice	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at			
	all tin	mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard.	3		
Sec		E. Type III Functionally-Integrated Supporting Organizations	-		
		,, , , , , , , , , , , , , , , , , , ,			
	П.	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
		The organization satisfied the Activities Test. Complete line 2 below.			
	H	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 instructions	S).		
2	Activi	ities Test. Answer (a) and (b) below.		Yes	No
i	suppo organ	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported inizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
	subst	tantially all of its activities	2a		
ı	the o	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the nization's involvement.	2b		
_					
		nt of Supported Organizations. Answer (a) and (b) below.			
i	Did the each	he organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in</i> <b>Part VI</b>	3a		
ı	<b>)</b> Did th	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its			
	suppo	orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2014 INTERNATIONAL LEADERSHIP CHARTER SCHOOL 74-3161540 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year (A) Prior Year Section A — Adjusted Net Income (optional) 1 Net short-term capital gain..... 2 2 Recoveries of prior-year distributions. Other gross income (see instructions). 3 Add lines 1 through 3..... 4 Depreciation and depletion..... 5 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). Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)..... 8 (B) Current Year (A) Prior Year Section B — Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a 1b c Fair market value of other non-exempt-use assets ..... 1c d Total (add lines 1a, 1b, and 1c)..... 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Subtract line 2 from line 1d ..... 3 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 7 Recoveries of prior-year distributions. Minimum Asset Amount (add line 7 to line 6)..... 8

Current Year

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

BAA

Schedule A (Form 990 or 990-EZ) 2014

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)	
Sec	tion D – Distributions		·	Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	poses		
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	oported 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	<b>Total annual distributions.</b> Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2014 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-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions).			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
1	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
ī	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any.  Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

BAA

Schedule **A** (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

Name of the organization		Employer identification number		
INTERNATIONAL LEADERSHIP CHAR	TER SCHOOL	74-3161540		
Organization type (check one):				
Filers of:	Section:			
Form 990 or 990-EZ	$\overline{X}$ 501(c)( 3 ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	a private foundation		
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation		
	501(c)(3) taxable private foundation			
	our (o)(o) taxable private realization			
Check if your organization is covered by the Ge	neral Rule or a Special Rule			
<b>Note.</b> Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a	Special Rule. See instructions.		
General Rule				
X   For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Rules				
under sections 509(a)(1) and 170(b)(1)(A)(vi),	I (c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 e year, total contributions of the greater of (1) \$5,000 or ( 0-EZ, line 1. Complete Parts I and II.	, 16a, or 16b, and that		
during the year, total contributions of more t	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, children or animals. Complete Parts I, II, and III.	from any one contributor, literary, or educational		
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year				
990-PF), but it <b>must</b> answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Soe 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 9	990-EZ or on its Form 990-PF,		

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

Page

1 of

1 of **Part 1** 

Name of organization

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number 74-3161540

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	FEDERAL FUNDING TITLE I		Person X Payroll	
	400 MARYLAND AVENUE, SW	\$151,281.	Noncash	
	WASHINGTON , DC 20202		(Complete Part II for noncash contributions.)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	FEDERAL FUNDING TITLE I I		Person X Payroll	
	400 MARYLAND AVENUE, SW	\$ <u>6,</u> 908.	Noncash	
	WASHINGTON , DC 20202		(Complete Part II for noncash contributions.)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3	FEDERAL FUNDING IDEA		Person X Payroll	
	400 MARYLAND AVENUE, SW	\$18,689.	Noncash	
	WASHINGTON , DC 20202		(Complete Part II for noncash contributions.)	
(a)	(b)	(c) Total	(d) Type of contribution	
Number	Name, address, and ZIP + 4	contributions	Type of contribution	
4	FEDERAL FUNDING - FOOD		Person X	
	EEDEDAI EUNDING - EOOD			
	FEDERAL FUNDING - FOOD	contributions	Person X Payroll	
	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW	contributions	Person X Payroll Noncash  (Complete Part II for	
4	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  (b)	\$42,776.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)  (d) Type of contribution  Person X	
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4	\$42,776.	Person X Payroll Noncash (Complete Part II for noncash contributions.)  (d) Type of contribution	
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK	\$ 42,776.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)  Type of contribution  Person X Payroll	
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199	\$ 42,776.	Person X Payroll	
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199  HOUSTON , TX 77210	\$42,776.  Contributions  \$42,776.  Total contributions  \$5,000.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)  Type of contribution  Person X Payroll Noncash  (Complete Part II for noncash contributions.)  (Type of contributions.)	
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199  HOUSTON , TX 77210	\$42,776.  Contributions  \$42,776.  Total contributions  \$5,000.	Person X Payroll	
4 (a) Number	FEDERAL FUNDING - FOOD  400 MARYLAND AVENUE, SW  WASHINGTON , DC 20202  Name, address, and ZIP + 4  CAPITAL ONE BANK  PO BOX 4199  HOUSTON , TX 77210	\$42,776.  Contributions  \$42,776.  Total contributions  \$5,000.	Person X Payroll	

Name of organization

Page

T to

1 of Part II

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number 74-3161540

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
			•

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Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

1 to

of Part III

Name of organization
INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number

74-3161540

t	or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ompleting Part III, enter the total of (Enter this information once. See i	f exclusively religious, charitable, etc.,	NZ
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
	N/A 			
-	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gi	ft is held
-	Transferee's name, addres	Relationship of transferor to tran	sferee	

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8)

# SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	INTERNATIONAL LEADERSHIP CHARTER SCHOOL			74-3161540			
Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.						
- 0	Complete if the organization ans	wered 'Yes' to Form 990,	Part IV, line	6.			
		(a) Donor advised fu	nds	(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	are the organization's property, subject to the organization's exclusive legal control?						
6	6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No						
Par	Conservation Easements. Complete if the organization ans	wered 'Ves' to Form 990	Part IV line	7			
1	Purpose(s) of conservation easements held b			<i>7</i> .			
'	Preservation of land for public use (e.g.,	·	_ ' ' ' ' '	f a historically important land area			
	Protection of natural habitat	ecreation of education)		f a certified historic structure			
	Preservation of open space		r reservation c	i a certified flistofic structure			
2	Complete lines 2a through 2d if the organization	hold a gualified conservation contr	ibution in the for	m of a conservation easement on the			
_	last day of the tax year.	neid a quaimed conservation conti	ibulion in the ion	ii of a conservation easement on the			
				Held at the End of the Tax Year			
a	Total number of conservation easements			2a			
Ł	Total acreage restricted by conservation ease	ments		2b			
c	Number of conservation easements on a certi	fied historic structure included in	(a)	2c			
c	Number of conservation easements included in	n (c) acquired after 8/17/06, and	not on a histor	ic <b>2 d</b>			
3	structure listed in the National Register						
3	tax year	risierreu, reieaseu, extiriguisileu, u	i terrimated by t	the organization during the			
4	Number of states where property subject to conse	ervation easement is located ►					
5	Does the organization have a written policy re		inspection, har	– dling of violations.			
	and enforcement of the conservation easeme						
6	Staff and volunteer hours devoted to monitoring, $\ \ \blacktriangleright$	inspecting, and enforcing conserva-	ation easements	during the year			
7	Amount of expenses incurred in monitoring, insp	ecting, and enforcing conservation	easements durir	ng the year			
	▶\$	3,					
8	Does each conservation easement reported o and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requ	uirements of sec	tion 170(h)(4)(B)(i) Yes No			
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements.	s conservation easements in its re to the organization's financial sta	venue and exper atements that de	se statement, and balance sheet, and escribes the organization's accounting for			
Pav	t III Organizations Maintaining Colle	ections of Art. Historical T	reasures or	Other Similar Assets			
r ai	Complete if the organization ans	wered 'Yes' to Form 990,	Part IV, line	8.			
1 a	If the organization elected, as permitted unde art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its final	eld for public exhibition, education	or research in f	ue statement and balance sheet works of urtherance of public service, provide,			
Ł	If the organization elected, as permitted unde historical treasures, or other similar assets held following amounts relating to these items:	or public exhibition, education, or	research in furthe	erance of public service, provide the			
	(i) Revenue included in Form 990, Part VIII,						
	(ii) Assets included in Form 990, Part X						
	If the organization received or held works of art, amounts required to be reported under ${\sf SFAS}$	116 (ASC 958) relating to these	items:				
	Revenue included in Form 990, Part VIII, line	1		· .			
L	Accets included in Form 990 Part X			<b>▶</b> Ċ			

Part III Organizations Maintaining C	Collections of Art, Histo	orical Treasures, or	Other Similar Ass	ets (continued)			
3 Using the organization's acquisition, access items (check all that apply):							
a Public exhibition	<b>d</b> Loan	or exchange programs					
<b>b</b> Scholarly research	e Other						
c Preservation for future generations		-					
4 Provide a description of the organization's or Part XIII.	collections and explain how the	y further the organization	's exempt purpose in				
5 During the year, did the organization soli to be sold to raise funds rather than to be	cit or receive donations of art e maintained as part of the o	t, historical treasures, organization's	r other similar assets	Yes No			
Part IV Escrow and Custodial Arrar line 9, or reported an amoun	<b>ngements.</b> Complete if t nt on Form 990, Part X,	the organization an Iine 21.	swered 'Yes' to For	m 990, Part IV,			
1 a Is the organization an agent, trustee, cus on Form 990, Part X?	stodian, or other intermediary	for contributions or oth	er assets not included	Yes No			
<b>b</b> If 'Yes,' explain the arrangement in Part							
	•			Amount			
c Beginning balance			1с				
<b>d</b> Additions during the year			1d				
e Distributions during the year			1 e				
f Ending balance			1f				
2a Did the organization include an amount of	on Form 990, Part X, line 21,	for escrow or custodial	account liability?	Yes No			
<b>b</b> If 'Yes,' explain the arrangement in Part	XIII. Check here if the explan	nation has been provide	d in Part XIII				
Part V Endowment Funds. Comple							
	Current year (b) Prior yea	r (c) Two years back	k (d) Three years back	(e) Four years back			
1 a Beginning of year balance							
<b>b</b> Contributions							
c Net investment earnings, gains, and losses							
<b>d</b> Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
<b>g</b> End of year balance							
2 Provide the estimated percentage of the	current year end balance (lin	e 1g, column (a)) held	as:				
a Board designated or quasi-endowment ▶	<u> </u>						
<b>b</b> Permanent endowment ▶	% *						
c Temporarily restricted endowment ►	% %						
The percentages in lines 2a, 2b, and 2c	should equal 100%.						
<b>3 a</b> Are there endowment funds not in the posse organization by:	ession of the organization that	are held and administere	d for the	Yes No			
(i) unrelated organizations				3a(i)			
(ii) related organizations				3a(ii)			
<b>b</b> If 'Yes' to 3a(ii), are the related organiza	tions listed as required on So	chedule R?		. 3b			
4 Describe in Part XIII the intended uses of	f the organization's endowme	ent funds.					
Part VI Land, Buildings, and Equipr	nent.						
Complete if the organization	answered 'Yes' to Forn	n 990, Part IV, line	11a. See Form 99	0, Part X, line 10.			
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
<b>1 a</b> Land		2,530,000.		2,530,000.			
<b>b</b> Buildings							
c Leasehold improvements							
<b>d</b> Equipment		214,209.	152,395.	61,814.			
e Other							
Total. Add lines 1a through 1e. (Column (d) m	ust equal Form 990, Part X, o	column (B), line 10c.).		2,591,814.			
DAA			Sahad	Julo <b>D</b> (Form 990) 2014			

Part VII Investments – Other Securities.	IV I to Forms 000	N/A	00 David V Jima 10
Complete if the organization answered			
(a) Description of security or category (including name of security)  (1) Financial derivatives	<b>(b)</b> Book value	(c) Method of valuation: Cost or end-o	T-year market value
(1) Financial derivatives. (2) Closely-held equity interests.			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<u>(l)</u>			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) •		27.72	
Part VIII Investments – Program Related. Complete if the organization answered	'Yes' to Form 990	N/A ) Part IV_line 11c_See Form 99	00 Part X line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end	
(1)	. ,		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered	'Yes' to Form 990	), Part IV, line 11d. See Form 99	90, Part X, line 15.
	scription		(b) Book value
(1) CONSTRUCTION IN PROGRESS			11,022,455.
(2) RESTRICTED CASH HELD BY TRUSTEE (3) SECURITY DEPOSITS			5,795,432. 142,737.
(4)			142,737.
(5)			
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column (b)	3) line 15 )	<b>&gt;</b>	16 060 624
Part X Other Liabilities.	5), IIIIe 15.)		16,960,624.
Complete if the organization answered 'Yes' to Fo	orm 990, Part IV, line 11	1e or 11f. See Form 990, Part X, line 25	
(a) Description of liability	<b>(b)</b> Book value		
(1) Federal income taxes			
(2) ACCRUED INTEREST PAYABLE	511,20		
(4) LINE OF CREDIT PAYABLE	58,70 80,20		
(5)	00,20	03.	
(6)			
(7)			
(8)			
(9)			
(10)			
(11) Total (Column (h) must squal Form 000 Part V solumn (P) line 25.)	► CEO 1/	6.4	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	<u>►</u> 650,16	U+.	P. L. P. C.

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

Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Re	turn.	
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	4,700,743.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2 a		
<b>b</b> Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	4,700,743.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5	4,700,743.
Part VII Personalistian of Expenses new Audited Financial Statemen	. L. MACH. E	) a t	_
Part XII Reconciliation of Expenses per Audited Financial Statemen	its with Expenses per i	teturr	1.
Complete if the organization answered 'Yes' to Form 990, Pa		teturr	1.
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line 12a.	teturr 1	
	art IV, line 12a.	1	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements	art IV, line 12a.	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	art IV, line 12a.	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities	2a 2b	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.	2a 2b 2c	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses	2a	1	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)	2a 2b 2c 2d	1	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.	2a 2b 2c 2d	1 2 e	
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.	2a 2b 2c 2d	1 2 e	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.) SEE PART XIII	2a	1 2 e	4,621,035.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.) SEE PART XIII  c Add lines 4a and 4b	2a	1 2e 3	4,621,035. 4,621,035. 4,049.
Complete if the organization answered 'Yes' to Form 990, Pa  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments.  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.) SEE PART XIII	2a	1 2 e 3	4,621,035.

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

### **PART X - FIN 48 FOOTNOTE**

IN JANUARY 2006 THE SCHOOL FILED AND RECEIVED APPROVAL OF ITS APPLICATION FOR TAX EXEMPT STATUS FROM THE INTERNAL REVENUE SERVICE UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS BEEN CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION AS DESCRIBED IN INTERNAL REVENUE CODE SECTION 509 (A)(1) AND 170 (B)(1)(A)(II).

MANAGEMENT BELIEVES THAT THE ORGANIZATION HAS NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION. THE SCHOOL IS NO LONGER SUBJECT TO INCOME

Schedule **D** (Form 990) 2014

Part XIII Supplemental Information (continued)

### PART X - FIN 48 FOOTNOTE (CONTINUED)

TAX EXAMINATION BY FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2011, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.

### SCHEDULE D, PART XII, LINE 4B OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

DEPRECIATION	\$ 4,049.
TOTAL	\$ 4,049.

**BAA** TEEA3305L 08/25/14 Schedule **D** (Form 990) 2014

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

### **Schools**

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

74-3161540

INTERNATIONAL LEADERSHIP CHARTER SCHOOL
Part I

			YES	NO
1	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	Х	
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	V	
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		X	
	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.		Х	
	SEE PART II			
_				
	Does the organization maintain the following?  Records indicating the racial composition of the student body, faculty, and administrative staff?	4 a	Х	
ŀ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4 b	Х	
(	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?			
(	Copies of all material used by the organization or on its behalf to solicit contributions?			
	If you answered 'No' to any of the above, please explain. If you need more space, use Part II.			
	Does the organization discriminate by race in any way with respect to:  a Students' rights or privileges?	5 a		Х
	Admissions policies?			X
	Employment of faculty or administrative staff?			
				X
	Scholarships or other financial assistance?			Х
	Educational policies?	5 e		X
f	Use of facilities?	5 f		Х
Ģ	g Athletic programs?	5 g		Х
ł	n Other extracurricular activities?	5 h		X
6 a	a Does the organization receive any financial aid or assistance from a governmental agency?	6 a	X	
ŀ	Has the organization's right to such aid ever been revoked or suspended?	6 b		Х
7	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	X	

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

### SCHEDULE E, LINE 3 - RACIALLY NONDISCRIMINATORY POLICY PUBLICIZED

THE SCHOOL IS REQUIRED TO ADHERE TO THE PROVISIONS OF SECTION 2854 (2) OF THE EDUCATION LAW TO GUIDE THE ADMISSION POLICIES AND PROCEDURES.

THE SCHOOL IS OPEN TO ANY STUDENT WHO IS QUALIFIED UNDER THE LAWS OF NEW YORK FOR ADMISSION TO A PUBLIC SCHOOL. ADMISSION OF STUDENTS WILL BE NOT BE LIMITED ON THE BASIS OF INTELLECTUAL ABILITY, MEASURES OF ACHIEVEMENT OR APTITUDE, ATHLETIC ABILITY, DISABILITY, RACE, CREED, NATIONAL ORIGIN, RELIGION, ANCESTRY, PROFICIENCY IN ENGLISH OR ANY OTHER GROUND THAT WOULD BE UNLAWFUL.ADMISSION TO ILCH IS FREE & OPEN TO ALL STUDENTS ELIGIBLE TO ATTEND PUBLIC SCHOOL IN NYC.

### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

2014

Open to Public Inspection

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number 74-3161540

Pai	t I Questions Regarding Compensation		•	•	
				Yes	No
1 a	Check the appropriate box(es) if the organization provided any VII, Section A, line 1a. Complete Part III to provide any rele	of the following to or for a person listed in Form 990, Part evant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
I	If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described	n follow a written policy regarding payment or d above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimburs trustees, and officers, including the CEO/Executive Director	sing or allowing expenses incurred by all directors, r, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization us CEO/Executive Director. Check all that apply. Do not check establish compensation of the CEO/Executive Director, but	led to establish the compensation of the organization's any boxes for methods used by a related organization to explain in Part III.			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	$\fbox{X}$ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII or a related organization:	,			
		nt?	4 a		Х
		Inqualified retirement plan?	4 b 4 c		X
•	If 'Yes' to any of lines 4a-c, list the persons and provide the	•	40		X
	Only section 501(c)(3) 501(c)(4), and 501(c)(29) organization	ons must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a contingent on the revenues of:	, did the organization pay or accrue any compensation			
ä	The organization?		5 a		Х
ı	-		5 b		Χ
	If 'Yes' to line 5a or 5b, describe in Part III.				
6	For persons listed in Form 990, Part VII, Section A, line 1a contingent on the net earnings of:	, did the organization pay or accrue any compensation			
	The organization?		6 a		X
l	a Any related organization?		6 b		Х
7	For persons listed in Form 990, Part VII, Section A, line 1a	did the organization provide any non-fixed			
,	payments not described in lines 5 and 6? If 'Yes,' describe	in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or a to the initial contract exception described in Regulations se	ction 53.4958-4(a)(3)?			
	If 'Yes,' describe in Part III		8		Х
9	If 'Yes' to line 8, did the organization also follow the rebuttable section 53.4958-6(c)?	presumption procedure described in Regulations	9		

Schedule **J** (Form 990) 2014

74-3161540

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown o	of W-2 and/or 1099-MI	SC compensation	(C) Retirement	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(I)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
DR. ELAINE RUIZ LOPEZ	(i)	166,925.	0.	0.	0.	15,500.	182,425.	0.
1 CEO	(ii)	0.	<u>0</u> :	<del>0</del> .	† <u>ō.</u>	0.	0.	0.
	(i)			,			, ,	
2	(ii)				†		<del> </del>	
	(i)							
3	(ii)							
	(i)				L		L	
4	(ii)							
	(i)				<b>1</b>		<b>_</b>	
5	(ii)							
_	(i)				<b></b>		<b> </b>	
6	(ii)							
7	(i)				<b>+</b>		<b></b>	
7	(ii)							
8	(i) (ii)				+		<del> </del>	
	(i)							_
9	(ii)				<del> </del> -		+	
-	(i)							
10	(ii)				†		<del> </del>	
	(i)							
11	(ii)				T		T	
	(i)							
12	(ii)							
	(i)				<b>_</b>			
13	(ii)							
	(i)				<b>_</b>		L	
14	(ii)							
	(i)		<u> </u>		<b>↓</b>		<b></b>	
15	(ii)							
10	(i)				<b></b>		<b></b>	
16	(ii)							(5

BAA

TEEA4102L 06/19/14

Schedule **J** (Form 990) 2014

### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

TEEA4103L 10/17/14

### **SCHEDULE K** (Form 990)

### **Supplemental Information on Tax-Exempt Bonds**

OMB No. 1545-0047

Complete if the organization answered 'Yes' on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 ► Attach to Form 990.
 ► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

INT	TERNATIONAL LEADERSHI	IP CHARTER SCHO	OL							74	-316	1540	)			
Par	t I Bond Issues															
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	rice	(1	(f) Description of purpose		Defe	g) ased	(h) beha issi	lf of	(i) Poo	oled	
											Yes	No	Yes	No	Yes	No
<b>A</b>	BUILD NYC RESOURCE CORP.	45-4040561	12008EBC9	3/01/2013	2,92	0,000.	SPEC.L	IMITEI	REV.OBL	IGATIONS		X		Χ		X
<b>B</b>	BUILD NYC RESOURCE CORP.	45-4040561	12008EBD7	3/01/2013	5,36	0,000.	SPEC.L	IMITE	REV.OBL	IGATIONS		Χ		X		Χ
	BUILD NYC RESOURCE CORP.	45-4040561	12008EBB1	3/01/2013	9,47	0,000.	SPEC.L	IMITEI	REV.OBL	IGATIONS		X		X		Χ
D																
Par	t II Proceeds				1	_	-		_							
						4		E	3	С				D		
	Amount of bonds retired					65,00	00.									
	Amount of bonds legally defeas															
3	Total proceeds of issue				17,7	50,00	00.									
4	Gross proceeds in reserve fund	ls														
	Capitalized interest from proceed															
	6 Proceeds in refunding escrows															
	7 Issuance costs from proceeds				24,89	90.										
	Credit enhancement from proce															
	Working capital expenditures fr															
10	Capital expenditures from proce	eeds			13,5	52,45	55.									
11	Other spent proceeds															
12	Other unspent proceeds															
13	Year of substantial completion															
					Yes	No	,	es	No	Yes	No	)	Ye	s	No	,
14	Were the bonds issued as part	of a current refunding i	ssue?		. X											
15	Were the bonds issued as part	of an advance refunding	g issue?			Х										
16	Has the final allocation of proce	eeds been made?				Х										
17	Does the organization maintain of proceeds?	adequate books and re	ecords to support	the final allocation		Х										
Par	t III Private Business Us				1	ı	<u>l</u>			I		I				
						4		E	3	C	;			D	)	
					Yes	No	,	es	No	Yes	No	,	Ye	s	No	,
1	Was the organization a partner property financed by tax-exemp	in a partnership, or a ropt bonds?	member of an LLO	C, which owned		Х										
2	Are there any lease arrangeme bond-financed property?	ents that may result in p	rivate business ι	use of		Х										

Part III Private Business Use (Continued)

		4	E	3	(	:		)
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		Х						
<b>b</b> If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		Х						
<b>d</b> If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		olo		90		olo		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		9/0		00		9/0		%
6 Total of lines 4 and 5		%		%				%
7 Does the bond issue meet the private security or payment test?		Х						
8 a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
<b>b</b> If 'Yes', to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If 'Yes' to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							
Part IV Arbitrage								
	1	4	E	3	(	;	D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If 'No' to line 1, did the following apply?								
a Rebate not due yet?		Х						
<b>b</b> Exception to rebate?		X						
c No rebate due?		X						
If 'Yes' to line 2c, provide in Part VI the date the rebate computation was performed.								
3 Is the bond issue a variable rate issue?		Х						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
<b>b</b> Name of provider		•						
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

TEEA4401L 06/18/14

Page 3

Part IV | Arbitrage (Continued)

	Α		В		С		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>5 a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
<b>b</b> Name of provider		•		•		•		•
c Term of GIC.								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
<b>6</b> Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the requirements of section 148 ?	Х							

#### Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?.....

	Į.	4	В С			С		D
1	Yes	No	Yes	No	Yes	No	Yes	No

**Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

#### ADDITIONAL INFORMATION

ON MARCH 21, 2013, BUILD NYC RESOURCE CORPORATION PROVIDED CONSTRUCTION AND PERMANENT FINANCING THROUGH THE ISSUANCE OF \$17,750,000 IN TAX-EXEMPT REVENUE BONDS (THE "SERIES 2013 BONDS"), WITH PRINCIPAL AMOUNTS, INTEREST RATES AND MATURITY DATES AS FOLLOWS: PRINCIPAL

**AMOUNTS** INTEREST RATES DUE DATES

JULY 1, 2023 \$ 2,920,000 5.00% 5.75% JULY 1, 2033 5,360,000 6.00% JULY 1, 2043 9,470,000

THE PROCEEDS FROM THE SALE OF THE BONDS, TOGETHER WITH OTHER AVAILABLE FUNDS, WERE USED TO (1) REFINANCE OR REIMBURSE THE SCHOOL FOR CERTAIN COSTS OF ACQUIRING, CONSTRUCTING, RENOVATING, EQUIPPING AND FURNISHING ITS FUTURE EDUCATIONAL FACILITY; (2) FUND THE SERVICE RESERVE FUND ESTABLISHED UNDER THE INDENTURE IN AN AMOUNT EQUAL TO THE DEBT SERVICE RESERVE FUND REQUIREMENT OF THE BONDS; (3) COVER INTEREST ON THE BONDS DURING CONSTRUCTION FOR A PERIOD OF SIXTEEN MONTHS; AND (4) PAY CERTAIN COSTS OF ISSUING THE SERIES 2013 BONDS.

THE BONDS ARE SECURED BY THE PLEDGE AND ASSIGNMENT TO THE TRUSTEE OF THE TRUST ESTATE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS. THE OBLIGATIONS OF THE SCHOOL UNDER THE LOAN AGREEMENT ARE SECURED BY THE MORTGAGES ASSIGNED TO THE TRUSTEE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS.

INTEREST ON THE BONDS IS PAYABLE INITIALLY ON JULY 1, 2013 AND SEMIANNUALLY THEREAFTER ON EACH JANUARY 1ST AND JULY 1ST COMPUTED ON THE BASIS OF A 360-DAY YEAR OF TWELVE 30-DAY MONTHS. THE AMOUNT OF THE INTEREST THAT WAS CAPITALIZED AS IT RELATED TO THE

74-3161540

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued)

### ADDITIONAL INFORMATION (CONTINUED)

FINANCING OF THE SCHOOL'S FACILITY WAS \$551,999 FOR THE YEAR ENDED JUNE 30, 2015.

PRINCIPAL AND INTEREST PAYMENTS DUE ON THE BONDS BY FISCAL YEAR ARE AS FOLLOWS:

FISCAL	YEAR								
ENDEDP:	RINCIPAL	INTEREST	TOTAL						
2016	\$265,000	1,015,775	1,280,775						
2017	280,000	1,002,150	1,282,150						
2018	290,000	987,900	1,277,900						
2019	305,000	973,020	1,278,025						
2020	320,000	957,400	1,277,400						
2021									
AND									
THEREAFTER									
	16,290,000	14,133,663	30,423,663						

INTERNATIONAL LEADERSHIP CHARTER SCHOOL USED THE PROCEEDS FROM THE SALE OF THE BONDS, TOGETHER WITH OTHER AVAILABLE FUNDS, WERE USED TO (1) REFINANCE OR REIMBURSE THE SCHOOL FOR CERTAIN COSTS OF ACQUIRING, CONSTRUCTING, RENOVATING, EQUIPPING AND FURNISHING ITS FUTURE EDUCATIONAL FACILITY; (2) FUND THE SERVICE RESERVE FUND ESTABLISHED UNDER THE INDENTURE IN AN AMOUNT EQUAL TO THE DEBT SERVICE RESERVE FUND REQUIREMENT OF THE BONDS; (3) COVER INTEREST ON THE BONDS DURING CONSTRUCTION FOR A PERIOD OF SIXTEEN MONTHS; AND (4) PAY CERTAIN COSTS OF ISSUING THE SERIES 2013 BONDS.

THE BONDS ARE SECURED BY THE PLEDGE AND ASSIGNMENT TO THE TRUSTEE OF THE TRUST ESTATE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS. THE OBLIGATIONS OF THE SCHOOL UNDER THE LOAN AGREEMENT ARE SECURED BY THE MORTGAGES ASSIGNED TO THE TRUSTEE FOR THE BENEFIT OF THE HOLDERS OF THE BONDS.

TEEA4402L 08/20/14

### 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.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

Employer identification number

74-3161540

### FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

THE INTERNATIONAL LEADERSHIP CHARTER SCHOOL ("THE SCHOOL"), A 501(C)(3) TAX-EXEMPT ORGANIZATION, IS A PUBLIC CHARTER HIGH SCHOOL LOCATED IN BRONX, NEW YORK. THE SCHOOL OPENED IN JANUARY 2006 AND CURRENTLY OPERATES CLASSES FOR NINTH TO TWELVE GRADE.

THE SCHOOL'S CHARTER WAS RENEWED ON JUNE 16, 2015 FOR AN ADDITIONAL FIVE YEARS. THE MISSION OF THE SCHOOL IS TO PREPARE THE YOUNG MEN AND WOMEN OF THE BRONX NOT ONLY FOR THE DEMANDS OF HIGHER EDUCATION, BUT ALSO FOR LEADING LIVES OF MEANING. ITS TEACHING PHILOSOPHY PROVIDES POWERFUL LEARNING EXPERIENCES THAT STRESS ENGAGEMENT, DISCOVERY, AND THE ACTIVE APPLICATION OF LEARNING OF THE WORLD AROUND US.

#### FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

THE SCHOOL IMPLEMENTS AN ACADEMICALLY RIGOROUS REGENTS AND COLLEGE-PREPARATORY

CURRICULUM THAT ELEVATES STUDENTS' INTELLECTUAL CAPACITY AND PROVIDES A SUPERIOR HIGH

SCHOOL EDUCATION THAT HAS GAINED NATIONAL RECOGNITION PROVING THAT OUR ACADEMICALLY

RIGOROUS PROGRAM IS EFFECTIVE, DEDICATED TO EMPOWERING TOMORROW'S LEADERS. IN 2013,

THE SCHOOL PLACED IN THE TOP 1% OF HIGH SCHOOLS (#6 OUT OF 500 NYC HIGH SCHOOLS) AND

WAS THE RECIPIENT OF A BRONZE AWARD FROM THE US NEWS & WORLD REPORT FOR BEST HIGH

SCHOOLS 2013 NATIONALLY. THE SCHOOL'S ACADEMIC PROGRAM HAS PRODUCED A SCHOOL WITH A

GRADUATION RATE OF 96.2% (THE MAJORITY OF WHOM MATRICULATED INTO A 4-YEAR COLLEGE OR

UNIVERSITY) AND REGENT EXAM SCORES HIGHER THAN SCHOOLS IN ITS DISTRICT AND THE STATE.

ON MARCH 21, 2013 THE SCHOOL BECAME THE FIRST CHARTER SCHOOL TO SUCCESSFULLY CLOSE ON

A \$17,750,000 MUNICIPAL BOND FINANCING ISSUED BY BUILD NYC FOR A NEW FACILITY. WE

HAVE A STRATEGIC 18 MONTH PLAN FOR THE DESIGN AND CONSTRUCTION OF A STATE OF THE ART

SCHOOL FACILITY. THE NEW FACILITY WILL BE A 28,500 SQUARE FOOT, THREE-STORY, STATE OF

THE ART FACILITY THAT WILL CONTAIN 17 CLASSROOMS AND NINE FLEX ROOMS, SUPPORTING

STUDENT ACTIVITIES AND DEVELOPMENT SPACE, AND WITH THE CAPACITY TO ACCOMMODATE

### FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

ENROLLMENT TO 400 STUDENTS. THE NEW FACILITY WILL BE LOCATED ON TWO CONTIGUOUS

PARCELS TOTALING 15,400 SQUARE FEET AT 322 WEST 231ST STREET IN THE KINGSBRIDGE

NEIGHBORHOOD OF THE BRONX, ONLY A FEW BLOCKS AWAY FROM THE SCHOOL'S CURRENT LOCATION

IN THE MARBLE HILL NEIGHBORHOOD. THE SCHOOL HAS AN EXTENDED SCHOOL DAY THAT FEATURES

60 AND 90 MINUTE CLASS PERIODS. STUDENTS RECEIVE 180 MINUTES PER WEEK IN EACH CORE

SUBJECT, WHICH ACCORDING TO MANAGEMENT IS VIEWED FAVORABLY BY BOTH PARENTS AND

TEACHERS. FURTHER SUPPORTING STUDENTS, THE SCHOOL OFFERS AFTER-SCHOOL TUTORING, AND

DURING JANUARY STUDENTS ARE REQUIRED TO ATTEND 'SATURDAY ACADEMY' FOR THREE HOURS.

THE PURPOSE OF SATURDAY ACADEMY IS TO PROVIDE STUDENTS WITH SUBJECT INTENSIVE STUDY

FOR REGENTS EXAMS.

### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

A DRAFT OF THE FEDERAL FORM 990 IS FIRST REVIEWED BY THE CONTROLLER OF THE MANAGEMENT COMPANY. THE FINAL DRAFT OF THE FED FORM 990 IS THEN CIRCULATED TO BOARD MEMBERS FOR THEIR REVIEW AND COMMENTS PRIOR TO THE SIGNING AND FILING OF THE FEDERAL FORM 990 WITH THE IRS.

### FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

ALL FINANCIAL STATEMENTS AND TAX RETURNS ARE OPEN FOR PUBLIC INSPECTION UPON REQUEST. ALL FINANCIAL STATEMENTS AND TAX RETURNS ARE SUBMITTED TO GRANT-MAKING GOVERNMENT AGENCIES. ALSO, THE ORGANIZATION TIMELY FILES ITS NYS CHAR 500 ANNUAL REPORT WITH THE OFFICE OF THE NY STATE ATTORNEY GENERAL. THE NYSOAG POSTS THE ORGANIZATION'S FINANCIAL STATEMENTS, FED 990 TAX RETURN AND THE NYS CHAR 500 ON ITS CHARITITES BUREAU INTERNET WEBSITE.

### FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

DEPRECIATION ADJUSTMENT \$ 4,049.
TOTAL \$ 4,049.

2014

### **FEDERAL SUPPORTING DETAIL**

PAGE 1

INTERNATIONAL LEADERSHIP CHARTER SCHOOL

74-3161540

INFO (	ON TAX E	XEMPT	BONDS	(SCH K)
<b>AMOU</b>	NT OF BO	ONDS RE	ETIRED	,
<b>BUILD</b>	NYC RES	SOURCE	CORP.	

RETIRED ON 7/1/2015 \$ 265,000. TOTAL \$ 265,000.

## CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to: NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271 2014

Open to Public Inspection

### 1. General Information

For Fiscal Year Beginning (mm/d	d/yyyy)	07/01 / <b>2014</b> and E	nding (mm/dd/yyyy)	06/30/2015	
Check if Applicable:	Name of Organizat		<u> </u>		loyer Identification Number (EIN):
Address Change				74	-3161540
Name Change	INTERNATI	ONAL LEADERSHI	P CHARTER SCH	COOL	
Initial Filing	Mailing Address:			NY F	Registration Number:
Final Filing	322 WEST	231ST			-76-93
	City/State/Zip:	- 10460			phone:
Amended Filing	BRONX, NY Website:	2 10463		Ema	18) 562-2300 ii:
Reg ID Pending	WWW.ILCHS	S.ORG		), T.H	OPEZ@ILCHS.ORG
Check your organization's registration category:	A only EPTL o		PTL) X EXEMPT	Find your registration of	
2. Certification					,
See instructions for certification r	eguirements. Imp	proper certification is a	violation of law that r	may be subject to penal	Ities.
	<u> </u>	·			
We certify under penalties of p they are true, corre	perjury that we re ect and complete	viewed this report, incl in accordance with the	uding all attachments laws of the State of l	, and to the best of our New York applicable to	this report.
President or Authorized Officer:		DR. EL	AINE RUIZ L	CEO	
Tresident of Addionized Officer.	Signature	Printed Name	е	Title	Date
Ohief Financial Officer on Transcomm					
Chief Financial Officer or Treasurer:	Signature	Printed Name	е	Title	Date
3. Annual Reporting Exem	ption				
Check the exemption(s) that apply the both categories (DUAL filers) that schedules, or additional attachme you must file applicable schedule	apply to your regents are required.	gistration, complete on If vou cannot claim ar	ly parts 1, 2, and 3, and second in exemption or are a l	and submit the certified	Char500. No fee,
<b>3a. 7A filing exemption</b> : Total \$25,000 <b>and</b> the organization duthe fiscal year. Or the organization	lid not engage a pr	ofessional fund raiser (F	PFR) or fund raising co		
<b>3b. EPTL filing exemption</b> : Grosduring the fiscal year.	ss receipts did not	exceed \$25,000 and the	e market value of asset	s did not exceed \$25,000	at any time
4. Schedules and Attachm	ents				
See the following page for a checklist of schedules and attachments to complete your filing.	CC	o-venturer for fund rais	ing activity in NY Sta	raiser, fund raising coute? If yes, complete Schots? If yes, complete Schots?	hedule 4a.
5. Fee					
See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	A filing fee:	EPTL filing fee:	Total fee: \$0.	ра	check or money order yable to: tment of Law'

CHAR500 Annual Filing for Charitable Organizations (Updated November 2014)

International Leadership Charter School
Bank Reconciliation Summary
As of Date: 6/30/2015
Acct: 1039 - TD Bank Escrow Sub Account

= Unreconciled Amount:	- Book Balance:	+ Other Adjustments:	+ Deposits in Transit:	+ Outstanding Checks:	Statement Balance:	
0.00	71,307.48	0.00	0.00	0.00	71,307.48	

Cleared Debits:
Cleared Credits:

0.00 23.40 23.40

Intern	ational Lea	adership C
Fiscal Year	2015-16 Projection	2016-17 Projection
	Boi	nd Require
Series 2013 Bond 1 Debt Service TD Bond 2 Debt Service		1,285,150.00 <u>194,733.33</u> 1,479,883.33
	6,432.83	12,088.67
Debt Service Ratios  Net Operating Income - revenue minus expense before depreciation  Total Debt Service		2,032,809.66 1,479,883.33 1.37
Cash on Hand		
Total Operating Expenes - does not include depreciation or bond related fees  Days in Year	<u>4,551,880</u> 365	<u>4,288,574</u> 365
Total Operating Exp (Annual)/# Days in Year	12,471	11,750
Projected Ending Cash	(465,311)	(224,623)
Projected Days of Cash on Hand	(37.31)	(19.12)
Cash on hand needed to meet covenant	374,127	352,486
	-	-

harter Hig	h School	
2017-18 Projection	2018-19 Projection	
ements		
270,500.00		Debt Service Includes Sinking Fund Debt Service Includes Sinking Fund
12,500.00	13,000.00	Annual Fees - Estimated
· · · · · · · · · · · · · · · · · · ·	1,835,844.49 1,556,900.00 1.18	This is only the debt service payment
4,240,039	4,313,539	
365	365	
11,617	11,818	
100,921 8.69 348,496	351,716 29.76 354,537	
-	-	

	International Lea	adership C
Fiscal Year	2015-16 Projection	2016-17 Projection
State Grants		
Generel Education Per Pupil Special Education Per Pupil	4,699,793	5,610,800
Special Education - 20-60% Special Education - >60%	379,755 -	259,750 38,098
Special Education - ASD  Total SpEd Per Pupil	<u>379,755</u>	<u>297,848</u>
Supplemental Per Pupil Revenue Subtotal Per Pupil Revenue	5,079,547	<u>172,000</u> <b>6,080,648</b>
Federal Grants		
IDEA Special Needs	29,696	29,696
Title I	166,939	166,939
Title IIA - Professional Development	6,716	6,716
E-Rate	38,377	12,792
Food Service		
Federal and State Meal Reimbursement	49,427	49,427
Subtotal Food Service Subtotal Federal Funding	<u>49,427</u> 223,082	<u>49,427</u> 223,082
Grants/Contributions		
Individual Contributors (5000)	-	-
Corporate Contributors (5005) Subtotal Grants/Contributions -	<del>-</del>	<u>-</u> -
- Dividend & Interest Income (5025/5030) -	<u>873</u> <b>873</b>	873 <b>873</b>
Other Income Misc Revenue (5035)	-	-

Special Events (5040)	4,781	4,781
Senior Dues (5060)	<u>31,471</u>	12,000
Subtotal Other Income	36,252	16,781
Total Revenue and Support	5,339,754	6,321,384
Personnel Salaries		
Administrative Personnel		
Director of Curriculum & Instruction	130,000	133,900
Administrative Personnel	267,615	275,643
Chief Executive Officer	196,447	202,341
Operations & Finance	100,000	100,000
Other Clerical/Admin	37,499	38,624
Total Administrative Personnel	731,561	750,507
Instructional Personnel		
General Education Teachers	1,042,853	1,194,138
Foreign Language Teachers	55,167	56,822
Title I Teachers	<u>-</u>	61,442
Total Instructional Personnel	1,098,020	1,312,402
Non-Instructional Personnel		
Social Worker	120,480	124,094
Counselor	<u>70,554</u>	72,671
Total Non-Instructional Personnel	191,034	196,766
Total Salaries	2,020,615	2,259,675
Payroll Taxes and Benefits		
Social Security	125,278	140,100
Medicare	29,299	32,765
NYSUI	31,249	26,486
Madical	100 455	225 022
Medical  Dental/Vicion	196,455	225,923
Dental/Vision	16,920	19,458
Life/STD/STD	2,578	2,648

Workers Compensation	-	-
401K/403B Employer Match	<u>-</u> _	45,193.49
Total Taxes and Benefits	401,779	492,573
6000 Professional Services/Contracted		
6001 Audit Fees	12,000	20,000
6002 Legal - Paid	88,685	40,000
6005 Payroll Service Fees	5,799	8,500
6006 Academic Consultants	16,150	20,000
6009 Substitute Services	38,082	38,843
6010 Prof/Contracted Svcs-Other	23,500	23,970
6011 Financial Management Services	94,454	108,000
6013 Security Contracted	<u>137,499</u>	<u>152,886</u>
Total 6000 Professional Services/Contracted	416,168	412,199
6200 Curriculum Supplies and Materials		
6201 Textbooks and Workbooks	21,779	26,135
6203 Classroom Supplies & Materials	2,049	2,429
6205 Art Supplies & Materials	665	797
6209 Student Incentives	29,545	16,605
6350 Supplies & Materials Other		-
6352 Library Supplies/Books	1,429	<u>1,714</u>
Total 6350 Supplies & Materials Other	<u>1,429</u>	<u>1,714</u>
Total 6200 Curriculum Supplies and Materials	55,465	47,681
6400 Student Testing & Assessment		
6401 Testing & Assessment Materials	14,900	17,598
6402 Testing & Assessment Scoring	1,200	1,417
Total 6400 Student Testing & Assessment	16,100	19,015
6500 Student Services		
6501 Field Trips & Events		
6502 Field Trips	20,180	23,834
6503 Assemblies & Programs	4,000	4,724
Total 6501 Field Trips & Events	24,180	28,559
6600 School Meals/Lunches		
6601 Food Services	204,568	180,035

Total 6600 School Meals/Lunches	204,568	180,035
6701 Enrichment Programs	38,250	20,564
6702 Uniforms	2,247	2,707
6705 Other Student Services	299	360
Total 6500 Student Services	269,544	232,225
7000 Office Expenses		
7001 Office Supplies	12,180	13,436
7002 Printing & Copying	8,523	9,960
7003 Postage & Shipping	8,864	10,368
7004 Meeting Expenses & Team Building	660	795
7005 Other Miscellaneous Service Cost	<u>-</u>	<u>-</u>
Total 7000 Office Expenses	30,228	34,559
7100 Equipment & Furniture (non-capitalized)		
7101 Leased Equipment	15,754	10,771
7102 Equipment Purchases	1,999	2,447
7104 Equipment Repairs & Maintenance	699	612
7304 Equipment (non-capitalized)	950	011
7305 Software (non-capitalized)	509	439
Total 7100 Equipment & Furniture (non-capitalized)	19,911	14,269
7200 Communication		
	10.424	22 775
7201 Telephone & Fax 7300 Technology	19,424	23,775
7300 Technology 7301 Internet	902.26	920
7302 Technology Services	44,527	50,395
7303 Technology Supplies	1,354	1,380.60
7306 Website Maintenance	12,000	14,688
Total 7300 Technology	58,783	66,134
Total 7200 Communication	78,207	89,909
	,	,
7400 Staff Professional Development		
7401 PD - Administrative Staff	3,000	15,000
7402 PD - Instructional Staff	61,607	60,407
Total 7400 Staff Professional Development 7500 Recruitment & General Advertising	64,607	75,407
	9 000	2 500
7501 Job Fairs, Postings	8,990	2,500

7502 Staff Recruitment - Advertising	15,113	2,500
7600 Student Recruitment & Marketing	6,429	2,500
Total 7500 Recruitment & General Advertising	30,531	7,500
7700 Staff Travel		
7701 Local Travel	8,166	9,951
7703 Meals	2,066	2,528
Total 7700 Staff Travel	10,231	12,479
7800 Fundraising Expense		
7802 Special Events	23,825	
Total 7800 Fundraising Expense	23,825	-
7900 Other OTPS		
7901 Bank Charges	627	767
7902 Interest/Late Charges	2,484	3,041
7903 Dues & Subscriptions	8,712	10,663
Total 7900 Other OTPS	11,823	14,471
8000 Insurance		
8001 General Liability, Umbrella, D&O	71,223	87,176
8003 Insurance Other	<u>5,191</u>	<u>6,353</u>
Total 8000 Insurance	76,413	93,530
8100 Facility Operations & Maintenance		
8101 Rent	671,037	113,387.80
8104 Utilities	166,435	189,452
8105 Property Tax	21,020	4,736
8106 Repairs & Maintenance	73,469	54,123
8107 Janitorial Services	69,138	84,625
8108 Janitorial Supplies	5,908	7,232
8109 Alarm System	7,924	9,699
8111 Security System (Building Camera)	5,000	6,120
Total 8100 Facility Operations & Maintenance	1,019,932	469,375
8200 Depreciation & Amortization		
8201 Depreciation	222,950	222,950
Total 8200 Depreciation & Amortization	222,950	222,950

8300 Bond Related Expenses		
8305 Bond Compliance Fees	2,650	2,650
Total 8300 Bond Related Expenses	2,650	2,650
8800 Miscellaneous Expenses		
8805 Expense Suspense	6,502	<u>-</u>
Total 8800 Miscellaneous Expenses	6,502	-
Total Expenses	4,777,480	4,500,468
Net Operating Income	562,274	1,820,916
Capital Expenditures		
Furniture	-	5,000.00
Equipment	<u>17,397.20</u>	7,500.00
Total CAPEX	17,397.20	12,500.00
Loans Payable		285,000.00
Total Loans Payable	-	285,000.00
	C	ash Projec
Cash Requirements	4 777 400 00	4 500 407 05
Total FY17 Operating Expense	4,777,480.09	4,500,467.95
Cook Deimburged for Operating Fund use for Construction	(20,000,00)	
Cash Reimbursed for Operating Fund use for Construction	(30,000.00)	
·	(222 050 00)	(333 050 00)
Minus Depreciaton	(222,950.00)	` ,
Minus Depreciaton Add Fixed Assets	(222,950.00) 17,397.20	12,500.00
Minus Depreciaton Add Fixed Assets Loans Payable	17,397.20 	12,500.00 285,000.00
Minus Depreciaton Add Fixed Assets	` ,	12,500.00 285,000.00
Minus Depreciaton Add Fixed Assets Loans Payable	17,397.20 	12,500.00 285,000.00
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements  Net Cash before Debt Service	17,397.20 	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b>
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements	17,397.20 	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b> 248,662.00
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements  Net Cash before Debt Service  Bi-Monthly Debt Service Withholding	17,397.20	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b> 248,662.00 <u>6.00</u>
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements  Net Cash before Debt Service	17,397.20 	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b> 248,662.00
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements  Net Cash before Debt Service  Bi-Monthly Debt Service Withholding  Annual Debt Service	17,397.20	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b> 248,662.00 <u>6.00</u> 1,491,972.00
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements  Net Cash before Debt Service  Bi-Monthly Debt Service Withholding  Annual Debt Service  Projected Beginning Cash at 7/1	17,397.20 	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b> 248,662.00 <u>6.00</u> 1,491,972.00 (465,311.06)
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements  Net Cash before Debt Service  Bi-Monthly Debt Service Withholding  Annual Debt Service  Projected Beginning Cash at 7/1 Projected Net Cash at 6/30	17,397.20	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b> 248,662.00 <u>6.00</u> 1,491,972.00 (465,311.06) 254,393.91
Minus Depreciaton Add Fixed Assets Loans Payable Total Cash Requirements  Net Cash before Debt Service  Bi-Monthly Debt Service Withholding  Annual Debt Service  Projected Beginning Cash at 7/1	17,397.20	12,500.00 <u>285,000.00</u> <b>4,575,017.95</b> <b>1,746,365.91</b> 248,662.00 <u>6.00</u> 1,491,972.00 (465,311.06)

Series 2013 Bond 1 Debt Service	1,287,400.00	1,285,150.00
TD Bond 2 Debt Service		194,733.33
	1,287,400.00	1,479,883.33
	6,432.83	12,088.67
<u>Debt Service Ratios</u>		
Net Operating Income - revenue minus expense before depreciation	797 973 07	2,046,515.91
Total Debt Service		1,479,883.33
Total Best Gervice	1,201,400.00	1,413,000.00
	0.61	1.38
Cash on Hand		
Total Operating Expenes - does not include depreciation or		
bond related fees	· · · · · · · · · · · · · · · · · · ·	<u>4,274,867.95</u>
Days in Year	365	
	303	365
	12,470.90	365 11,711.97
Total Operating Exp (Annual)/# Days in Year		11,711.97
Total Operating Exp (Annual)/# Days in Year  Projected Ending Cash	12,470.90	11,711.97 (210,917.15)
Total Operating Exp (Annual)/# Days in Year  Projected Ending Cash  Projected Days of Cash on Hand	12,470.90 (465,311.06) (37.31)	11,711.97 (210,917.15) (18.01)
Total Operating Exp (Annual)/# Days in Year  Projected Ending Cash	12,470.90 (465,311.06)	11,711.97 (210,917.15) (18.01)
Total Operating Exp (Annual)/# Days in Year  Projected Ending Cash  Projected Days of Cash on Hand	12,470.90 (465,311.06) (37.31)	11,711.97 (210,917.15) (18.01)
Total Operating Exp (Annual)/# Days in Year  Projected Ending Cash  Projected Days of Cash on Hand	12,470.90 (465,311.06) (37.31)	11,711.97 (210,917.15) (18.01)

	h School	
2017-18 Projection	2018-19 Projection	
		Based on \$14,027 per pupil. Maximum pupil
5,610,800	5,610,800	count = 400; budget based on 385 - FY17 Pe Pupil Invoice 1
259,750		Based on 25 SpED 20-60%
38,098 -	38,098	Based on 2 SpEd >60%
297,848	297,848	
<u>-</u>	<u>-</u> -	Supplemental per pupil of \$430 per pupil - ba on 392
5,908,648	5,908,648	
29,696	29,696	To be conservative, revenue was kept static.
166,939	•	Assumes 2% increase from FY16 Title I rever
6,716 12,792	•	Assumes 2% increase from FY16 Title II reve 50% of voice services, 90% of internet
49,427	49,427	Based on 2% increase
<u>49,427</u> 223,082	<u>49,427</u> 223,082	
		Used assumptions from renewal budget for o
- -	- -	years  Revenue level kept the same to be conservated.
-	-	
<u>873</u>	<u>873</u>	
873	873	
-	-	Interest

	4,781	4,781	
	12,000	12,000	
	16,781	16,781	
	6,149,384	6,149,384	
	136,578	139,310	
			Includes Exec Asst, Assoc. Dir. Of Funds
	281,156	286,779	Director of Parent Engagement, Admin Asst
	206,387	210,515	
	102,000	104,040	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
	39,396		Food Aide
	765,518	780,828	
	1,218,021	1 242 382	Includes 21 Teachers
	57,958	, ,	Spanish Teacher
	62,670	63,924	•
	1,338,650	1,365,423	
•			
	100 570	100 100	
	126,576		2 Social Workers (Adolescent Health Clinic)
ı	74,125	<u>75,607</u>	College Placement
l	200,701	204,715	
1	2,304,868	2,350,966	
	, ,	, ,	
	142,902	145,760	
	33,421	34,089	
			Based on 34 EE including 4 new EE double
	26,486	26,486	taxed
			Estimates 17% increase of annualized bills. School only contributes \$400 per employee per
			month therefore the real costs should be
	225,923	225,923	significantly less
	19,458	19,458	
	2,648	2,648	Includes annual NYDBL Policy

- _46,097.36	- _47,019.31	Policy not in place
496,934	501,383	
,	,	
20,000	20 000	Based on engagement letter - \$12,500 base w/ \$7,500 to cover misc. costs
40,000	· ·	Greenbaum, Rowe, Smith & Davis
8,500		Estimated \$250 per employee at 34 employees
		GCE Consulting @ \$850 per session; estimated
20,400	20,808	based on FY16
39,620	40,412	
24,449	24,938	
108,000		Estimates \$9K per month
<u>155,943</u>	<u>159,062</u>	
416,913	421,721	
26,658	27,191	
2,478	2,528	
813	830	
16,937	17,276	Based on YTD expenses averaged over 12 months
-	-	Inonuis
<u>1,749</u>	<u>1,784</u>	
<u>1,749</u>	<u>1,784</u>	
48,635	49,608	
17,950	18,309	
1,446	1,475	Based on per pupil spending; assumes 400 FTE
19,396	19,783	paced on per papir openanty, accumed 100 1 12
,,,,,,	-,	
24 214	24 707	
24,311	24,797	
<u>4,819</u> <b>29,130</b>	<u>4,915</u> <b>29,712</b>	
	29,112	
183,636	187,308	
100,000	107,000	Racad on nar nunil chanding: accumac 100 ETE

183,636	187,308	Dasca on per papir spenaing, assumes 400 r re
20,975	21,395	
2,761	2,817	
367	<u>375</u>	
236,870	241,607	
•	,	
13,705	13,979	
10,159	10,362	
10,575	10,787	
811	827	
	<u>-</u>	
35,250	35,955	
10,987	11,206	
2,496	2,546	Based on average of expenses over 12 month
624	637	period multiplied by 2% inflation increase
448	<u>457</u>	
14,555	14,846	
24,251	24,736	
24,231	24,730	
939	957	
51,403	52,431	
1,408	1,436	
14,982	15,281	
67,456	<u>68,805</u>	
91,707	93,541	
4-4		
15,000	15,000	Fall and Spring retreats
		Professional Developers - Y. Santiago, RR
61,615	<u>62,848</u>	Consulting, DAE, Capacity Rise (Jamie White)
76,615	77,848	
2 500	2.500	
2,500	2,500	l l

2,500	2,500	
2,500	2,500	
		Based on ED's estimate; added add'tl \$2500 to
7,500	7,500	be conservative
10,150	10,353	
<u>2,579</u>	<u>2,630</u>	
12,729	12,983	
<u>-</u>	<u>-</u>	
-	_	
767	767	
3,041	3,041	
10,877	11,094	
14,684	14,902	
87,176	87,176	
<u>6,353</u>	<u>6,353</u>	
93,530	93,530	
_	-	2 months of rent and fees at old leased space
169,764	193,241.33	
21,440	4,831	
74,939	55,205	
70,521	86,317	
6,026	7,376	
8,083	9,893	
<u>5,100</u>	6,242	
355,873	363,107	
000 000		
222,950	222,950	
222,950	222,950	
l		

5,000.00	•	Office Modules; replenishment
7,500.00	7,500.00	Security Related Equipment; replenishment
12,500.00	12,500.00	FY16 FA not included as part may be bond related expense

<u>-</u>

# ction

4,451,658.85	4,524,879.39	
(222,950.00) 12,500.00 	(222,950.00) 12,500.00 <u>-</u>	
4,241,208.85	4,314,429.39	
1,908,175.01	1,834,954.47	
<b>1,908,175.01</b> 261,441.67	<b>1,834,954.47</b> 261,650.00	
, ,	, ,	
261,441.67	261,650.00 <u>6.00</u>	Includes Debt Service plus annual fees
261,441.67 <u>6.00</u>	261,650.00 <u>6.00</u>	Includes Debt Service plus annual fees
261,441.67 <u>6.00</u>	261,650.00 <u>6.00</u>	Includes Debt Service plus annual fees
261,441.67 <u>6.00</u> 1,568,650.00	261,650.00 <u>6.00</u> 1,569,900.00	Includes Debt Service plus annual fees

# ements

	271,500.00	Debt Service Includes Sinking Fund Debt Service Includes Sinking Fund
12,500.00	13,000.00	Annual Fees - Estimated
1,923,325.01 1,556,150.00 1.24	•	This is only the debt service payment
<u>4,226,058.85</u> 365	<u>4,299,279.39</u> 365	
11,578.24	11,778.85	
128,607.86	393,662.33	
11.11	33.42	
347,347.30	353,365.43	

-



# **Entry 9 BOT Table**

Last updated: 07/30/2016

# Page 1

## 1. Current Board Member Information

	Trustee Name	Email Address	Position on the Board	Committee Affiliations	Voting Member? (Y/N)	Area of Expertise, and/or Additional Role at School (parent, staff member, etc.)	Number of Terms Served and Length of Each (Include election date and term expiration)
1	John Paul Gonzalez	johnpaulgo nzalez013 @gmail.co m	Chair/Boar d President	Fiscal/Gove rnance	Yes		
2	Lupita Samuels	Lusamules @hotmail.c om	Secretary	Fiscal/Gove rnance	Yes		
3	Doreen Bermudez	doreenber mudez@ho tmail.com	Parent Representa tive	Parent/Sch ool Climate	Yes		
4	Elissa Ramos	elissaramo s@htomail. com	Treasurer	Fiscal/Acad emic	Yes		
5	Ana Koessler	akoesler@ gmil.com	Trustee/Me mber	Fiscal	Yes		
6	Dr. Elaine Ruiz Lopez	elopez@ilc hs.org	Other	Academic/F iscal/Organ izational Oversight	No		
7							
8							
9							
10							

11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
2. Total Number of Members on June 30, 2015 7	
3. Total Number of Members Joining the Board 2015-16 School Year	
2	
4. Total Number of Members Departing the Board during the 2015-16 School Ye	ear
1	
5. Number of Voting Members 2015-16, as set by the by-laws, resolution or minutes	
6	
6. Number of Board Meetings Conducted in the 2015-16 School Year	
11	
7 Number of Board Mostings Schoduled for the 2016-17 School Year	

Thank you.

#### INTERNATIONAL LEADERSHIP CHARTER SCHOOL

#### **BOARD OF TRUSTEES MEETING**

#### **JANUARY 26, 2016**

In attendance: Doctor Elaine R. Lopez, Prof. John Paul Gonzalez, Doreen Bermudez, Elissa Ramos and Lupita Samuels

Meeting called to order at 6:35 PM

## **Approval of Minutes**

Mrs. Bermudez made a motion the December's minutes be approved, pending revision. Motion was seconded by Dr. Ruiz Lopez.

The Board of Trustees will join in the Inaugural proceedings for our new school building January 27th, 9:00 AM. The community leaders to include Councilman Cohen, Assemblyman Dinowitz, Assemblyman Linares and Honorable Marlene Cintron will all be in attendance.

### **CEO Report**

Operations was moved from 2900 Exterior Street to our new school building on 3030 Riverdale Ave on December 15, 2015. After the winter break and holidays classes were resumed on January 4, 2016. There was an all hands on deck and diligent effort to prepare the space and three floors of classrooms and café area.

The Pantry, library, and adolescent health clinic all need additional organization and preparation. The classrooms are fully equipped with SmartBoards and White Boards and new student desks on the first floor. Our enrollment remained steady at 330 students.

There have been many post construction and move in challenges. For example the "gutters" in new building are apparently not routed properly and as a result some rooms experienced flooding during the rainy season.

There have been challenging with the trades who were sub contracted by Procida. They claim not to have been paid. Bills are being discussed and handled by our construction counsel. It is going to be a process as school must consider pursuing conventional loans as construction costs exceeded the amount of the bond financing by \$1.9 million. This was as a result of foundation problems, weather conditions and a change in methodology in pile driving in early winter of 2014.

In order to move forward with the completion of new school building project,

It appears that the covenants in the loan agreement legally allows for our charter school to go back to Build NYC to apply for additional bonds as long as the school can afford the additional debt service.

Our CEO reported the challenge in pursuing a bank loan for the amount needed. There was a call into Build NYC who explained the process. Dr. Ruiz Lopez requested for the Board to approve the pursuit for additional bond financing. There was unanimous support for our CEO to pursue. Dr. Ruiz Lopez started the conversation with TD securities in December 2015 and will pursue a meeting with Build NYC.

Our next meeting is scheduled to take place 2/23/16.

Meeting adjourned at 7:16 PM

Submitted by

**Lupita Samuels** 

**Board Secretary** 

# International Leadership Charter High School Enrollment and Retention Targets Plan:

*Increased Enrollment and Retention Targets for FRL, ELL and SWD:* 

The International Leadership Charter High School (ILCHS) will proactively seek to expand our school's high quality educational opportunities for special populations. ILCHS will continue to serve all of its Students with Disabilities (SWD) and English Language Learners (ELLs) with the same level of high achievement providing accommodations to students as per the New York State Charter Laws and NYS regulations.

Grade	# Students W/Disabilities	#ELL Students	Projected #FRL
9	10	12	90
10	10	10	90
11	5	4	70
12	3	4	50

#### • Strategy for Increased Enrollment for FRL, ELL and SWD

It is important to stress that ILCHS implements all its outreach efforts with consideration to parents of children with special needs (SWD) and ELLs. Parents of children with special needs are provided with information regarding ILCHS priority to support students with disabilities and its commitment to educating children in an inclusive environment. Likewise, parents of ELLs are informed of ILCHS' ELL friendly environment, that demonstrates respect for the culture and use of the native language, as a bridge to support the acquisition of English through the implementation of balanced instructional practices to ensure English proficiency of the second language before graduation from high school.

#### • Efforts to be taken in 2016-17: SWD Enrollment

ILCHS has a proactive history of retaining students with disabilities, as well as graduating SWD College Ready. When new students that may need additional special services such as mandated counseling and testing accommodations, this is vigorously pursued. During the school year, for every benchmark assessment at end of each Quarter the progress of students with disabilities is monitored by the school leadership and coaches.

• Efforts to be taken in 2016-17: ELL Enrollment

Among the specific strategies that ILCHS will employ to effectively recruit ELL will be to:

- 1. Enlist the help of parents of ELLs, and student themselves, who represent the range of immigrants and native speakers of languages other than English in the district. This approach has provided ILCHS with a bridge for additional community organizations and houses of worship with large immigrant populations that would be fruitful areas in which to engage in the School's marketing and recruitment efforts.
- 2. ILCHS would seek the active participation of its ambassador parents in speaking at these recruitment events, particularly about their experience at ILCHS, the academic support that their children receive in acquiring English proficiency and the welcoming school community.
- 3. Investment in full page advertisements in El Diario de La Prensa and local Spanish language newspapers. We are also pursuing radio Public Service Announcements as well.
  - Efforts to be taken in 2016-17: Recruitment and Retention
  - 1. In the student registration for 2015-16, student profiles will be retrieved from ATS to learn which students are identified as ELLs by NYSESLATT administered while in elementary or middle school. The Home Language Survey [HLS] will be administered to target possible "missed" or "non identified" ELLs. These students will be tested in September to confirm if they are ELL's. The ELL's will be provided with pull-out ESL instruction as well as other intervention services as needed. Their progress will be monitored through their performance on benchmark and formative assessments.
  - 2. All efforts made during 2015/6 will also be increased in the 2016-17 new school year. It is important to note that approximately 50% of our enrollment is Former Limited English Proficient (FLEP)
  - 3. ILCHS has also requested the approval of an ELL preference for inclusion on our outreach materials and enrollment application for the next term of charter.
  - Efforts to be taken in 2016-17: Enrollment & Retention Free and Reduced Lunch (FRL)
    - 1. Student recruitment efforts are focused in the ILCHS community which is the South West Bronx and North West Bronx which are historically low socioeconomic areas. Therefore, the majority of ILCHS applications are from families that are indigent or from low economic standing.

2. With over 80% Free and Reduced Lunch student population in 2015-16, it is clear that we have a high number of students and families living in poverty and we will continue to work on retaining this special population.

In summary, ILCHS will revamp the charter school's outreach and marketing materials to place more emphasis on instructional strategies devoted to supporting ELLs in acquisition of and proficiency in the English language, SWD and support and interventions for students who are Title I and living in poverty. In addition, increasing the opportunities to network and learn from charter school colleagues in the Bronx and throughout the city which have been successful in drawing a population of ELLs in similar proportion to the district and draw upon the experience of its colleagues in reaching out to and successfully marketing its school to parents with special needs children and poverty-level families, is paramount to the meeting our Enrollment and Retention Targets.



## **Entry 12 Teacher and Administrator Attrition**

Last updated: 07/31/2016

Report changes in teacher and administrator staffing.

## Page 1

### **Instructions for completing the Teacher and Administrator Attrition Tables**

The following tables reflect formatting in the online portal required for Regents authorized charter schools. Schools should provide, for teachers and administrators only, the full time equivalent (FTE) of staff on June 30, 2015; the FTE for added staff from July 1, 2015 through June 30, 2016; and the FTE for any departed staff from July 1, 2015 through June 30, 2016 using the two tables provided.

## 2015-16 Teacher Attrition Table

FTE Teachers on June 30, 2015	FTE Teachers Departed 7/1/15 - 6/30/16	FTE Teachers Filling Vacant Positions 7/1/15 - 6/30/16	FTE Teachers Added in New Positions 7/1/15-6/30/16	FTE of Teachers on June 30, 2016
0	4	3	1	17

#### 2015-16 Administrator Position Attrition Table

FTE Administrative Positions on June 30, 2015	FTE Administrators Departed 7/1/15 - 6/30/16	FTE Administrators Filling Vacant Positions 7/1/15 - 6/30/16	FTE Administrators Added in New Positions 7/1/15-6/30/16	FTE Administrative Positions on June 30, 2016
5	1	0	0	5

## Thank you



## **Entry 13 Uncertified Teachers**

Last updated: 07/31/2016

## Page 1

The table below is reflective of the information collected through the online portal for compliance with New York State Education Law 2854(3)(a-1) for teaching staff qualifications. Enter the relevant full time equivalent (FTE) count of teachers in each column. For example, a school with 20 full time teachers and 5 half time teachers would have an FTE count of 22.5. If more than one column applies to a particular teacher, please select one column for the FTE count.

### Staff Qualifications (June 30, 2016)

Note: Columns should sum to the FTE count of Teachers on June 30, 2016, and each teacher should be in only <u>one</u> column.

1. Total FTE Count of Uncertified Teachers (6-30-16)	17
2. FTE count of uncertified teacher with at least three years of elementary, middle or secondary classroom teaching experience (6-30-16)	5
3. FTE count of uncertified teachers who are tenured or tenure track college faculty (6-30-16)	0
4. FTE count of uncertified teachers with two years of Teach for America experience (6-30-16)	0
5. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (6-30-16)	2
6. FTE count of uncertified teachers who do not fit into any of the prior four categories (6-30-16)	5

## Thank you.



## **School Calendar**

## 2016-2017

6 13 14 15	First Day of School for 9 <sup>th</sup> Graders First Day of School for 10 <sup>th</sup> Graders First Day of School for 11 <sup>th</sup> Graders First Day of School for 12 <sup>th</sup> Graders
1 7 <b>10</b> 14 19 <b>20</b> 22	SAT Exam – registered students ONLY La Raza Latina Celebration  Columbus Day: School Closed  Progress Reports mailed home – Q1  PSAT 10th and 11 <sup>th</sup> grade student only (No Class for 9 <sup>th</sup> &12 <sup>th</sup> )  College Prep Program/CUNY Application Submission Deadline  ACT Exam – registered students ONLY
5 9 11 7-10 14 15 15-18 18 23 24 25 28 28 - 2 30	SAT Exam – registered students ONLY College Essay Final Draft Due Professional Development: School Closed Assessment Week – Q1 ILCHS Veteran's Day Observance: School Closed College Prep/SUNY Application Submission Deadline International Education Week Report Card Mailed Home Student Gratitude Luncheon Thanksgiving Break: School Closed Thanksgiving Break: School Closed Classes Resume for all grades Leadership & Government Week  9th Grade Parent Teacher Conference 5 -7pm. (Doors close @ 6:15pm)
1 3 7 10 16 <b>19</b>	10 <sup>th</sup> Grade Parent Teacher Conference 5 -7pm. (Doors close @ 6:15pm) SAT Exam – registered students ONLY 11 <sup>th</sup> & 12 <sup>th</sup> Grade Parent Teacher Conference 5-7pm.(Doors close 6:15pm) ACT Exam – registered students ONLY Progress reports mailed home – Q2 Winter Recess Begins: School Closed
21	Classes Resume for all grades- Martin Luther King Jr. Day Observed: School Closed Assessment Week – Q2 SAT Exam – registered students ONLY
	13 14 15  1 7 10 14 19 20 22  5 9 11 7-10 14 15 15-18 18 23 24 25 28 28-2 30  1 3 7 10 16 19  2 16 17-20 21



## 2016-2017

January	27 28	Report Cards Mailed Chinese New Year
February	1 2 8 14 <b>20</b> 27	Black History Month & Dr. Martin Luther King Celebration 9th Grade Parent Teacher Conference 5-7pm. (Doors close @ 6:15pm) 10th Grade Parent Teacher Conference 5-7pm. (Doors close @ 6:15pm) 11th & 12th Grade Parent Teacher Conference 5-7pm. (Doors close @ 6:15pm) 100 Days of School Celebration President's Day: School Closed Dominican Republic Independence Day
March	3 TBA 11 <b>22</b>	Progress Report Mailed – Q3 Senior Class Trip SAT Exam – registered students ONLY Professional Development: School Closed
	23	Incoming 9th Grade Lottery
	27-31	Assessment Week – Q3
April	7	Report Cards Mailed Home
	8	ACT Exam – registered students ONLY
	11 12 14 – 21	9 <sup>th</sup> Grade Parent Teacher Conference 5-7pm. (Doors close @ 6:15pm) 10 <sup>th</sup> Grade Parent Teacher Conference 5-7pm.(Doors close @ 6:15pm) <b>Spring Recess begins - School closed</b>
	24	Classes Resume
	26	11 <sup>th</sup> & 12 <sup>th</sup> Grade Parent Teacher Conference 5-7pm. (Doors close @ 6:15pm)
May	5 6 22 <b>29</b>	Progress Report Mailed – Q4 SAT Exam – registered students ONLY Regents Prep Program Begins Memorial Day Observed- School Closed
June	3 10 <b>14-23</b> TBA	SAT Exam – registered students ONLY ACT Exam – registered students ONLY Regents Examinations  12th Grade Graduation Ceremony
		OOL WIDE EVENTS DATES SUBJECT TO CHANCE***



\*\*\*SCHOOL WIDE EVENTS DATES SUBJECT TO CHANGE\*\*\*