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PUBLIC DISCLOSURE COPY

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Form	00	13-	<u> </u>	\smile

Department of the Treasury

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2016, or fiscal year beginning $_JUL$ 1 , 2016, and ending $_JUN$ 30 , 2017

Do not send to the IRS. Keep for your records.

20	16
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Employer identification number

27-2618506

Internal Revenue Service Name of exempt organization Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

INSPIRED TEACHING DEMONSTRATION

PUBLIC CHARTER SCHOOL Name and title of officer

DEBORAH WILLIAMS HEAD OF SCHOOL

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	7,123,385.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	2

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X lauthorize JONES, MARESCA & MCQUADE,	
ERO firm name	Enter five numbers, bu do not enter all zeros
	ly filed return. If I have indicated within this return that a copy of the return of the IRS Fed/State program, I also authorize the aforementioned ERO to
	ture on the organization's tax year 2016 electronically filed return. If I have d with a state agency(ies) regulating charities as part of the IRS Fed/State creen.
Officer's signature Autoral Dartyler Well	Date Date 1/28/19
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	52249421044 do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on a confirm that I am submitting this return in accordance with the requirement <i>e-file</i> Providers for Business Returns.	
ERO's signature ►	Date
	Form - See Instructions e IRS Unless Requested To Do So
LHA For Paperwork Reduction Act Notice, see instructions.	Form 8879-EO (2016)

623051 09-26-16

			** PUBLIC DISCLOSURE COPY	* *		_
	Ω	00	Return of Organization Exempt From	m Income Tax	(OMB No. 1545-0047
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) 2016						2016
Department of the Treasury Do not enter social security numbers on this form as it may be made public.						Open to Public
		enue Service	Information about Form 990 and its instructions is at w TTTT 1 2016			Inspection
				g JUN 30, 201		
B	Check if applicab		f organization IRED TEACHING DEMONSTRATION	D Employer iden	tificati	on number
	Addre		IC CHARTER SCHOOL			
					-261	8506
F	_lchang _Initial	<u>v</u>	usiness as and street (or P.O. box if mail is not delivered to street address) Room			0500
F	_returr Final	200	DOUGLAS ST. NE			8-6825
	_returr termi ated	ň.,	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$		7,143,059.
	Amer	nded TATA CU	INGTON, DC 20002	H(a) Is this a grou	n retur	
			nd address of principal officer: DEBORAH WILLIAMS	for subordina		
	pend	ing SAME	AS C ABOVE	H(b) Are all subordina		
1	Fax-ex	empt status:	X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	527 If "No," attac	h a list.	. (see instructions)
			INSPIREDTEACHINGSCHOOL.ORG	H(c) Group exemp		
K	orm o		X Corporation Trust Association Other ▶ L	Year of formation: 2010) M St	ate of legal domicile: DC
Pa	art I					
ě	1	Briefly describ	be the organization's mission or most significant activities:	D TEACHING DI	EMON	STRATION
and			CHARTER SCHOOL ENSURES THAT A DIVERS		-	
Activities & Governance	2		x if the organization discontinued its operations or disposed of	1		
о б	3				3	9 9
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4		lependent voting members of the governing body (Part VI, line 1b)		4	88
ties	5		of individuals employed in calendar year 2016 (Part V, line 2a)	F	5	20
ť	6		of volunteers (estimate if necessary)		6 7a	0.
A			d business revenue from Part VIII, column (C), line 12 business taxable income from Form 990-T, line 34		7a 7b	0.
		Net unrelated	business taxable income from Form 990-1, line 34	Prior Year		Current Year
•	8	Contributions	and grants (Part VIII, line 1h)		5.	282,383.
Revenue	9		ce revenue (Part VIII, line 2g)	5 016 FFI		6,839,140.
eve	10		come (Part VIII, column (A), lines 3, 4, and 7d)			1,862.
£	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	(	).	0.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,395,992	2.	7,123,385.
	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)		).	0.
			to or for members (Part IX, column (A), line 4)		).	0.
es	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	3,180,67	5.	4,098,615.
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25)   14,812.	9,420	).	0.
ğ						
			es (Part IX, column (A), lines 11a-11d, 11f-24e)	2,563,930		2,527,711.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,754,031		6,626,326. 497,059.
<u> </u>	19	Revenue less	expenses. Subtract line 18 from line 12			
Net Assets or Fund Balances	20	Total coasts //	Cart V line 16)	Beginning of Current Ye 2,716,220		End of Year 3,061,825.
Asse Bal	20 21	Total assets (I		91,050		118,000.
Net , und	21		(Part X, line 26) fund balances. Subtract line 21 from line 20	2,625,170		2,943,825.
	art II				<u> </u>	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		-	I declare that I have examined this return, including accompanying schedules and s	tatements, and to the best o	f my kn	owledge and belief. it is
			. Declaration of preparer (other than officer) is based on all information of which pre		<i>y</i>	J

Sign	Signature of officer		Date				
Here	DEBORAH WILLIAMS, HEAD OF SCHOOL						
	Type or print name and title						
	Print/Type preparer's name Preparer's signature	Date	Check PTIN				
Paid	DAVID JONES		if self-employed P01361002				
Preparer	Firm's name JONES MARESCA & MCQUADE PA		Firm's EIN 52-1853933				
Use Only	Firm's address 1730 RHODE ISLAND AVE, N.W., SUITE	800					
	WASHINGTON, DC 20036		Phone no. 202 - 296 - 3306				
May the I	May the IRS discuss this return with the preparer shown above? (see instructions)						
632001 11-	32001       11-11-16       LHA       For Paperwork Reduction Act Notice, see the separate instructions.       Form 990 (2016)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

32002	SEE SCHEDULE O FOR CONTINUATION(S)			
4e	Total program service expenses ► 5,888,417.		Form 9	<b>90</b> (201
	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$		)	
4.4				
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)			
4b	PREPARATION AND PROFESSIONAL DEVELOPMENT FOR NEW TEACHERS         (Code:) (Expenses \$ including grants of \$) (Revenue \$) (Revenue \$)	AND '	ГЕАСН	
	CONSTRUCTIVIST APPROACH TO TEACHING AND LEARNING BASED ON ON HOW THE BRAIN WORKS AND HOW CHILDREN LEARN. THE SCHOOL TO MEET TWO RELATED, MUTUALLY REINFORCING PRIMARY GOALS: T EXCELLENT EDUCATION FOR STUDENTS, AND TO PROVIDE EXCELLENT	THE IS O O PRO	RGANI OVIDE	ZED
	THEIR POTENTIAL AS ACCOMPLISHED LEARNERS, THOUGHTFUL CITIZ IMAGINATIVE AND INQUISITIVE PROBLEM SOLVERS THROUGH A DEMA INQUIRY-BASED CURRICULUM. THE DEFINING CHARACTERISTIC OF T A PROFESSIONAL LEARNING COMMUNITY FOCUSED ON A PROGRESSIVE	NDIN HE S	G,	IS
	AT THE INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHO "SCHOOL"), A PROFESSIONAL LEARNING COMMUNITY OF MASTER TEA TEACHER RESIDENTS ENSURES THAT A DIVERSE GROUP OF STUDENTS	CHER	S AND	
4a	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, th revenue, if any, for each program service reported.           (Code:) (Expenses \$ 5,888,417. including grants of \$) (Revenue \$)		kpenses,	
3 4	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as meas			
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		☐ Yes	X
	DIVERSE GROUP OF STUDENTS ACHIEVE THEIR POTENTIAL AS ACCOM LEARNERS, THOUGHTFUL CITIZENS, AND IMAGINATIVE AND INQUIST PROBLEM-OLVERS THROUGH A DEMANDING, INQUIRY-BASED CURRICUL	PLIS TIVE		
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL ENSU			
	Chaoly if Cohodula O contains a reasonance or note to any line in this Dart III			[

PUBLIC CHARTER SCHOOL

Pa	t IV Checklist of Required Schedules			<u> </u>
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a		11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114	- 23	
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
<u>د</u>	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	115		
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			37
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Λ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			x
-	complete Schedule G, Part III	19		_ <u>^</u>

Form **990** (2016)

632003 11-11-16

Form 990 (2016)

11520123 793927 30285

	990 (2016) PUBLIC CHARTER SCHOOL 27-2618	3506	Р	age <b>4</b>
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	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		X
с	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? If "Yes," complete Schedule M	30		X
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? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	

Form **990** (2016)

632004 11-11-16

INSPIRE	ED TEACH	ING	DEMONSTRATION
PUBLIC	CHARTER	SCI	HOOL

Form	990 (2016) PUBLIC CHARTER SCHOOL		27-2618	506	Pa	age 5
Pai						
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	16			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and	reportal	ole gaming			
	(gambling) winnings to prize winners?			1c	Х	
2a	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	2a	88			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	irns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					37
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t					v
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu		-	<b>C</b> 1-		
-	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).		rovidad to the pover?	7a		x
	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?					- 23
	<ul> <li>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</li> <li>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required</li> </ul>					
C	to file Form 8282?	-		7c		x
Ь	If "Yes," indicate the number of Forms 8282 filed during the year	7d		10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		†?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			76 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintainer					
-	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	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				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	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.					
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	13b				
	Enter the amount of reserves on hand	13c				
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b		

Form **990** (2016)

632005 11-11-16

PUBLIC CHARTER SCHOOL

Form 990 (2016)

X

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

Sec	Check if Schedule O contains a response or note to any line in this Part VI		<u></u>		<u></u>			
							Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year	1	a		9			
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent	1	b		9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	·		other				
2	officer, director, trustee, or key employee?					2		
3	Did the organization delegate control over management duties customarily performed by or under				···  -	-		F
5	of officers, directors, or trustees, or key employees to a management company or other person?					3		
4	Did the organization make any significant changes to its governing documents since the prior Form					4		┢
4 5	Did the organization become aware during the year of a significant diversion of the organization's a					4 5		┢
						6		┢
6 7-	Did the organization have members or stockholders?				···	0		┝
7a	Did the organization have members, stockholders, or other persons who had the power to elect or					_		
	more members of the governing body?				···  -	7a		$\vdash$
b	Are any governance decisions of the organization reserved to (or subject to approval by) members							
_	persons other than the governing body?				-	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y		-	-			37	
а	The governing body?					8a	<u>X</u>	
b	Each committee with authority to act on behalf of the governing body?					8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	each	ed at th	ne				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				<u></u>	9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal	Reve	nue Co	ode.)				-
					г		Yes	
0a	Did the organization have local chapters, branches, or affiliates?				L	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such							
	and branches to ensure their operations are consistent with the organization's exempt purposes?				L	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	ody b	efore fi	iling the form	?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13				L	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ri	se to	conflicts	s?	[	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	" descr	ribe				
	in Schedule O how this was done					12c	Х	
3	Did the organization have a written whistleblower policy?					13	Х	
4	Did the organization have a written document retention and destruction policy?					14	Х	
5	Did the process for determining compensation of the following persons include a review and appro				·			T
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision							
а	The organization's CEO, Executive Director, or top management official					15a	х	
	Other officers or key employees of the organization					15a 15b	X	┢
5	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				···  -			t
62	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	amor	nt with	9				
Jd						160		
L.	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu				···  -	16a		$\vdash$
D				cipation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org					101		
	exempt status with respect to such arrangements?					16b		L
	tion C. Disclosure							
7				=======================================				
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	)-T (S	ection	501(c)(3)s on	ily) av	/ailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website Another's website X Upon request Other (expla			,				
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	confli	ct of in	terest policy,	and	finan	cial	
	statements available to the public during the tax year.							
0	State the name, address, and telephone number of the person who possesses the organization's k	ooks	s and re	ecords:				
	THE ORGANIZATION - 202-248-6825							
	200 DOUGLAS ST. NE, WASHINGTON, DC 20002							
2006	3 11-11-16					Form	990	(2
	6							
20	123 793927 30285 2016.05040 INSPIRED TEACH	HIN	G D	EMONSTE	ł٨	302	285	

INSPIRED	TEACHING	DEMONSTRATION

Form 990 (	2016)	PUBLIC	CHARTER	SCHOOL			27-26
Part VII	Compensation	of Officers	s, Directors,	Trustees,	Key Employees,	Highest	Compensated
	Emplovees. an	d Independ	dent Contra	ctors			

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

PUBLIC CHARTER SCHOOL

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (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. 

(A) Name and Title	(B) Average	(C) Position (do not check more than one						(D) Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week	box	not c , unle cer an	ss pe	rson	is bot	h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	vor induvidual truste or dire difficer vicious v vicious vicious v vicious vicious v vicious vicious v vicious vicious vicious v vicious vicious v vicious vicious vicious vicious vicious vicious v vicious vicious		compensation from the organization and related organizations						
(1) MARC FISHER CHAIR	1.00	x		x				0.	0.	0.
(2) MICHAEL REED	1.00							0.	0.	0.
BOARD TREASURER	1.00	x		x				0.	0.	0.
(3) GARY COHEN	2.00							•••		
FOUNDING CHAIR, UNTIL MAY 2017		x						0.	0.	0.
(4) ESHAUNA SMITH	1.00									
BOARD MEMBER		X						0.	0.	0.
(5) MIRANDA BROWN	1.00									
BOARD MEMBER, UNTIL MARCH 2017		Х						0.	0.	0.
(6) GAY CIOFFI	1.00									
BOARD MEMBER		х						0.	0.	0.
(7) JOHN S LEIBOVITZ	1.00									•
BOARD PARENT REP	1	X						0.	0.	0.
(8) ALETA MARGOLIS	1.00	.,							0	0
BOARD MEMBER	1 00	X						0.	0.	0.
(9) ANIKA SIMPSON BOARD PARENT REP	1.00	x						0.	0.	0.
(10) LAUREL WINGATE	1.00	^						0.	0.	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(11) RUSTY WILSON	1.00								0.	<u>.</u>
BOARD MEMBER		x						0.	0.	0.
(12) DEBORAH WILLIAMS	40.00								•••	
HEAD OF SCHOOL		1		x				141,154.	Ο.	19,213.
(13) CATHERINE L KEPLINGER	40.00									
CHIEF OPERATING OFFICER		1				x		101,212.	Ο.	7,573.
		-								
		1								
632007 11-11-16										Form <b>990</b> (2016)

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Form 990 (2016)

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INSPIRED					ON:	STI	RA	TION	27 26	105	06	-	0
Form 990 (2016) PUBLIC CI					а LI:	abo	at (	Componented Employe	$\frac{27-26}{27-26}$	100	06	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus (A) Name and title	tees, Key Em (B) Average hours per week (list any hours for related organizations below line)	tee or director	not c		C) ition more rson lirecto	) than is bot	one h an tee)	(D) Reportable	es (continued) (E) Reportable compensation from related organizations (W-2/1099-MISC	C)	Esti amo o comp fro orgai	m the nizati relate	of Ition e ion ed
		-											
1b       Sub-total         c       Total from continuation sheets to Part V         d       Total (add lines 1b and 1c)         2       Total number of individuals (including but r	II, Section A				·····		► ►	242,366. 0. 242,366. received more than \$100		0.0.0.			86. 0. 86.
compensation from the organization													2 No
<b>3</b> Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s										[	3	Yes	X
<ul> <li>4 For any individual listed on line 1a, is the su and related organizations greater than \$15</li> <li>5 Did any person listed on line 1a receive or a</li> </ul>	0,000? If "Yes,	" со	mple	ete S	Sche	edul	e J i	for such individual	-	🖵	4	x	
rendered to the organization? If "Yes," com	•							•			5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	racto	ors	that received more than	\$100,000 of comp	ensat	ion fro	om	
the organization. Report compensation for	the calendar y	ear	endi	ing v	vith	or w	ithii I		year.				
(A) Name and business	address							<b>(B)</b> Description of s	ervices	Cor	(C) mpens		n
CENTER FOR INSPIRED TEAC							_	TEACHING			<u> </u>		
840 FIRST STREET, NE, WAS		N,	D	C 2	200	06!		FELLOW/RESID	ENTS		240	,0	00.
REVOLUTION FOODS, INC., RD, HYATTSVILLE, MD 2078	6219 COI						X	FOOD SERVICE	S		117	,3	85.
2 Total number of independent contractors (i	including but n	not lii	mite	ed to	tho	se li	stee	d above) who received n	nore than				

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

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Form 990 (2016)

# INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL

Pa	t VII							
		Check if Schedule O cont	ains a response	or note to any li	ne in this Part VIII (A) Total revenue	<b>(B)</b> Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d f f	Government grants (contribut All other contributions, gifts, gran similar amounts not included above	1b           1c           1d           ions)         1e           ts, and         If           1a-1f: \$	21,596. 153,683. 107,104. 6,355.				
				Business Code				
Program Service Revenue	2 a b c d e	PER PUPIL FACIL ACTIVITY FEE		900099 900099 611710	5,497,431. 1,293,336. 48,373.	1,293,336.		
<u>م</u>	f	All other program service reve	nue					
		Total. Add lines 2a-2f			6,839,140.			
	3 4	Investment income (including other similar amounts) Income from investment of tax	, 		1,862.			1,862.
	5	Royalties		►				
	b c	Rental income or (loss)	(i) Real	(ii) Personal	-			
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other				
	b c	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)						
Other Revenue	8 a	Gross income from fundraising including \$ 21,5 contributions reported on line Part IV, line 18 Less: direct expenses	g events (not 96. of 1c). See a	19,674.				
đ		Net income or (loss) from func		<b>&gt;</b>	0.			
	9 a	Gross income from gaming ac Part IV, line 19 Less: direct expenses	tivities. See		-			
		Net income or (loss) from gam						
	b	Gross sales of inventory, less and allowances Less: cost of goods sold	a b		-			
	C	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
	11 a b							
	لم ام	All other reverse						
		All other revenue Total. Add lines 11a-11d						
	е 12	Total revenue. See instructions.			7,123,385.	6,839,140.	0.	1,862.
63200	9 11-11			····· P				Form <b>990</b> (2016)

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#### INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL

	990 (2016) PUBLIC CHAR			27-26	18506 Page <b>10</b>
	T IX Statement of Functional Expens				
Secti	on 501(c)(3) and 501(c)(4) organizations must com		•	, , ,	
	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	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,	100 000		100 000	
	trustees, and key employees	172,336.		172,336.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,436,945.	3,159,050.	265,523.	12,372.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	34,219.	32,950.	1,151.	118.
9	Other employee benefits	190,655.	175,544.	14,411.	700.
10	Payroll taxes	264,460.	232,276.	31,275.	909.
11	Fees for services (non-employees):				
а	Management				
b	Legal	8,099.	8,099.		
	Accounting	118,666.	- ,	118,666.	
	r				
	Lobbying Professional fundraising services. See Part IV, line 17				
e					
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	28,439.	25,018.	3,324.	97.
	column (A) amount, list line 11g expenses on Sch 0.)	20,439.	23,010.	5,524.	57.
12	Advertising and promotion	67 069	E0 010	7 0 2 2	226.
13	Office expenses	67,068.	58,910.	7,932.	220.
14	Information technology				
15	Royalties	1 000 461	1 000 000		
16	Occupancy	1,293,461.	1,272,688.	20,773.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	59,137.	51,940.	6,993.	204.
23	Insurance	29,818.	26,189.	3,526.	103.
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 0.)				
а	DIRECT STUDENT COSTS	779,678.	779,678.		
b	AUTHORIZER FEES	69,926.		69,926.	0.
с С	PROFESSIONAL DEVELOPMEN	39,522.	39,522.		
d	OTHER STAFF RELATED EXP	25,982.	23,053.	2,846.	83.
		7,915.	3,500.	4,415.	000
	All other expenses	6,626,326.	5,888,417.	723,097.	14,812.
25	Total functional expenses. Add lines 1 through 24e	0,020,520.	5,000,41/•	145,0910	14,014
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2016

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Form **990** (2016)

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INSPIRED TEACHING DEMONSTRATION

PUBLIC CHARTER SCHOOL

		Check if Schedule O contains a response or not	e to anv l	ine in this Part X			
		Check il Scheddle O contains a response of hot	e to any i		(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			2,275,110.	2	2,761,546.
	3	Pledges and grants receivable, net			10,143.	3	16,832.
	4	Accounts receivable, net			27,494.	4	38,882.
	5	Loans and other receivables from current and fo	ormer offic	cers, directors,			
		trustees, key employees, and highest compensation	ated emp	loyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualit	fied perso	ons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(	3)(B), and contributing			
		employers and sponsoring organizations of sect					
Assets		employees' beneficiary organizations (see instr).				6	
SS	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use		·····	20 550	8	22.000
	9			·····	32,552.	9	33,022.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	340,779.	100 000		107 000
	b	Less: accumulated depreciation		212,857.	108,902.	10c	127,922.
	11	Investments - publicly traded securities				11	70 (01
	12	Investments - other securities. See Part IV, line 1			257,025.	12	78,621.
	13	Investments - program-related. See Part IV, line -				13	
	14	Intangible assets			5,000.	14	5,000.
	15	Other assets. See Part IV, line 11			2,716,226.	15	3,061,825.
	16	Total assets. Add lines 1 through 15 (must equa			90,395.	16	93,907.
	17	Accounts payable and accrued expenses				17 18	55,507.
	18 19	Grants payable			661.	19	24,093.
	20	Deferred revenue				20	24,055.
	20	Tax-exempt bond liabilities Escrow or custodial account liability. Complete F				20	
ß	22	Loans and other payables to current and former				21	
Liabilities		key employees, highest compensated employee					
lide		Complete Part II of Schedule L				22	
Ë	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines					
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			91,056.	26	118,000.
		Organizations that follow SFAS 117 (ASC 958	), check	here ► X and			
es		complete lines 27 through 29, and lines 33 an	d 34.				
anc	27	Unrestricted net assets			2,603,056.	27	2,926,711.
3al	28	Temporarily restricted net assets			22,114.	28	17,114.
ЪГ	29	Permanently restricted net assets		<u></u> L		29	
Εu		Organizations that do not follow SFAS 117 (As	SC 958),	check here			
ъ.		and complete lines 30 through 34.					
sets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or eq		F		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	0.042.005
~	33	Total net assets or fund balances			2,625,170.	33	2,943,825.
	34	Total liabilities and net assets/fund balances			2,716,226.	34	3,061,825. Form <b>990</b> (2016)

Form **990** (2016)

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Form 990 (2016)

Part X Balance Sheet

INSPIRED	TEACHING	DEMONSTRATION

	1990 (2016) PUBLIC CHARTER SCHOOL	27-26.	18206	Pag	<u>je 12</u>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Χ
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,123	3,38	35.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,626		
3	Revenue less expenses. Subtract line 2 from line 1	3	497		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,625	5,17	70.
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)	9	-178	3,4(	)4.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
_	column (B))	10	2,943	8,82	25.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>2</b> a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	•			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				

Form **990** (2016)

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SCHEDULE A							OMB No. 1545-0047		
(Form 990 or 990-EZ)		rity Status an nization is a section 50					2016		
		47(a)(1) nonexempt cha					2010		
Department of the Treasury Internal Revenue Service		Attach to Form 990 or I			www.iro.cov/fo	rm000	Open to Public Inspection		
Name of the organization	Information about Schedule A INSPIRED TEACH				ww.irs.gov/io		identification number		
Name of the organization	PUBLIC CHARTER		AIION				7-2618506		
Part I Reason fo	r Public Charity Status (		omplete thi	is part.) Se	ee instruction:		/ 2010500		
	rivate foundation because it is:								
·	ention of churches, or association	•	-	,					
	bed in <b>section 170(b)(1)(A)(ii).</b> (								
3 A hospital or a d	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4 A medical resea	arch organization operated in co	njunction with a hospita	l described	l in <b>sectio</b>	n 170(b)(1)(A	)(iii). Enter	the hospital's name,		
city, and state:									
	operated for the benefit of a co	ollege or university owne	d or operat	ed by a g	overnmental ı	unit describ	ed in		
	(1)(A)(iv). (Complete Part II.)								
	or local government or govern					ha ganaral	nublic deceribed in		
	that normally receives a substa 1)(A)(vi). (Complete Part II.)	antial part of its support	rom a gove	ernmenta		ne general	public described in		
	ust described in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
	research organization described		-	ed in conju	inction with a	land-grant	college		
or university or a	a non-land-grant college of agric	culture (see instructions)	Enter the	name, city	, and state o	f the colleg	e or		
university:									
10 An organization	that normally receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, members	ship fees, a	nd gross receipts from		
	d to its exempt functions - subje								
	elated business taxable income	e (less section 511 tax) fr	om busines	sses acqu	ired by the or	ganization	after June 30, 1975.		
	9(a)(2). (Complete Part III.)	sively to test for public or	foty Soo e	nation El	O(a)(4)				
L L	organized and operated exclus organized and operated exclus	•	•			arry out the	nurnoses of one or		
0	upported organizations describe	•	-			-			
	h 12d that describes the type of								
	porting organization operated, s			-		-	giving		
the supported	d organization(s) the power to re	egularly appoint or elect	a majority c	of the dire	ctors or truste	es of the s	upporting		
organization.	You must complete Part IV, Se	ections A and B.							
	porting organization supervised				-		-		
	nagement of the supporting org		ame perso	ons that co	ontrol or mana	age the sup	ported		
<u> </u>	s). You must complete Part IV,		in connect	tion with	and functions	lly intograt	ad with		
	tionally integrated. A supportin organization(s) (see instructions					ny megrate	ed with,		
	functionally integrated. A supp					rted organi	zation(s)		
	ictionally integrated. The organi								
	see instructions). You must cor								
e 🗌 Check this bo	ox if the organization received a	written determination fro	om the IRS	that it is a	а Туре I, Туре	II, Type III			
functionally in	tegrated, or Type III non-function	onally integrated support	ing organiz	zation.					
g Provide the following (i) Name of support	information about the support ed (ii) EIN	ed organization(s). (iii) Type of organization	(iv) Is the organ	nization listed	(v) Amount of	monetary	(vi) Amount of other		
organization		(described on lines 1-10	in your governir Yes	ng document? No	support (see ir	,	support (see instructions)		
		above (see instructions))							
Total									
	ction Act Notice, see the Inst	ructions for Form 990 c	r 990-EZ.	632021 09-	21-16 <b>Sche</b>	dule A (For	m 990 or 990-EZ) 2016		
-	-	13				•			

#### INSPIRED TEACHING DEMONSTRATION Schedule A (Form 990 or 990-EZ) 2016 PUBLIC CHARTER SCHOOL

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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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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 $\dots$						
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	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources $\dots$					<u> </u>	
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 activities,		,			12	
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
Sol	organization, check this box and stor ction C. Computation of Publ	here	rcentage				
				(f)		14	
	Public support percentage for 2016 (		-			14	%
	Public support percentage from 2015 33 1/3% support test - 2016. If the o						%
104	stop here. The organization qualifies						
h	33 1/3% support test - 2015. If the o						
Ň	and stop here. The organization qual						
179	10% -facts-and-circumstances tes						
170	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	-	-	
h	10% -facts-and-circumstances tes	•	•		•		
~	more, and if the organization meets th						
	organization meets the "facts-and-cire						
18	Private foundation. If the organization						s
				, ,		edule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2016

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## Schedule A (Form 990 or 990 EZ) 2016 PUBLIC CHARTER SCHOOL

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

(Complete only if you checked the box on line 10 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b 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	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	r the organization'	's first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here						
Sec	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2016 (	line 8, column (f) c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2015	Schedule A, Par	t III, line 15			16	%
Sec	ction D. Computation of Inve	stment Incom	ne Percentage	)			
17	Investment income percentage for 20	<b>)16</b> (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2016. If the					33 1/3% , and line	17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2015. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and <b>s</b>	top here. The org	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t	this box and see in	structions	<b>)</b>
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#### INSPIRED TEACHING DEMONSTRATION Schedule A (Form 990 or 990-EZ) 2016 PUBLIC CHARTER SCHOOL

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2016

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Sche	dule A (Form 990 or 990-EZ) 2016 PUBLIC CHARTER SCHOOL	27-261850	<b>6</b> Ра	age 5
Pa	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	(		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see ins	tructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government ent	ity (see instruction:	s).	
2	Activities Test. Answer (a) and (b) below.	_	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>Provide details in <b>Part VI</b>.</i>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- Cu		
~	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
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#### INSPIRED TEACHING DEMONSTRATION Schedule A (Form 990 or 990-EZ) 2016 PUBLIC CHARTER SCHOOL

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current vear is the organization's first as a non-functional	v integrate	d Type III supporting or	anization (see

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

Schedule A (Form 990 or 990-EZ) 2016

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	dule A (Form 990 or 990-EZ) 2016 PUBLIC CHARTE	R SCHOOL	2	7-2618506 Page 7
Ра	rt V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	1
Sect	ion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
с	From 2013			
d	From 2014			
e	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
-	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
•	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
U	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
'	and 4c			
8	Breakdown of line 7:			
a				
-	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
-	Excess from 2016			
e				(Forme 000 or 000 F7) 0040

Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 2016 PUE	BLIC CHARTER SCHOOL 27-2618506	Pa
Part VI Supplemental Informatio Part IV, Section A, lines 1, 2, 3b, line 1; Part IV, Section D, lines 2	<b>D1.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Sectio and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.	n C, art V
32028 09-21-16	Schedule A (Form 990 or 990-	-EZ)
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Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

#### ** PUBLIC DISCLOSURE COPY **

## **Schedule of Contributors**

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

## 2016

Employer identification number

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PUBLIC CHARTER SCHOOL

27-2618506

Organization	type	check	one	
Organization	Lype	CHECK	ULIE	

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization 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**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL Employer identification number

27-2618506

Part I	Contributors (See instructions). Use duplicate copies of Part I if ad	ditional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		\$     10,000.       \$     10,000.   Person Payroll Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2		Person     X       \$ 87,536.     Payroll       (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3		Person     X       \$ 35,930.     Payroll       (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
4		\$     7,962.       \$     7,962.         Person         Payroll         Noncash      (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5		\$\$, 5,000.     Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
		\$ Person Payroll Noncash (Complete Part II for noncash contributions.)
623452 10-18	3-16 22	Schedule B (Form 990, 990-EZ, or 990-PF) (20

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Schedule B	(Form 990,	990-EZ, or	990-PF)	(2016)	
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Name of organization

INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL

Employer identification number

27-2618506

#### Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I \$ (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I \$ Schedule B (Form 990, 990-EZ, or 990-PF) (2016) 623453 10-18-16 23

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	ED TEACHING DEMONSTRAT CHARTER SCHOOL	TON	27-2618506	
Part III		columns ( <b>a)</b> through ( <b>e) and</b> the fo is, charitable, etc., contributions of \$1,000	bed in section 501(c)(7), (8), or (10) that total more than \$ ollowing line entry. For organizations	51,00
(a) No. from	(b) Purpose of gift		(d) Description of how gift is he	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	
-		(e) Transfer of g	 	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
  -		(e) Transfer of g	 	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	eld
		(e) Transfer of		
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	eld
Part I -	(-,			
-		(e) Transfer of g	 gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	

			al Financial Statements	OMB No. 1545-0047
(Forr	n 990)	Complete if the org Part IV, line 6, 7, 8, 9, 10	anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.	
	ment of the Treasury		Attach to Form 990.	/form990 Open to Public
-	I Revenue Service e of the organization		rm 990) and its instructions is at www.irs.gov DEMONSTRATION	Employer identification number
Nam	e of the organization	PUBLIC CHARTER SCH		27-2618506
Pa	t I Organiza		ed Funds or Other Similar Funds or	
	organizatior	n answered "Yes" on Form 990, Part IV, lir	ie 6.	
			(a) Donor advised funds	(b) Funds and other accounts
1	Total number at en	nd of year		
2	Aggregate value of	f contributions to (during year)		
3	Aggregate value of	f grants from (during year)		
4		t end of year		
5	-		writing that the assets held in donor advised fu	
			exclusive legal control?	
6	•	<b>C</b>	advisors in writing that grant funds can be used	-
			or donor advisor, or for any other purpose conf	
Pa	impermissible priva		ganization answered "Yes" on Form 990, Part I	
1			-	v, me 7.
		servation easements held by the organizat of land for public use (e.g., recreation or e		lly important land area
		f natural habitat	Preservation of a certified	
		of open space		
2			fied conservation contribution in the form of a	conservation easement on the last
-	day of the tax year	<b>o o</b> 1		Held at the End of the Tax Year
а				
b				
с			ucture included in (a)	
d			after 8/17/06, and not on a historic structure	
	listed in the Nation	al Register		2d
3			leased, extinguished, or terminated by the orga	
	year 🕨			
4	Number of states v	where property subject to conservation ea	sement is located 🕨	
5	•	tion have a written policy regarding the pe		
			t holds?	
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	ation easements during the year
_				
7		es incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation e	easements during the year
•	►\$			
8			ve satisfy the requirements of section 170(h)(4)	
0				
9			ion easements in its revenue and expense stat tion's financial statements that describes the c	
	conservation ease		tion's mancial statements that describes the c	Signification's accounting for
Pa			f Art, Historical Treasures, or Other	r Similar Assets.
		the organization answered "Yes" on Form		
<b>1</b> a			SC 958), not to report in its revenue statement	and balance sheet works of art,
			hibition, education, or research in furtherance of	
	the text of the foot	note to its financial statements that descr	ibes these items.	
b	If the organization	elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other	similar assets held for public exhibition, e	ducation, or research in furtherance of public s	service, provide the following amounts
	relating to these ite	ems:		
	(i) Revenue inclue	ded on Form 990, Part VIII, line 1		► \$
	(ii) Assets include	ed in Form 990, Part X		► \$
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial gair	n, provide
	-	ints required to be reported under SFAS 1		
	-	eduction Act Notice, see the Instruction	s tor Form 990.	Schedule D (Form 990) 2016
63205	1 08-29-16		25	
			4 J	

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Schedule DForm 900 2016         PUBLIC CHARTER SCHOOL         27-2618505         Page 2           9         Using the organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assetsgowindrunded.           3         Using the organization schedule in accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):         d         Loan or exchange programs           0         Descendent in the generations         d         Loan or exchange programs           0         Descendent in the generation solic or crock donation of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?         Yes         Ne           Part IV         Escondaria or any encoded in Arrangement 5 Complete if the organization awered "Yes" on Form 990, Part IV, line 9, or reported an amount on form 990, Part X, line 21, tor escrow or custodial account liability?         Yes         No           1a         Is the organization in agent. The ATXII and complete the following table:         Image: the arrangement in Part XIII. tor escrow or custodial account liability?         Yes         No           14         Endowment Levals         Image: the arrangement in Part XII. The arrangement in Part XII. The asset on the asset on the organization include an amount on form 900, Part X, line 21, for escrow or custodial account liability?         Yes         No           14         Folding the arrangement in Part XII. T		INSPIRE	D TEACHING	DEM	ONSTRA	TION					
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check at that apply): a C Dises exhibition b Scholarly reasarch c C description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the vary, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the vary, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the vary, did the organization's collection if the organization answered "Yes" on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor reported an amount on Form 990, Part X, line 2, nor section like acplanation has been provided or Part XIII.      Bed the organization in advect the organization answered "Yes" on Form 990, Part X, line 1,	Sche	dule D (Form 990) 2016 <b>PUBLIC</b>	CHARTER SC	HOOL	I			27-	2618506	Page	2
check al that apply:       d       Loan or exchange programs         b       Scholarly research       e       Other	Par	t III Organizations Maintaining C	<b>Collections of A</b>	rt, His	torical Tr	easures, o	or Other	Similar A	ssets(contin	ued)	
a       Public exhibition       d       □ can or exchange programs         b       Scholary research       e       □ Other         c       Preservation for future generations       e       □ Other         d       Proceevation for future generations       online for receive donations of art, historical treasures, or other similar assets       tote sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 900, Part IV, line 9, or reported an amount on Form 900, Part X, line 21.         la       Is the organization angent, trustee, custodial or other intermediary for contributions or other assets not included on form 900, Part X, line 21.         la       Is the organization angent, trustee, custodial or other intermediary for contributions or other assets not included on form 900, Part X, line 21.         la       Is the organization and part thuse, custodial or other intermediary for contributions or other assets not included on form 900, Part X, line 21.         la       Is the organization include an amount on Form 900, Part X, line 21.       Inter section Part IV         la       Is the organization include an amount on Form 900, Part X, line 21.       Inter sectin Part XIII	3	Using the organization's acquisition, accessi	ion, and other record	ls, chec	k any of the	following that	at are a sign	ificant use o	f its collectior	ı items	
b       Scholarly research       e       Other		(check all that apply):									
c       Preservation for future generations         4       Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" or Form BOD, Part IV, line 9, or reported an amount on Form B90, Part X, line 21.         1a       Is the organization and the state custodial Arrangements. Complete if the organization answered "Yes" on Form BOD, Part IV, line 9, or reported an amount on Form B90, Part X, line 21.         1a       Is the organization and sequence in the state custodian or other intermediary for contributions or other assets not included on Form 990, Part X?         b       If 'Yes,' explain the arrangement in Part XIII and complete the following table:         •       •         •       Baginning balance         •       •         •       Candidition aduring the year         •       •         •       Candidition aduring the year         •       •         •       Baginning balance         •       •         •       Candidition aduring the year         •       •         •       Cathing balance         •       Dating balance         •       O the organization include an amount on Form 990, Part X, line 21, tor secret or custodial account liability?         • <t< td=""><td>а</td><td>Public exhibition</td><td>c</td><td></td><td>Loan or exc</td><td>hange progra</td><td>ams</td><td></td><td></td><td></td><td></td></t<>	а	Public exhibition	c		Loan or exc	hange progra	ams				
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.     During the year, did the organization is collection?	b	Scholarly research	e		Other						
S During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets     to be solid to raise funds rather than to be maintained as part of the organization's collection?     Part V Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part V, line 9, or     reported an amount on Form 980, Part X, line 21.     Is the organization an agent, fustase, custodian or other intermediary for contributions or other assets not included     on Form 980, Part X     It uses, custodian or other intermediary for contributions or other assets not included     on Form 980, Part X     It uses, custodian or other intermediary for contributions or other assets not included     on Form 980, Part X     It uses the custodian or other intermediary for contributions or other assets not included     on Form 980, Part X     It uses the custodian or other intermediary for custodial account liability     Categorian include an amount on Form 980, Part X, line 21, for escrow or custodial account liability?     If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII     Admount     If 'Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII     The organization angle of year balance     If a locurent year (b) Prior year     If off the organization answered 'Yes' on Form 980, Part X, line 10.     If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII     If Yes, "explain the arrangement in Part XIII.     If Yes, 'explain the arrangement in Part X	с	Preservation for future generations									
to be sold to raise funds rather than to be maintained as part of the organization's collection?         Yes         No.           Part IV         Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Fom 990, Part N, Ine 21.         Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Fom 990, Part X.         Image: Solution of the organization and the organization answered 'Yes' on Fom 990, Part X.           a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X.         Image: Solution of the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Image: Solution of the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?         Image: Solution of the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?         Image: Solution of the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?         Image: Solution of the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?         Image: Solution of the organization answered 'Yes' on Form 990, Part IV, line 10.           Part V         Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.         Image: Solution	4	Provide a description of the organization's co	ollections and explai	n how tl	hey further t	he organizati	ion's exemp	ot purpose in	Part XIII.		
Part W       Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X2       Ves       No         b If 'Yes,' explain the arrangement in Part XII and complete the following table:       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X2       No         c Beginning balance       Image: Complete intermediary for escrow or custolial account itability?       Ves       No         b If 'Yes,' explain the arrangement in Part XII. Oheck here if the explanation has been provided on Part XIII       Image: Complete intermediation asset intermediation on Part XIII and Complete intermediation asset of version on Part XIII       No         D If 'Yes,' explain the arrangement in Part XII. Oheck here if the explanation has been provided on Part XIII       No       No         Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.       Image: Complete intermediation asset of Complete intermediation asset of the complete intermediation asset of contributions       Image: Complete intermediation asset of Complete asset on the complete intermediation asset of contributions       Image: Complete intermediation asset of the complete asset on the organization asset of contributions         1a Beginning of year balance       Image: Complete intermediation asset of contributions       Image: Complete inthe complete asset on	5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	er similar as	ssets			
reported an amount on Form 990, Part X, line 21.         1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X         b If "Yes," explain the arrangement in Part XIII and complete the following table:         Amount         1d		to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's c	ollection?			Yes	<u>N</u>	o
1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?       Yes       No         b       If 'Yes,'' explain the arrangement in Part XIII and complete the following table:       Amount       Amount         c       Beginning balance       1c       Amount         d       Additions during the year       1d       1d         e       Ending balance       1f       1d         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       Pert V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part XII.       Pert V       Endowment Funds.       (e) Four years back       (f) Three years back       (f) Four years back       <	Par			ete if the	e organizatio	on answered	"Yes" on Fo	orm 990, Par	t IV, line 9, or		
on Form 990, Part X?       Yes       No         b       If 'Yes,'' explain the arrangement in Part XIII and complete the following table:       Amount         c       Beginning balance       1d         d       Additions during the year       1d         e       Distributions during the year       1d         2a       Didtho graphization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If 'Yes,'' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a       Beginning of year balance       (b) Prior year       (c) Two years back       (e) Four years back         1b       Contributions       (b) Prior year       (c) Two years back       (e) Four years back         1a       Beginning of year balance       (b) Prior year       (b) Prior year       (c) The years back       (e) Four years back         2       Provide the e		reported an amount on Form 990, Pa	rt X, line 21.								
b       If "Yes," explain the arrangement in Part XII and complete the following table: <ul> <li>Amount</li> <li>a Beginning balance</li> <li>Id</li> <liid< li=""> <li>Id<td>1a</td><td>Is the organization an agent, trustee, custod</td><td>ian or other intermed</td><td>diary for</td><td>contribution</td><td>ns or other as</td><td>ssets not ind</td><td>cluded</td><td>_</td><td></td><td></td></li></liid<></ul>	1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	ssets not ind	cluded	_		
c       Beginning balance       Ic       Amount         d       Additions during the year       Id       Id         e       Distributions during the year       Id       Id         d       Ending balance       Id       Id       Id         a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Ves       No         b       If 'Yes,'' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       Image: Check here if the organization answered 'Yes' on Form 990, Part IV, line 10.         Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.       Image: Check here if the explanation has been provided on Part XIII.       Image: Check here if the explanation has been provided on Part XIII.       Check here if the organization answered 'Yes' on Form 990, Part IV, line 10.         f       Administrative expenses       Image: Check here if the explanation has been provided on Part XIII.       Image: Check here if the organization answered 'Yes' on Form 990, Part IV, line 10.         f       Administrative expenses       Image: Check here if the explanation provement the provement pr		on Form 990, Part X?							Yes	∟ N	ο
c       Beginning balance       1c       1d         d       Additions during the year       1d       1d         e       Distributions during the year       1e       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "yes, replain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Image: State of the explanation has been provided on Part XIII.       Image: State of the explanation has been provided on Part XIII.         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.       Image: State of the explanation has been provided on Part XIII.         Image: State of the explanation answered "Yes" on Form 990, Part IV, line 10.       Image: State of the explanation has been provided on Part XIII.         Image: State of the extinate explanation answered "Yes" on Form 990, Part IV, line 10.       Image: State of the extinate explanation has been provided on Part XIII.         Image: State of the extinate explanation answered "Yes" on Form 990, Part IV, line 10.       Image: State of the extinate explanation the explanation (a) held as:         Image: State of the extinated percentage of the current year end balance (line 1g, column (a) held as:       Image: State of the extinate explanation (a) held as:         Image: State of the extinated end of the organization that are held and administered for the organization by:       <	b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:			·			
d Additions during the year       1d         e Distributions during the year       1d         f Ending balance       1t         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Ives         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Three years back       (e) Four years back         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Three years back       (e) Four years back         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Three years back       (e) Four years back         1a Grants or scholarships       (a) Current year       (b) Prior year       (c) Three years back       (e) Four years back         1a divisionative expenditures for facilities       (a) Current year       (b) Prior year       (c) Three years back       (e) Four years back         1b of year balance       (b) Prior year       (c) Three years back       (e) Four years back       (e) Four years back         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       (a) Cost or other       (f) The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment   (b) Cost or oth									Amount		
e       Distributions during the year       1e         f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Four years back         a       Grants or scholarships       (a) Current year       (b) Prior year       (c) Two years back       (d) Four years back         a       Grants or scholarships       (a) Current year       (b) Prior year       (c) Two years back       (d) Four years back         a       Grants or scholarships       (a) Current year       (b) Prior year       (c) Two years back       (d) Four years back         a       Grants or scholarships       (a) Current year       (b) Prior year       (c) Two years back       (d) Four years         a       d drants or scholarships       (b) Prior year       (c) Two years back <td>с</td> <td>Beginning balance</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>1c</td> <td></td> <td></td> <td></td>	с	Beginning balance						1c			
f       Ending balance	d	Additions during the year						1d			
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	е	Distributions during the year						1e			
b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         c       Net investment earnings, gains, and losses       (a)	f	Ending balance						1f			
Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         c       Net investment earnings, gains, and losses       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         d       Grants or scholarships       (a) (a) (b) Prior year       (c) Two years back       (e) Four years back         e       Other expenditures for facilities       (a) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or c	ustodial acco	ount liability	?	Yes	<u> </u>	ο
a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b Contributions	<u>b</u>										
1a Beginning of year balance   b Contributions   c Net investment earnings, gains, and losses   d Grants or scholarships   e Other expenditures for facilities   and programs	Par	t V Endowment Funds. Complete i	if the organization ar	nswered	"Yes" on Fo	1					
b       Contributions			(a) Current year	(b) F	Prior year	(c) Two yea	rs back (d)	Three years b	oack <b>(e)</b> Four	years bac	K
c       Net investment earnings, gains, and losses											
d Grants or scholarships	b	Contributions									
e       Other expenditures for facilities and programs	С	Net investment earnings, gains, and losses									
and programs	d	Grants or scholarships									
f       Administrative expenses	е	Other expenditures for facilities									
g End of year balance		and programs									
2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a       Board designated or quasi-endowment ▶%         b       Permanent endowment ▶%         c       Temporarily restricted endowment ▶%         mb       percentages on lines 2a, 2b, and 2c should equal 100%.         3a       A re there endowment Imuds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) unrelated organizations</li> <li>(ii) related organizations</li> <li>(iii) related organizations</li> <li>(ii) related organizations</li> <li>(ii) related organizations</li> <li>(iii) related organizations</li> <li>(iii) related organizations</li> <li>(iii) related organizations listed as required on Schedule R?</li> <li>4</li> <li>Describe in Part XIII the intended uses of the organization's endowment funds.</li> </ul> Part VI     Land, Buildings, and Equipment.           Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.           Description of property         (a) Cost or other basis (other)         (b) Cost or other               basis (investment) <li>basis (other)</li> <li>depreciation</li> 1a     Land           b         Buildings           c         Leasehold improvements         93, 018 • 51, 986 • 41, 032 •	f	Administrative expenses									
a Board designated or quasi-endowment ▶      %         b Permanent endowment ▶      %         c Temporarily restricted endowment ▶      %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:	g	End of year balance									
b       Permanent endowment ▶%         c       Temporarily restricted endowment ▶%         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:         (i) unrelated organizations	2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:					
c       Temporarily restricted endowment ▶       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       Yes No         (i)       unrelated organizations       3a(i)         (ii)       related organizations       3a(i)         (iii)       related organizations       3a(i)         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI         Part VI       Land, Buildings, and Equipment.       Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land	а	Board designated or quasi-endowment		_%							
The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) unrelated organizations</li> <li>(ii) related organizations</li> <li>(ii) related organizations</li> <li>(ii) related organizations</li> <li>(iii) related organizations</li> <li>(ii) related organizations</li> <li>(iii) related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> </ul> <ul> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(e) Leasehold improvements</li> <li>(f) So (f) (f) (f) (f) (f) (f) (f) (f) (f) (f)</li></ul>	b	Permanent endowment	%								
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       Yes       No         (i)       unrelated organizations       3a(i)       3a(i)       3a(i)       3a(i)       3a(i)       3a(i)       3a(ii)       3a(ii	С										
by:       Yes       No         (i)       unrelated organizations       3a(i)       3a(i)       3a(ii)       3b       3b       3b       3b       3b       3b       3b       3a(ii)       3b       3a(ii)       3a		The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
(i) unrelated organizations       3a(i)         (ii) related organizations       3a(ii)         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4 Describe in Part XIII the intended uses of the organization's endowment funds.       3b         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land       93,018.       51,986.       41,032.         c Leasehold improvements       93,018.       51,986.       41,032.         d Equipment       145,690.       107,102.       38,588.         e Other       102,071.       53,769.       48,302.	3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administe	ered for the	organization			
(ii) related organizations       3a(ii)         a       b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       3b       3b       3b         Part VI       Land, Buildings, and Equipment.       3b       3b       3b       3b       3b         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value       (d) Book value         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land       93,018 ·       51,986 ·       41,032 ·         b       Buildings       93,018 ·       51,986 ·       41,032 ·         c       Leasehold improvements       93,018 ·       51,986 ·       41,032 ·         d       Equipment       145,690 ·       107,102 ·       38,588 ·       902 ·         e       Other       102,071 ·       53,769 ·       48,302 ·       48,302 ·		by:								Yes No	2
b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       1a       Land       1a       1a         b       Buildings       145, 690.       107, 102.       38, 588.         e       Other       102, 071.       53, 769.       48, 302.		(i) unrelated organizations							3a(i)		
4 Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)         b Buildings       (d) Book value         c Leasehold improvements       93,018.         51,986.       41,032.         d Equipment       145,690.       107,102.         e Other       102,071.       53,769.		(ii) related organizations							3a(ii)		
Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, 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         1a       Land	b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on S	Schedule R?				3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land				owment	funds.						
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land	Par										
basis (investment)         basis (other)         depreciation           1a Land		· · ·		-							
b Buildings         93,018         51,986         41,032           c Leasehold improvements         145,690         107,102         38,588           e Other         102,071         53,769         48,302		Description of property					. ,		(d) Book	value	
b Buildings         93,018         51,986         41,032           c Leasehold improvements         145,690         107,102         38,588           e Other         102,071         53,769         48,302	1a	Land									
c Leasehold improvements       93,018.       51,986.       41,032.         d Equipment       145,690.       107,102.       38,588.         e Other       102,071.       53,769.       48,302.	b	Buildings									
d Equipment         145,690.         107,102.         38,588.           e Other         102,071.         53,769.         48,302.											
e Other						-					
					10	2,071.	5	3,769.			
				X, colur	mn (B), line i	10c.)		►	125	7,922	•

Schedule D (Form 990) 2016

## INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL

Complete if the organization answered "Yes" of	on Form 990, Part IV, IIn		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or end-of-year market v
Financial derivatives			
Closely-held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(17) al. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
art VIII Investments - Program Related.			
Complete if the organization answered "Yes" o			
(a) Description of investment	(b) Book value	(c) Method of va	aluation: Cost or end-of-year market va
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
 Complete if the organization answered "Yes" o	n Form 990 Part IV lin	e 11d. See Form 990 I	Part X line 15
Complete if the organization answered "Yes" of (a) D	on Form 990, Part IV, lin Description	e 11d. See Form 990, I	Part X, line 15. (b) Book val
(a) D		e 11d. See Form 990, I	
(a) D		e 11d. See Form 990, I	
(a) D		e 11d. See Form 990, I	
(a) D (1) (2)		e 11d. See Form 990, I	
(a) D (1) (2) (3)		e 11d. See Form 990, I	
(a) D (1) (2) (3) (4)		e 11d. See Form 990, I	
(a) D (1) (2) (3) (4) (5)		e 11d. See Form 990, I	
(a) D (1) (2) (3) (4) (5) (6)		e 11d. See Form 990, I	
(a) D (1) (2) (3) (4) (5) (6) (7) (8)		e 11d. See Form 990, I	
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line	Description	e 11d. See Form 990, I	
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities.	Description		(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line eart X Other Liabilities. Complete if the organization answered "Yes" of	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" c (a) Description of liability (1) Federal income taxes (2) (3)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) ttal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Description	e 11e or 11f. See Form	(b) Book val
(a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	15.) In Form 990, Part IV, lin	e 11e or 11f. See Form	(b) Book val

Schedule D (Form 990) 2016

632053 08-29-16

INSPIRED	TEACHING	DEMONSTRATION
PUBLTC CE	IARTER SC	HOOT.

Sche	dule D (Form 990) 2016 PUBLIC CHARTER SCHOOL	27-	2618506 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturr	າ.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	7,027,238.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a -178,404.		
b	Donated services and use of facilities 2b 62,583.		
с	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d		
е	Add lines 2a through 2d	2e	-115,821.
3	Subtract line 2e from line 1	3	7,143,059.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.) 4b -19,674.		
с	Add lines 4a and 4b	4c	-19,674.
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )	5	7,123,385.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	6,708,583.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 62,583.		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.)		
е	Add lines <b>2a</b> through <b>2d</b>	2e	62,583.
3	Subtract line <b>2e</b> from line <b>1</b>	3	6,646,000.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.) 4b19,674.		10 (74
-	Add lines 4a and 4b	4c	-19,674.
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )	5	6,626,326.
гна	rt XIII Supplemental Information.		

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

#### PART X, LINE 2:

THE SCHOOL HAS ADOPTED THE ACCOUNTING OF UNCERTAINTY IN INCOME TAXES AS
REQUIRED BY THE INCOME TAXES TOPIC OF THE FASB ASC. THIS TOPIC REQUIRES
THE SCHOOL TO DETERMINE WHETHER A TAX POSITION IS MORE LIKELY THAN NOT TO
BE SUSTAINED UPON EXAMINATION BY THE APPLICABLE TAXING AUTHORITY, INCLUDING
RESOLUTION OF ANY RELATED APPEALS OR LITIGATION PROCESSES, BASED ON THE
TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT TO BE RECOGNIZED IS
MEASURED AS THE LARGEST AMOUNT OF BENEFIT THAT IS MORE THAN FIFTY PERCENT
LIKELY OF BEING REALIZED UPON ULTIMATE SETTLEMENT WHICH COULD RESULT IN
THE SCHOOL RECORDING A TAX LIABILITY THAT WOULD REDUCE ITS NET ASSETS.

5	THE S	SCHOOL	HAS	ANALYZED	ITS	TAX	POSITI	ONS,	AND	HAS	CONCL	UDED	THAT	NO	
6	32054 08-	29-16										ę	Schedule	D (Form 990	) 2016
								28							
115	2012	3 7939	27 3	0285		2016	.05040	INSP	IRED	TEAC	CHING	DEMO	NSTRA	30285	1

Schedule D (Form 990) 2016 Part XIII Supplemental Infor	PUBLIC CHA	EACHING DEMONS RTER SCHOOL	STRATION	27-2618506 Page 5
LIABILITY FOR UNREC	OGNIZED TAX	BENEFITS SHOU	JLD BE RECOF	RDED RELATED TO ANY
UNCERTAIN TAX POSIT	IONS TAKEN	ON RETURNS FII	ED FOR OPEN	N TAX YEARS
(2013-2015), OR EXP	ECTED TO BE	TAKEN IN ITS	2016 TAX RE	ETURN. THE SCHOOL IS
NOT AWARE OF ANY TA	X POSITIONS	FOR WHICH IT	BELIEVES TH	HAT THERE IS A
REASONABLE POSSIBIL	ITY THAT TH	E TOTAL AMOUNT	S OF UNRECO	OGNIZED TAX BENEFITS
WILL CHANGE MATERIA	LLY IN THE	NEXT TWELVE MC	ONTHS.	
PART XI, LINE 4B -	OTHER ADJUS	TMENTS:		
SPECIAL EVENT DIREC	T EXPENSES			-19,674.
PART XII, LINE 4B -	OTHER ADJU	STMENTS:		
SPECIAL EVENT DIREC	T EXPENSES			-19,674.
632055 08-29-16				Schedule D (Form 990) 2016

SC	HE	DU	LE	E

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

#### Schools Complete if the organization answered "Yes" on Form 990,

OMB No. 1545-0047

	Part IV, line 13, or Form 990-EZ, Part VI, line 48.			,
partment of the Treasury	Attach to Form 990 or Form 990-EZ.	Open t		lic
ernal Revenue Service	▶ Information about Schedule E (Form 990 or 990-EZ ) and its instructions is at www.irs.gov/form	990. Inspec		
me of the organization		nployer identificat		
	PUBLIC CHARTER SCHOOL	27-2618	3506	<u>,</u>
Part I				
			YES	N
	on have a racially nondiscriminatory policy toward students by statement in its charter, bylaws			
	trument, or in a resolution of its governing body?		X	_
	on include a statement of its racially nondiscriminatory policy toward students in all its brochu			
	ner written communications with the public dealing with student admissions, programs, and sc		X	╇
	n publicized its racially nondiscriminatory policy through newspaper or broadcast media during	-		
	n for students, or during the registration period if it has no solicitation program, in a way that m			
	all parts of the general community it serves? If "Yes," please describe. If "No," please explain.		37	
If you need more sp	pace, use Part II	3	X	┢
SEE PART	.1			
Does the organizati	on maintain the following?			
a Records indicating	the racial composition of the student body, faculty, and administrative staff?	4a	X	
	ing that scholarships and other financial assistance are awarded on a racially nondiscriminator		X	Τ
c Copies of all catalo	gues, brochures, announcements, and other written communications to the public dealing with	n student		Т
admissions, progra	ms, and scholarships?	4c	X	
	al used by the organization or on its behalf to solicit contributions?		X	Τ
	on discriminate by race in any way with respect to:			
	privileges?			Ŀ
D Admissions policies	2			
c Employment of fact	s?			
c Employment of face	ulty or administrative staff?	5b 5c		
<ul><li>c Employment of fact</li><li>d Scholarships or oth</li></ul>	ulty or administrative staff?	5b 5c 5d		
<ul><li>c Employment of fact</li><li>d Scholarships or oth</li><li>e Educational policies</li></ul>	ulty or administrative staff?	5b 5c 5d 5e		
<ul> <li>c Employment of fact</li> <li>d Scholarships or oth</li> <li>e Educational policies</li> <li>f Use of facilities?</li> </ul>	ulty or administrative staff? er financial assistance? s?	5b 5c 5d 5e 5f		
<ul> <li>c Employment of fact</li> <li>d Scholarships or othe</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> </ul>	ulty or administrative staff? er financial assistance? s?	5b 5c 5d 5e 5f 5g		
<ul> <li>c Employment of fact</li> <li>d Scholarships or othe</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurriculation</li> </ul>	ulty or administrative staff? er financial assistance? s? ar activities?	5b 5c 5d 5e 5f 5g		
<ul> <li>c Employment of fact</li> <li>d Scholarships or othe</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurriculation</li> </ul>	ulty or administrative staff? er financial assistance? s?	5b 5c 5d 5e 5f 5g		
<ul> <li>c Employment of fact</li> <li>d Scholarships or other</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurriculation</li> </ul>	ulty or administrative staff? er financial assistance? s? ar activities?	5b 5c 5d 5e 5f 5g		
<ul> <li>c Employment of fact</li> <li>d Scholarships or other</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurricular</li> <li>If you answered "Y</li> </ul>	ulty or administrative staff? er financial assistance? s? ar activities? es" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h		
<ul> <li>c Employment of fact</li> <li>d Scholarships or othe</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurricula</li> <li>lf you answered "Y</li> <li></li></ul>	ulty or administrative staff? er financial assistance? s? ar activities? es" to any of the above, please explain. If you need more space, use Part II. on receive any financial aid or assistance from a governmental agency?	5b 5c 5d 5e 5f 5g 5h 5h 6a		
<ul> <li>c Employment of fact</li> <li>d Scholarships or oth</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurricula</li> <li>If you answered "Y</li> <li></li></ul>	ulty or administrative staff?         ier financial assistance?         is?         ar activities?         es" to any of the above, please explain. If you need more space, use Part II.         on receive any financial aid or assistance from a governmental agency?         n's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h 5h 6a		
<ul> <li>c Employment of fact</li> <li>d Scholarships or othe</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurricula</li> <li>If you answered "Y</li> <li></li></ul>	ulty or administrative staff? er financial assistance? ar activities? es" to any of the above, please explain. If you need more space, use Part II. on receive any financial aid or assistance from a governmental agency? n's right to such aid ever been revoked or suspended? es" on either line 6a or line 6b, explain on Part II.	5b 5c 5d 5e 5f 5g 5h 5h 6a 6a		
<ul> <li>c Employment of fact</li> <li>d Scholarships or oth</li> <li>e Educational policies</li> <li>f Use of facilities?</li> <li>g Athletic programs?</li> <li>h Other extracurricula</li> <li>If you answered "Y</li> <li></li></ul>	ulty or administrative staff?         ier financial assistance?         is?         ar activities?         es" to any of the above, please explain. If you need more space, use Part II.         on receive any financial aid or assistance from a governmental agency?         n's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h 5h 6a 6b		

632061 10-10-16

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.

LINE 3 - EXPLANATION OF NONDISCRIMINATION POLICY:

THE SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS OPERATING UNDER

A CONTRACT WITH THE PUBLIC CHARTER SCHOOL BOARD. REVENUE

PROCEDURE 75-50 DOES NOT APPLY TO CHARTER SCHOOLS. ALL

MATERIALS INCLUDE A STATEMENT OF NONDISCRIMINATORY PRACTICES

AND ALL PRESENTATIONS ANNOUNCEMENTS, IN WRITING OR BROADCAST

INCLUDE THE STATEMENT OF NONDISCRIMINATORY PRACTICES IN ORDER TO MAKE SUCH KNOWN TO THE GENERAL COMMUNITY.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL RECEIVES PUBLIC FUNDS FROM THE D.C.GOVERNMENT BASED ON THE NUMBER OF STUDENTS THEY ENROLL ACCORDING TO THE UNIFORM PER STUDENT FUNDING FORMULA DEVELOPED BY THE MAYOR AND CITY COUNCIL. THIS PER PUPIL ALLOCATION IS SUPPLEMENTED WITH ADDITIONAL FUNDS FOR STUDENTS WITH SPECIAL NEEDS.

LINE 7 - EXPLANATION OF RACIAL NONDISCRIMINATION COMPLIANCE:

AS A PUBLIC CHARTER SCHOOL, INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL IS EXEMPT FROM THE REQUIREMENTS OF REV. PROC. 75-50.

632062 10-10-16

Schedule E (Form 990 or 990-EZ) 2016

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31 2016.05040 INSPIRED TEACHING DEMONSTRA 30285__1

SCHEDULE G (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Complete if the	ntal Information Regarding e organization answered "Yes" on organization entered more than \$1 Attach to Form 990 bout Schedule G (Form 990 or 990-EZ)	Form 5,000 ( ) or Fo	990, F on Fo rm 99	Part IV, line 17, 18, c rm 990-EZ, line 6a. 10-EZ.	or 19,	or if the	OMB No. 1545-0047		
Name of the organization										
		Complete if the organization answe	ered "Y	'es" oi	n Form 990, Part IV,	line 1				
<ol> <li>Indicate whether the a Ail Solicitati</li> <li>Mail Solicitati</li> <li>Internet and c Phone solicit</li> <li>In-person sol</li> <li>Did the organization key employees listed</li> </ol>	e organization rais ions email solicitations ations icitations n have a written c ed in Form 990, P highest paid indiv	ed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (inclue	non-g gover iising ding o ional f	overnment grants nment grants events fficers, directors, trus fundraising services?	stees	Ye			
(i) Name and address or entity (fund		(ii) Activity	(iii) fundr have c or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (c	Amount paid r retained by) undraiser ed in col. <b>(i)</b>	<b>(vi)</b> Amount paid to (or retained by) organization		
			Yes	No						
		n is registered or licensed to solicit	contrib	<b>D</b> utions	s or has been notified	d it is	exempt from I	egistration		
or licensing.										
	duction Act Mar	ice see the Instructions for Form	000	000		204-2		290 or 990-EZ) 2016		

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

Schedule G (Form 990 or 990-EZ) 2016

632081 09-12-16

27-2618506 Page 2

Schedule G (Form 990 or 990-EZ) 2016 PUBLIC CHARTER SCHOOL Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through ANNUAL GALA col. (c)) (event type) (total number) (event type) Revenue 41,270. 41,270. 1 Gross receipts 21,596. 21,596. 2 Less: Contributions 19,674. 19,674. Gross income (line 1 minus line 2) 3 4 Cash prizes 6,355. 6,355. 5 Noncash prizes Direct Expenses 800. 6 Rent/facility costs 800. 5,992. 5,992. 7 Food and beverages 8 Entertainment Other direct expenses 6,527. 6,527. 9 19,674. 10 Direct expense summary. Add lines 4 through 9 in column (d) ► 0. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue ..... 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs **5** Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? Yes No **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? No **b** If "Yes," explain: Schedule G (Form 990 or 990-EZ) 2016 632082 09-12-16

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INSPIRED	TEACHING	DEMONSTRATION

Sch	edule G (Form 990 or 990-EZ) 2016 PUBLIC CHARTER SCHOOL 27-	2618	506	Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b	If "Yes," enter the amount of gaming revenue received by the organization $\blacktriangleright$ and the amount of gaming revenue retained by the third party $\triangleright$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year <b>&gt;</b> \$			
Ра	<b>t IV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	lines 9,	9b, 1(	)b, 15b,
63208	33 09-12-16 Schedule G (For	m 990 (	or 990	-EZ) 2016

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INSPIRE	ED TEACHI	ING DE	MONSTRATION
PUBLIC	CHARTER	SCHOO	L

Schedule G	G (Form 990 or 990-EZ)	PUBLIC CHARTER	SCHOOL		27-2618506	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Inf	ormation (continued)				
632084				So	chedule G (Form 990 o	r 990-EZ)
632084 04-01-16			35			

SC	HEDULE J	Compensation Information	1	OMB No. 1	1545-00	47
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	16	
•		Compensated Employees		20	IU	)
Depa	tment of the Treasury	<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</li> <li>Attach to Form 990.</li> </ul>		Open to	Publ	ic
	al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www.irs.gov/for	rm990.	Inspe	ction	
Nam	e of the organizatio		Employer i			mber
		PUBLIC CHARTER SCHOOL	27-2	61850	6	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a		iate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c					
	Travel for com					
		cation and gross-up payments				
	Discretionary	spending account Personal services (such as, maid, chauffe	ur, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
_		provision of all of the expenses described above? If "No," complete Part III to explain		<b>1</b> b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
-						
3		ny, of the following the filing organization used to establish the compensation of the organiza				
		ector. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to			
	·	ation of the CEO/Executive Director, but explain in Part III.				
	Compensatior					
	·	compensation consultant				
	Form 990 of o	ther organizations	ommittee			
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					v
a		e payment or change-of-control payment?				X
b		ceive payment from, a supplemental nonqualified retirement plan?				X
С		ceive payment from, an equity-based compensation arrangement?		4c		
	in "res" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only postion E01	(2) E01(c)(4) and E01(c)(20) argumentations must complete lines E.				
5		c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. In Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	20			
3	contingent on the r		211			
~	•			5a		x
a h		ation?		5a 5b		X
D D		ation? or 5b, describe in Part III.		50		
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	าท			
U	contingent on the r		71			
а				6a		x
		ation?				X
D.		pr 6b, describe in Part III.		00		
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	s			
'		nes 5 and 6? If "Yes," describe in Part III		7	х	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t				
5		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		x
9		id the organization also follow the rebuttable presumption procedure described in				
3		a the organization also follow the rebuttable presumption procedure described in a solution of the second		9		
		eduction Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990	2016

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Schedule J (Form 990) 2016	Schedu			<b>۲</b> ۲			
							(ii)
							(1)
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0.	• 0	۰0	• 0	0.	0.	• 0	HEAD OF SCHOOL (ii)
0.	160,367.	19,213.	0.	0.	10,500.	130,654.	(1) DEBORAH WILLIAMS (i)
on prior Form 990			compensation	<b>(iii)</b> Other reportable compensation	(ii) Bonus & incentive compensation	(i) Base compensation	(A) Name and Title
(F) Compensation	(E) Total of columns	able	(C) Retirement and	SC compensation	(B) Breakdown of W-2 and/or 1099-MISC compensation	(B) Breakdown of V	
lividual.	E) amounts for that inc	line 1a, applicable column (D) and (E) amounts for that individual		orm 990, Part VII, Si	he total amount of F	dividual must equal tl	Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A,
tructions, on row (ii).	is, described in the ins	m related organization	ation on row (i) and fro	ion from the organiz	J, report compensat	ported on Schedule . 990, Part VII.	For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.
		pace is needed.	te copies if additional s	oyees. Use duplicat	Compensated Empl	yees, and Highest (	Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.
Page <b>2</b>		506	27-2618506	<b>FION</b>	DEMONSTRA' HOOL	INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL	INSPIRE Schedule J (Form 990) 2016 PUBLIC

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<del>)</del> 90) 2016	Schedule J (Form 990) 2016	
		BOARD OF DIRECTORS.
	L OR THE	SUPERVISOR. BONUSES ARE SUBJECT TO APPROVAL BY THE HEAD OF SCHOOL
	S.E	BASED ON ANNUAL EVALUATIONS AND/OR THE ASSESSMENT OF THE EMPLOYEE'S
	SUPERVISOR	BONUSES ARE RECOMMENDED AT THE DISCRETION OF THE EMPLOYEE'S SUPE
		PART I, LINE 7:
	Part II. Also complete this part for any additional 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.
		ormation
Page <b>3</b>	27-2618506	INSPIRED TEACHING DEMONSTRATION Schedule J (Form 990) 2016 PUBLIC CHARTER SCHOOL

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SCHEDULE L	Tra	insactior	ns V	Vith	Inte	rested	P	ersons			ON	ИВ No.	1545-00	)47				
(Form 990 or 990-EZ) ► 0			swere	d "Yes	s" on Fo	rm 990, Par	rt IV	, line 25a, 25b, 2	26, 27	, 28a,		20	16	5				
Department of the Treasury Internal Revenue Service	Information about	Atta	ch to	Form	990 or F	orm 990-E2	Ζ.		orm99	0.		pen T spect	o Pub	lic				
-	INSPIRED				STRA	TION					ident		ion nu	Imber				
	PUBLIC CH efit Transacti				ion 501(	c)(4) and $5($	11/0	)(29) organization			185	06						
	organization answ			-							Db.							
1 (a) Name of disqualified	(b) F	Relationship bet	ween o	disqua				escription of trar				(d)	Corre	cted?				
	person	person and o	rganiza	ation		(	., .		isactic			<u> </u>	es	No				
												_	_					
2 Enter the amount of tax	incurred by the o	rganization mar	aders	or disc	ualified	persons du	irina	the vear under										
		-	-		-	-	-	•		▶ \$								
3 Enter the amount of tax	, if any, on line 2,	above, reimburs	ed by	the or	ganizatio	on				▶ \$								
Part II   Loans to an	d/or From Int	erested Per	sons															
	organization answ				, Part V,	line 38a or I	Forr	n 990, Part IV, lir	ne 26;	or if th	ne orga	anizati	on					
reported an am	ount on Form 990	, Part X, line 5, 6									VI X Am							
(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fron	an to or n the		<b>e</b>		(e) Original incipal amount						(g) In default?		(h) Approved by board or committee?		/ritten ement?
interested person	with organization	orioari		zation?	ł · · ·				Yes	No	comm Yes	No	Yes	No				
			10	FIOIT					res		res	NO	res					
	_																	
Total						> \$	L							1				
	ssistance Ber	nefiting Inter	reste	d Pe	rsons.	Ψ Ψ												
Complete if the	organization answ	vered "Yes" on	Form	990, Pa	art IV, lin	e 27.												
(a) Name of interested	person	<b>(b)</b> Relationship interested pers the organiza	son an			Amount of ssistance		<b>(d)</b> Type assistan				) Purp assist	ose o ance	f				
				fan E-		000 F7				1 /				0040				

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

Schedule L (Form 990 or 990-EZ) 2016

27-2618506 Pa	age <b>2</b>
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Schedule L (Form 990 or 990-EZ) 2016 PUBLIC	CHAR	TER SCHO	JOL			27-2	618	506	Page <b>2</b>
Part IV Business Transactions Involv	ing Inter	ested Pers	ons.						
Complete if the organization answered	"Yes" on F	orm 990, Part	IV, line 2	8a, 2	8b, or 28c.				
(a) Name of interested person		onship betwee n and the orga			<b>(c)</b> Amount of transaction	(d) Description transaction		òrgani	aring of zation's nues?
								Yes	No
ALETA MARGOLIS	BOARD	MEMBER	FOR	BO	240,000.	FEES PAI	DТ		X

#### Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

#### SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: ALETA MARGOLIS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD MEMBER FOR BOTH ORGANIZATION AND CENTER FOR INSPIRED TEACHING

(D) DESCRIPTION OF TRANSACTION: FEES PAID TO CENTER FOR INSPIRED

TEACHING FOR TEACHING RESIDENTS AND FOR PROFESSIONAL DEVELOPMENT. IN

ADDITION MIRANDA BROWN, BOARD MEMBER, IS AN EMPLOYEE OF THE CENTER FOR

INSPIRED TEACHING.

Schedule L (Form 990 or 990-EZ) 2016

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40 2016.05040 INSPIRED TEACHING DEMONSTRA 30285_1 SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

### 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. INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL



27-2618506

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ACHIEVE THEIR POTENTIAL AS ACCOMPLISHED LEARNERS, THOUGHTFUL CITIZENS,

AND IMAGINATIVE AND INQUISITIVE PROBLEM-SOLVERS THROUGH A DEMANDING,

INQUIRY-BASED CURRICULUM. THE GOALS FOR OUR STUDENTS ARE CENTERED

INTELLECT, AROUND FOUR PRINCIPLES: INQUIRY, IMAGINATION AND INTEGRITY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

GOALS FOR OUR STUDENTS ARE CENTERED AROUND FOUR PRINCIPLES: INTELLECT,

INQUIRY, IMAGINATION AND INTEGRITY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THE SCHOOL IMPLEMENTS THE PHILOSOPHY AND INSTRUCTIONAL LEADERS.

METHODOLOGY OF CENTER FOR INSPIRED TEACHING. CENTER FOR INSPIRED

TEACHING IS A DISTRICT OF COLUMBIA BASED EDUCATIONAL ORGANIZATION THAT

HAS SERVED DC'S TEACHERS AND STUDENTS SINCE 1995, WITH THE GOAL OF

ENSURING THAT TEACHERS MAKE THE MOST OF CHILDREN'S INNATE DESIRE TO

LEARN. THE SCHOOL IS A LEADER IN IMPROVING THE WAY TEACHERS ARE TRAINED

AND STUDENTS ARE EDUCATED IN DC AND BEYOND. AS A DEMONSTRATION SCHOOL,

THE SCHOOL INVITES AND RECEIVES VISITORS FROM AROUND THE GLOBE.

ANNUALLY, THE SCHOOL WELCOMES DOZENS OF VISITORS FROM THE DC EDUCATION

COMMUNITY, AS WELL AS THOSE INFLUENTIAL IN EDUCATION POLICY NATIONWIDE.

DOMINANT METHODS OF INSTRUCTION INCLUDE INQUIRY-BASED METHODS AND

ACTIVE LEARNING APPROACHES, WHERE THE TEACHER SERVES AS FACILITATOR AND

COACH TO SUPPORT STUDENT LEARNING. INSTRUCTION INCLUDES AN EMPHASIS ON

SOCIAL-EMOTIONAL LEARNING, AND CLASSROOMS ARE CHARACTERIZED BY

STUDENT-CENTERED ORGANIZATIONAL STYLES SUCH AS DIFFERENTIATED

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2016) 632211 08-25-16 41

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization INSPIRED TEACHING DEMONSTRATION PUBLIC CHARTER SCHOOL	Employer identification number 27-2618506
INSTRUCTION, COLLABORATIVE GROUPS, AND CHILD-INITIATED P	LAY. THE
STANDARDS-BASED CURRICULUM AND STUDENT GOALS ARE CENTERED	O ON THE 4 I'S:
INTELLECT, INQUIRY, IMAGINATION, AND INTEGRITY.	

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 NOT-FOR-PROFIT INFORMATION TAX RETURN IS PROCESSED BY AN OUTSOURCED CONSULTANT. ONCE PREPARED, A DRAFT OF THE TAX RETURN IS PROVIDED TO THE HEAD OF SCHOOL OF THE PUBLIC CHARTER SCHOOL AS WELL AS THE OUTSOURCED BOOKKEEPER. ANY ITEMS WHICH REQUIRE FURTHER DISCUSSION ARE ADDRESSED IN THIS DRAFT PHASE. ONCE ALL ITEMS HAVE BEEN ADEQUATELY ADDRESSED BY THE HEAD OF SCHOOL, THE DRAFT IS THEN FORWARDED ONTO THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS. ANY CONCERNS FROM THE FINANCE COMMITTEE ARE ADDRESSED AND THEN THE HEAD OF SCHOOL AUTHORIZES THE FILING WITH THE INTERNAL REVENUE SERVICE. ONCE FILED, A COPY OF THE 990 TAX RETURN IS PROVIDED TO THE FULL BOARD AT WHICH TIME IT IS APPROVED AT THE NEXT REGULARLY SCHEDULED MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY, BOARD MEMBERS AND KEY STAFF COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS OR CIRCUMSTANCES WHICH THE BOARD OR KEY STAFF BELIEVE COULD CONTRIBUTE TO A CONFLICT OF INTEREST. PRIOR TO BOARD ACTION ON A CONTRACT OR OTHER TRANSACTION INVOLVING A Α. CONFLICT OF INTEREST, A BOARD MEMBER HAVING A CONFLICT OF INTEREST SHALL DISCLOSE ALL FACTS MATERIAL TO THE CONFLICT OF INTEREST. SUCH DISCLOSURE SHALL BE REFLECTED IN THE MINUTES.

A PERSON WHO HAS A CONFLICT OF INTEREST SHALL NOT PARTICIPATE IN THE в. DECISION EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND TO QUESTIONS.

A PERSON WHO HAS A CONFLICT OF INTEREST MAY NOT VOTE ON THE CONTRACT OR с. 632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016) 42

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#### TRANSACTION.

D. KEY STAFF MEMBERS WHO HAVE A CONFLICT OF INTEREST WITH RESPECT TO A CONTRACT OR TRANSACTION THAT IS NOT THE SUBJECT OF BOARD ACTION SHALL DISCLOSE TO THE HEAD OF SCHOOL ANY SUCH CONFLICT OF INTEREST. THAT STAFF MEMBER SHALL REFRAIN FROM ANY ACTION THAT MAY AFFECT THE CHARTER SCHOOL'S PARTICIPATION IN SUCH CONTRACT OR TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

HEAD OF SCHOOL - THE FOUNDING BOARD OF DIRECTORS REVIEWED SALARIES OF EXECUTIVE DIRECTORS AND/OR HEAD OF SCHOOLS OF OTHER PUBLIC CHARTER SCHOOLS BASED IN THE DISTRICT OF COLUMBIA AS WELL AS BENCHMARKS PUBLISHED BY THE ASSOCIATION OF CHARTER SCHOOLS. THE BOARD OF DIRECTORS APPROVED THE HEAD OF SCHOOL'S ANNUAL COMPENSATION PRIOR TO EMPLOYMENT AT A SCHEDULED BOARD MEETING. OTHER KEY EMPLOYEES - THE HEAD OF SCHOOL, ACTING UNDER COMPENSATION GUIDELINES ESTABLISHED BY THE BOARD OF DIRECTORS EVALUATES POSITIONS AND PERFORMANCE OF THE STAFF. SALARIES ARE SET BASED ON COMPARISONS FROM SIMILAR ORGANIZATIONS. THE LAST COMPENSATION REVIEW WAS IN JULY 2016.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSS ON EQUITY INVESTMENT

-178,404.

#### FORM 990 PART XII, LINE 2C

THESE PROCESSES HAVE NOT CHANGED FROM THE PRIOR YEAR.

Schedule O (Form 990 or 990-EZ) (2016)

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Name of the organization	990-EZ) (2016) INSPIRED TEACHING DEMONSTRATION	Employer identification nu 27-2618506
	PUBLIC CHARTER SCHOOL	27-2618506
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