** PUBLIC DISCLOSURE COPY **	
Return of Organization Exempt From Income Tax	OMB No. 1545-0047
Form 990 [Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)	2023
Do not enter social security numbers on this form as it may be made public.	Open to Public
Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information.	Inspection
A For the 2023 calendar year, or tax year beginning JUN 1 , 2023 and ending MAY 31 , 2024	
B Check if applicable: C Name of organization D Employer identification	n number
Change ACADEMI PREP FOUNDATION, INC.	
Lichange Doing business as 55-5577240	
Ireturn Number and street (01 P.U. DOX IT Mail IS NOT delivered to street address) Room/suite E Telephone number	
Leturn/ 1021 DAILEDAND IIIDE DEVD. 7275220000	4 224 250
ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$	14,324,359.
Interview Interv	
pending any a a post	
J Website: WWW.ACADEMYPREP.ORG H(c) Group exemption num K Form of organization: X Corporation Trust Association Other L Year of formation: 1996 M State	
Part I Summary	e ol legal domicile. I I
1 Priofly departing the organization's mission or most significant activities: OFFER ASSISTANCE AND SILP	PORT TO
ACADEMY PREP CENTERS TOWARD THEIR MISSION TO PROMOTE THE 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 4 4 Number of independent voting members of the governing body (Part VI, line 1a) 4 5 5 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 6 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a	1011110
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.	
3 Number of voting members of the governing body (Part VI, line 1a)	. 9
4 Number of independent voting members of the governing body (rait V), line 1a)	9
8 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	11
6 Total number of volunteers (estimate if necessary)	0
7 a Total unrelated business revenue from Part VIII, column (C), line 12	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	0.
Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h) 669,042.	941,592.
9 Program service revenue (Part VIII, line 2g)	0.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5, 153, 391.	1,022,711.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5,822,433.	1,964,303.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 476, 940.	486,791.
14 Benefits paid to or for members (Part IX, column (A), line 4) 0 .	0.
g 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 267, 799.	601,387.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 207, 799. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 62, 143.	0.
b Total fundraising expenses (Part IX, column (D), line 25) 62,143.	
17 Other expenses (Part IX, column (A), lines 11a 11d, 11f-24e)	517,198.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,235,952.	1,605,376.
19 Revenue less expenses. Subtract line 18 from line 12	358,927.
Beginning of Current Year20Total assets (Part X, line 16)21Total liabilities (Part X, line 26)22Net assets or fund balances. Subtract line 21 from line 20	End of Year
20 Total assets (Part X, line 16) 37,885,881.4	12,463,776.
274,017.	307,642.
	12,156,134.
Part II Signature Block	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date				
Here	TERRI SCARCELLI, EA, CFO					
	Type or print name and title					
	Print/Type preparer's name Preparer's signature Date	Check PTIN				
Paid	SAM A. LAZZARA	²⁵ ^{if} P01342929				
Preparer	Firm's name RIVERO, GORDIMER & COMPANY, P.A.	Firm's EIN 59-3040705				
Use Only	Firm's address 201 N. FRANKLIN ST., SUITE 2200					
	TAMPA, FL 33602	Phone no. (813) 875-7774				
May the I	Aay the IRS discuss this return with the preparer shown above? See instructions					
LHA For	Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23	Form 990 (2023)				

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2023) ACADEMY PREP FOUNDATION, INC. 59-3377240 Pa t III Statement of Program Service Accomplishments
_	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission: OFFER ASSISTANCE AND SUPPORT TO ACADEMY PREP CENTERS TOWARD THEIR
	MISSION TO PROMOTE THE EDUCATIONAL, SOCIAL AND ETHICAL DEVELOPMENT OF MIDDLE SCHOOL STUDENTS THROUGH A RIGOROUS ACADEMIC PROGRAM.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,334,073. including grants of \$ 486,791.) (Revenue \$ FOUNDATION PROVIDES SERVICES RELATED TO THE DEVELOPMENT AND ENHANCEME OF EDUCATIONAL PROGRAMS TO EDUCATIONAL FACILITIES ALONG WITH OTHER
	ADMINISTRATIVE ASSISTANCE. FOUNDATION COORDINATES FUNDRAISING
	ACTIVITIES AND HOLDS INVESTMENTS, INCLUDING FUNDS THE BOARD DESIGNATE
	FOR THE SUPPORT OF ACADEMY PREP CENTER OF TAMPA, ACADEMY PREP CENTER
	ST. PETERSBURG AND ACADEMY PREP CENTER OF LAKELAND ("THE SCHOOLS"). T
	FOUNDATION OWNS THE LAND AND IMPROVEMENTS THAT HOUSE THE EDUCATIONAL
	FACILITIES FOR THE SCHOOLS. THE SCHOOLS ARE SCHOLARSHIP SUPPORTED
	MIDDLE SCHOOLS FOR INNER CITY CHILDREN WHICH ALSO PROVIDE SUMMER AND EVENING CLASSES FOR STUDENT ENHANCEMENT AND EDUCATION.
	EVENING CLASSES FOR STODENT ENHANCEMENT AND EDUCATION.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	N/A / (Notice to a second seco
	V
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	N/A
	Other program services (Describe on Schedule O.)
4d	
4d	(Expenses \$ including grants of \$) (Revenue \$)
	Total program service expenses 1,334,073.

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Part IV Checklist of Required Schedules

ACADEMY PREP FOUNDATION, INC.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	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	4		- 23
Ŭ	similar amounts as defined in Rev. Proc. 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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	х	
11	or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	- 23	
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			x
•	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11d 11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	Tie		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		х	
12a	2a 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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Ves," complete Schedule E. Parts Land IV.	114		x
15	or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b	1	
	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			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		
р 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		<u> </u>
- '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
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1 41				
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	00-		x
00	"Yes," complete Schedule L, Part IV	28c 29		X
29 20	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization requidate, terminate, or dissorve and cease operations? <i>If 'res,' complete Schedule N, rat 1</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> 'Yes,' <i>complete</i>	51		
52	Cohodula NI Davit II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
00	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	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				37
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		X
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b U Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-		
С	(gambling) winnings to prize winners?	10		
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 Form 990 (2023)
 ACADEMY
 PREP
 FOUNDATION,
 INC.

 Part V
 Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
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	11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ms?		2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authc	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accol	unt)?	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	ccou	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction	?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
	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 contribut	ions	or gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).	\sim	4			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices	provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as reo	quired			
	to file Form 8282?			7c		X
d		7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f	NT /	X
g	If the organization received a contribution of qualified intellectual property did the organization file Fo			7g	N/	
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		37/3	8		
9	sponsoring organization have excess business holdings at any time during the year?	•••••		0		
a			N/A	9a		
b	Did the sponsoring organization make any taxable distributions under section 4966?		/ -	9b		
10	Section 501(c)(7) organizations. Enter:			0.5		
a		10a	1			
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		11a				
	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 \dots N/A	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?		N/A	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		1			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c		4.6		X
				14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu to the exclanation output to the exclanation of the exclanation			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune excess parachute payment(s) during the year?			15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	it inco	ome?	16		x
	If "Yes," complete Form 4720, Schedule O.					_
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivitie	S			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		/-	17		
	If "Yes," complete Form 6069.					
332005	12-21-23			Form	990	(2023)

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Form 990 (2	023)
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ACADEMY PREP FOUNDATION, INC.

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

	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		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 on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other				
	officer, director, trustee, or key employee?				2		Х
3	Did the organization delegate control over management duties customarily performed by or under th						
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form S				4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as				5		Х
6	Did the organization have members or stockholders?				6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a						
	more members of the governing body?				7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s		olders, or				
	persons other than the governing body?				7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		ne following:				
а	The governing body?		-		8a	Х	
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 rea						
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)				
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			- -	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such c						
	and branches to ensure their operations are consistent with the organization's exempt purposes?			1	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod			· [-	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		C C				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			Ŀ	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y						
	on Schedule O how this was done			-	12c	Х	
13	Did the organization have a written whistleblower policy?				13	Х	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approve						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		-				
а	The organization's CEO, Executive Director, or top management official			. F	15a	Х	
	Other officers or key employees of the organization				15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a				
	taxable entity during the year?			. [-	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	te its	participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizatio	on's				
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed $~~{ m FL}$						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, a	ınd 99	0-T (section 501(c)	(3)s	only)	availa	able
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website X Another's website X Upon request Other (explain	on Se	chedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict	of interest policy,	and	finan	icial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks a	nd records				
	TERRI SCARCELLI, EA - 863-940-8900						
	1021 LAKELAND HILLS BLVD, LAKELAND, FL 33805						
332006	12-21-23				Form	990	(2023)
	7						

2023.05060 ACADEMY PREP FOUNDATION, IN 306403_1

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

List all of the organization's current key employees, if any. See the instructions for definition of key employees.

• 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	itior	1 than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer ar	nd a d I	recto	or/trus	itee)	from	from related	other
	(list any	recto						the	organizations	compensation
	nours for	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	rustee	l trus		ee	npen		1099-NEC)	1099-1420)	and related
	below	d ual t	itiona		nploy	st co I	5			organizations
	(list any hours for related organizations below line)	ndivid	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	0		
(1) LINCOLN TAMAYO11	5.00						_	r O		
C00	40.00	1		X				0.	233,882.	20,134.
(2) TERRI SCARCELLI	32.50									
CFO	7.50			Х				105,280.	0.	5,958.
(3) TOM SANSONE	5.00									
CHAIR	2.00	Х		Х				0.	0.	0.
(4) PAUL L. WHITING, SR	5.00			\cup						
TREASURER	7.00	X	2	х				0.	0.	0.
(5) JOHN ERIK SAVITSKY	5.00									
SECRETARY	2.00	X		Х				0.	0.	0.
(6) PATRICIA DOUGLAS	5.00									
TRUSTEE	2.00	X						0.	0.	0.
(7) BRYANT JONES	5.00									0
TRUSTEE	2.00	X						0.	0.	0.
(8) OSCAR HORTON	5.00	v						0.	0.	0.
TRUSTEE	5.00	X						0.	0.	0.
(9) SUSAN TOUCHTON TRUSTEE	2.00	x						0.	0.	0.
(10) CHRIS BARROTT	5.00	^						0.	0.	0.
TRUSTEE	5.00	x						0.	0.	0.
(11) NICK BARNETT	5.00									0.
TRUSTEE	2.00	x						0.	0.	0.
(12) DAVID VETTER	5.00								Ŭ.	
TRUSTEE	2.00	x						0.	0.	0.
									•••	
		1								
						1				
		1								
		1								
332007 12-21-23										Form 990 (2023)

332007 12-21-23

Form **990** (2023)

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2023.05060 ACADEMY PREP FOUNDATION, IN 306403_1

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	990 (2023) ACADEMY E	PREP FOU	JNI	DAT	IC)N ,	, I	N(С.	59-3	<u>3772</u>	40	Pa	ge 8
Par	t VII Section A. Officers, Directors, Trust	tees, Key Em	ploy	ees,	and	d Hi	ghes	st C	Compensated Employe	es (continued)				
	(A)	(B)			(C)			(D)	(E)			(F)	
	Name and title	Average				ition			Reportable	Reportable	,		nateo	Ч
		hours per		not ch unles:					compensation	compensatio			ount o	
		week		cer and					from	from related			ther	-
		(list any	ctor						the	organization		comp	ensat	ion
		hours for	dire				eq		organization	(W-2/1099-MI			n the	
		related	tee or	Istee			ensat		(W-2/1099-MISC/	1099-NEC))	orgar	nizatio	on
		organizations	l trus	nal tri		oyee	du o		1099-NEC)			and	relate	d
		below	Individual trustee or director	Institutional trustee	er	Key employee	iest c loyee	ner				organ	izatio	ns
		line)	Indi	Insti	Officer	Key	Highest compensated employee	Former						
			1											
			1											
										/				
										r				
			<u> </u>											
			<u> </u>	\vdash										
			<u> </u>	\vdash				_						
							C							
					_				105 200	122.0	<u></u>	26	- 0 0	<u>.</u>
1b	Subtotal								105,280.	233,8		20	,09	
	Total from continuation sheets to Part VI								0.	000 0	0.			0.
d	Total (add lines 1b and 1c)								105,280.	233,8		26	,09	12.
2	Total number of individuals (including but ne	ot limited to th	iose	listed	d ab	oove	e) wh	o r	eceived more than \$100	,000 of reportab	ole			
	compensation from the organization													<u> </u>
											_)	′es	No
3	Did the organization list any former officer,	director, trust	ee, k	key ei	mpl	oye	e, or	hig	phest compensated emp	oloyee on				
	line 1a? If "Yes," complete Schedule J for s	ich individual									L	3		X
4	For any individual listed on line 1a, is the su	m of reportab	le co	ompe	nsa	ation	n and	l ot	her compensation from	the organization				
	and related organizations greater than \$150	0,000? If "Yes,	" со	mple	te S	Sche	dule	Jf	for such individual		L	4	Х	
5	Did any person listed on line 1a receive or a	ccrue compe	nsat	ion fr	om	any	unre	elat	ted organization or indiv	idual for services	6			
	rendered to the organization? If "Yes," com	olete Schedul	e J f	or su	ch p	oers	on .					5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest cor	mpensated in	depe	ender	nt co	ontr	acto	rs t	that received more than	\$100,000 of cor	npensat	tion fro	m	
	the organization. Report compensation for t	he calendar y	ear e	endin	ig w	/ith (or wi	thir	n the organization's tax	year.				
	(A)								(B)			(C)		
	Name and business	address							Description of s	ervices	Co	mpens		
ACO	CURATE EMPLOYER SOLUTIO	DNS INC.	• ,	14	49	99	Ν							
DAI	LE MABRY HWY #250, TAME	PA, FL 3	336	518					HR/PAYROLL P	ROVIDER		761	,09	93.
								+						
	Total number of independent contract. "		o+ ''	mit a l	1.4.0	+1	oc "			ara than				
2	Total number of independent contractors (in	-	UC III	mea	10	tnos 1		lec	a above) who received h	iore man				
	\$100,000 of compensation from the organiz	ation					L					0	00 /6	0.000)
											E F	orm 9 9	JU (2	023)

332008 12-21-23

			ACADEMY PREP	FOUNDATIO	N, INC.		59-3377	240 Page 9
Pa	rt \	/111						
			Check if Schedule O contains a response	or note to any line	in this Part VIII	(D)		
					(A) Total revenue	(B) Related or exempt function revenue	Unrelated	(D) Revenue excluded from tax under sections 512 - 514
nts its	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
Am S,			Fundraising events 1c					
lar Iar			Related organizations 1d					
ns,		е	Government grants (contributions) 1e	51,730.				
er S		f	All other contributions, gifts, grants, and					
Ę			similar amounts not included above 1f	889,862.				
nd			Noncash contributions included in lines 1a-1f		0.44 500			
<u>a C</u>		h	Total. Add lines 1a-1f		941,592.			
	•	_		Business Code				
Program Service Revenue	2	a b						
Ser		c						
am		d						
ogr		е						
۲ ۲		f	All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, intere	est, and				
			other similar amounts)		771,848.	771,848.		
	4		Income from investment of tax-exempt bond p					
	5		Royalties	(ii) Personal				
	6	2	Gross rents		5			
	0		Less: rental expenses 6b		\sim			
			Rental income or (loss) 6c					
			Net rental income or (loss)		*			
	7		Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 12,610,919					
		b	Less: cost or other basis					
evenue			and sales expenses	, , , , , , , , , , , , , , , , , , ,				
			Gain or (loss)	1	250 862	250 862		
er B	~	d	Net gain or (loss) Gross income from fundraising events (not		250,863.	250,863.		
Other	ð	а	including \$ of					
Ŭ			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses 8b					
			Net income or (loss) from fundraising events					
	9	а	Gross income from gaming activities. See					
		ŗ	Part IV, line 19 9a	ļ]				
			Less: direct expenses 9b					
	40		Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns and allowances					
		b	Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory					
s			, , , ,,	Business Code				
Miscellaneous Revenue	11	а						
lan. enu		b						
Scel		С		└────┤				
Ξ.			All other revenue					
	40		Total. Add lines 11a-11d		1 964 202	1 000 711	0	0
20000	12		Total revenue. See instructions		1,964,303.	1,022,711.	0.	0 . Form 990 (2023)
33200	9 12	-21	.20					- 1 UTH 330 (2023)

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Part IX Statement of Functional Expenses

ACADEMY PREP FOUNDATION, INC.

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

	Check if Schedule O contains a respor	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	486,791.	486,791.		
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,	250,456.		188,534.	61,922.
e	trustees, and key employees Compensation not included above to disqualified	230,430.		100,554.	01,722
6	persons (as defined under section 4958(f)(1)) and				
	paragna described in section $40E9(a)(2)(P)$				
7	Other salaries and wages	350,931.	350,931.		
8	Pension plan accruals and contributions (include	,	,	$\overline{\mathbf{O}}$	
5	section 401(k) and 403(b) employer contributions)		_	$\gamma \chi$	
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
	Management		SO .		
	Legal				
с	•	20,901.	7,500.	13,401.	
d	Lobbying		S		
	Professional fundraising services. See Part IV, line 17)		
f	Investment management fees	99,379.	99,379.		
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	3,576.		3,576.	
14	Information technology				
15	Royalties				
16	Occupancy	0.480			
17	Travel	2,470.		2,470.	
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	389,472.	389,472.		
22	Depreciation, depletion, and amortization	JUJ,4/4.	505,412.		
23 24	Insurance Other expenses. Itemize expenses not covered				
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
а	amount, list line 24e expenses on Schedule 0.) MISCELLANEOUS	1,400.		1,179.	221
a b		-,=00•		-,-,,	
c v					
d					
	All other expenses				
25 25	Total functional expenses. Add lines 1 through 24e	1,605,376.	1,334,073.	209,160.	62,143
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)				
	0 12-21-23		I		Form 990 (2023

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37,885,881.

33

42,463,776.

Form **990** (2023)

ACADEMY PREP FOUNDATION, INC. Part X | Balance Sheet

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

1,454,372. 576,500. Cash - non-interest-bearing 1 2 2 Savings and temporary cash investments 95,001. 74,782. Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disgualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 18,702,547. basis. Complete Part VI of Schedule D 10a 13,565,335. 5,521,049. 13,181,498. b Less: accumulated depreciation 10b 10c Investments - publicly traded securities 11 23,610,559. 27,711,640. 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 41,484. Other assets. See Part IV, line 11 38,486. 15 37,885,881. 42,463,776. 16 Total assets. Add lines 1 through 15 (must equal line 33) 24,017. 57,642. Accounts payable and accrued expenses 17 Grants payable 18 19 Deferred revenue Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 250,000. 250,000. Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 274,017. 307,642. Total liabilities. Add lines 17 through 25 26 X Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 33,165,541. 36,847,641. Net assets without donor restrictions 27 4,446,323. 5,308,493. Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 37,611,864. 42,156,134. Total net assets or fund balances 32

(B)

End of year

(A)

Beginning of year

1

3

6

7 8

9

11

12

13

14

15

16

17

18

19

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21

22

23

24 25

26

27

28

29

30 31

32

33

-iabilities

Net Assets or Fund Balances

Assets

12190324 795320 306403

Total liabilities and net assets/fund balances ...

Form	ACADEMY PREP FOUNDATION, INC.	59-	3377	240	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,96		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,60		
3	Revenue less expenses. Subtract line 2 from line 1	3				27.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,61		
5	Net unrealized gains (losses) on investments	5	2	,642	2,8	27.
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 on Schedule O)	9	1	,542	2,5	16.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					~ .
_	column (B))	10	42	,15	5,1	34.
Ра	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 on Schedul	e O.				37
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		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				v	
b	Were the organization's financial statements audited by an independent accountant?			2b	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				x	
	review, or compilation of its financial statements and selection of an independent accountant?			2c	^	
0-	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	neaule ().			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			3a		х
h	Uniform Guidance, 2 C.F.R. Part 200, Subpart F? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired our	J:+	ত্ব		
b	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
	or addits, explain why on schedule o and describe any steps taken to undergo such addits	<u></u>		Form	990	2023)
				FOILI	550(2023)
	NO [*]					
	X					

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2023
Open to Public

Inspection Employer identification number

Namo	of the	organizati	on

	ACAD	EMY PREP F	OUNDATION, I	NC.				9-3377240		
Part I	Reason for Public				nis part.) S	ee instruction				
The organ	nization is not a private found		÷ ÷							
1 🛄	A church, convention of ch	urches, or associatio	on of churches described	d in sectio	n 170(b)(I)(A)(i).				
2	A school described in sect				· A					
3	A hospital or a cooperative)(b)(1)(A)(i	ii).				
4	A medical research organiz					-	(iiii). Enter	the hospital's name.		
	city, and state:	I.	, ,							
5	An organization operated for	or the benefit of a co	llege or university owned	d or operat	ted bv a d	overnmental u	init describ	ed in		
	section 170(b)(1)(A)(iv). (C									
6	A federal, state, or local go	• •	nental unit described in	section 17	70(h)(1)(A)	(v)				
7	An organization that norma	-					he deneral	public described in		
	section 170(b)(1)(A)(vi). (C	•		ionia gov	orninorna		ne general			
8	A community trust describe		1)(A)(vi) (Complete Par	+ 11)						
9	An agricultural research org				ad in conii	unction with a	land-grant	college		
y	or university or a non-land-									
	university:	grant conege of agric			name, cit	, and state of	the colleg	6 01		
10	An organization that norma	Illy receives (1) more	than 33 1/3% of ite our	nort from (contributic	ns members	nin fees of	nd gross receipts from		
	activities related to its exen									
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
11 🔲	An organization organized a		ively to test for public en	faty Soo	saction 5(Q(a)(4)				
12 X	An organization organized a	-					array out the	purposes of one or		
	more publicly supported or									
•	lines 12a through 12d that							aluina		
a 🗆	☐ Type I. A supporting orga the supported organization									
	the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.									
b	7 7			tion with it		ad argonizatio	n(a) by ba	vina		
b 🗆	Type II. A supporting org									
	control or management o			ame perso	ons that co	ontrol or mana	ge the sup	ported		
c X	organization(s). You mus									
c 🔤							ly integrate	ed with,		
. [its supported organizatio									
d 🗌	Type III non-functionally						•			
	that is not functionally int			-		-	an attent	iveness		
	requirement (see instruct	*								
e 🗆	Check this box if the orga					а Туре I, Туре	II, Type III			
	functionally integrated, or		nally integrated support	ing organi	zation.			3		
	er the number of supported o	•						J		
-	vide the following informatior (i) Name of supported	ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of	monetary	(vi) Amount of other		
	organization	(1) - 114	(described on lines 1-10	in your governi	ng document?	support (see in	,	support (see instructions)		
זתגיא	MY PREP CENTER		above (see instructions))	Yes	No			.,		
		59-3622978	2	v		226	,000.	300 700		
	MPA, INC. MY PREP CENTER		۷	X		230	,000.	302,799.		
		59-3623000	2	v		1 5 0	701	270 050		
	MY PREP CENTER		۷	X		150	,791.	270,050.		
		82-4257263	2	x		100	,000.	645,449.		
	RELAND, INC.	02-4257205	2			100	,000.	045,449.		
T.4						104	,791.	1,218,298.		
Total	Demonstration De la 11 de la						-			
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ACADEMY PREP FOUNDATION, INC.

Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 1	70(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 und	er Part III. If the organization
	fails to qualify under the tests listed below, please complete Part III.)	

Galendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 2 Tax revenues levied for the organization is behalf (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 3 The value of services or facilities furnished by a governmental unit to the organization without charge (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 4 Total. Add lines 1 through 3 (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 5 The portion of total contributions by each person (other than a governmental unit or publicly supports draganization) included on line 11, column (f) (a) 2019 (b) 2020 (c) 2022 (e) 2023 (f) Total 6 Public support. Subtractime 5 from line 4. (a) 2019 (b) 2020 (c) 2022 (e) 2023 (f) Total 7 Amounts from line 4 (a) 2019 (b) 2020 (c) 2022 (e) 2023 (f) Total	
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11 Total support. Add lines 7 through 10 Image: Construction in the second	
12 Gross receipts from related activities, etc. (see instructions)	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	
organization, check this box and stop here	
Section C. Computation of Public Support Percentage	
14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 14	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and	
stop here. The organization qualifies as a publicly supported organization]
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box	
and stop here. The organization qualifies as a publicly supported organization]
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,	
and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization	
meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	
more, and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the	
organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	=
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	· •

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Schedule A (Form 990) 2023
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CADEMY	PREP	FOUNDATION,	INC.

A 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.)

UNIGUUNI VENI LUI USCAL VENI DENINI	ving in) (-) 0010	(b) 0000	(a) 2021	(4) 2022	(a) 0000	
Calendar year (or fiscal year beginn	- ,	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
1 Gifts, grants, contributions,						
membership fees received.						
include any "unusual grants						
2 Gross receipts from admiss merchandise sold or service						
formed, or facilities furnishe						
any activity that is related to						
organization's tax-exempt p	urpose					
3 Gross receipts from activitie	es that					
are not an unrelated trade o	vr bus-					
iness under section 513						
4 Tax revenues levied for the	organ-					
ization's benefit and either p	baid to					
or expended on its behalf						
5 The value of services or faci	ilities			2		
furnished by a governmenta	al unit to					
the organization without cha	arge					
6 Total. Add lines 1 through 5						
7a Amounts included on lines						
3 received from disqualified						
b Amounts included on lines 2 and 3 re						
from other than disqualified persons	that					
exceed the greater of \$5,000 or 1% o amount on line 13 for the year	of the					
c Add lines 7a and 7b		_	5			
8 Public support. (Subtract line 7c fr						
ection B. Total Support	'OM IINE 6.)					
alendar year (or fiscal year beginn		(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
9 Amounts from line 6		(0) 2020	(0) 2021	(d) 2022	(e) 2020	
IOa Gross income from interest, dividends, payments receiv securities loans, rents, royal and income from similar sou	, ed on Ities,	\mathcal{O}				
b Unrelated business taxable inco						
-						
(less section 511 taxes) from b	usinesses					
acquired after June 30, 1975						
 c Add lines 10a and 10b 1 Net income from unrelated I activities not included on lin whether or not the business regularly carried on 	business ne 10b,					
2 Other income. Do not incluc or loss from the sale of capi assets (Explain in Part VI.)	ital					
3 Total support. (Add lines 9, 10c, 1						
	, ,	first second third	fourth or fifth tax	vear as a section 5	501(c)(3) oraz	anization.
4 First 5 years. If the Form 99						·
-	C C					
check this box and stop he	re					
check this box and stop he Section C. Computation	of Public Support Po	ercentage	· · · · · · · · · · · · · · · · · · ·		······································	
check this box and stop he ection C. Computation 5 Public support percentage	re of Public Support Pe for 2023 (line 8, column (f),	ercentage divided by line 13,	column (f))		15	
check this box and stop he ection C. Computation 5 Public support percentage f 6 Public support percentage f	re of Public Support Po for 2023 (line 8, column (f), from 2022 Schedule A, Par	ercentage divided by line 13, t III, line 15	column (f))		······································	
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check this box and stop he ection C. Computation 5 Public support percentage 6 Public support percentage ection D. Computation 7 Investment income percent	re of Public Support Pe for 2023 (line 8, column (f), from 2022 Schedule A, Par of Investment Incon age for 2023 (line 10c, colu	ercentage divided by line 13, t III, line 15 ne Percentage ımn (f), divided by li	column (f)) ne 13, column (f))		15 16 17	%
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 Section C. Computation 15 Public support percentage in 16 Public support percentage in Section D. Computation 17 Investment income percent. 18 Investment income percent. 19a 33 1/3% support tests - 20 more than 33 1/3%, check in b 33 1/3% support tests - 20 more tests - 20 more	for 2023 (line 8, column (f), from 2022 Schedule A, Par of Investment Incon age for 2023 (line 10c, colu age from 2022 Schedule A 023. If the organization did this box and stop here. The 022. If the organization did 1/3%, check this box and s	ercentage divided by line 13, t III, line 15 ne Percentage um (f), divided by li , Part III, line 17 not check the box e organization quali not check a box or stop here. The orga	column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s line 14 or line 19a nization qualifies a	15 is more than 3 upported organiza , and line 16 is mo s a publicly suppo	15 16 17 18 13 1/3%, and 1/3%, and orted organization 1/3% orted organization 1/3%	%

ACADEMY PREP FOUNDATION, INC.

Yes

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3a

3b

No

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Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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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3c Х 4a 4b 4c Х 5a 5b 5c Х 6 Х 7 х 8 Х 9a Х 9b х 9c х 10a 10b Schedule A (Form 990) 2023

Sche	ACADEMY PREP FOUNDATION, INC. 59-337724	0 Pa	age 5
Pa	rt 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 on lines 11b and		
	11c below, the governing body of a supported organization? 11a		Х
b	A family member of a person described on line 11a above? 11b		Х
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI.		Х
Sec	tion B. Type I Supporting Organizations		
		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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).		
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	Х	
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	Х	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		Х

Section 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 instructions).
- a X 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.*
- c ____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.
- b Did the activities described on line 2a, above, 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b 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? *If* "Yes" or "*No*" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

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12190324 795320 306403

3b | Schedule A (Form 990) 2023

Yes No

Х

Х

2a

2b

За

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2023.05060 ACADEMY PREP FOUNDATION, IN 306403_1

Schedule A	(Form §	990)	2023
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Part V

(Form 990) 2023 ACADEMY PREP FOUNDATION, INC. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	Check here if the organization satisfied the Integral Part Test as a qualifying All other Type III non-functionally integrated supporting organizations must c			Part VI). See instructions
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		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d	$\mathbf{\nabla}$	
e	Discount claimed for blockage or other factors	0		
	(explain in detail in Part VI):	ł		
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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	intear	ated Type III supporting org	anization (see

instructions).

Schedule A (Form 990) 2023

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Schedule A (Form 990) 2023 ACADEMY PREP FOUNDATION, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

NC. 59-3	3377240 Page	7
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		<u>(u)(e) eupper ung er g</u>		ieu)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exemption				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	· · ·		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	Э		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.		· ·		
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020	0	4		
d	From 2021	3 2			
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,	2			
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
-	Excess from 2020				
-	Excess from 2021				
	Excess from 2022				
	Excess from 2023				
_					

Schedule A (Form 990) 2023

ACADEMY PREP FOUNDATION, INC.

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

PART IV, SECTION E, LINE 2A

THE FOUNDATION IS A SUPPORTING ORGANIZATION WHICH IS ORGANIZED AND

OPERATED EXCLUSIVELY FOR THE BENEFIT OF, TO PERFORM THE FUNCTIONS OF,

OR TO CARRY OUT THE PURPOSES OF ONE OR MORE PUBLICALLY SUPPORTED

ORGANIZATIONS. THE FOUNDATON SUPPORTS THREE SCHOOLS: ACADEMY PREP

CENTER OF TAMPA, INC. (EIN 59-3622978), ACADEMY PREP CENTER OF ST.

PETERSBURG, INC. (EIN 59-3623000) AND ACADEMY PREP CENTER OF LAKELAND,

INC. (EIN 82-4257263). AN EVALUATION OF THE PUBLIC SUPPORT OF THE

SCHOOLS SHOWS ALL THREE ORGANIZATIONS RECEIVED OVER 33.33% OF THEIR

SUPPORT FROM THE PUBLIC.

THE FOUNDATION'S ENDOWMENT FUNDS ARE FUNDS RESTRICTED OR DESIGNATED FOR GRAUDATE SUPPORT PROGRAMS OF THE SCHOOLS AND OPERATING COSTS INCURRED BY THE SCHOOLS RELATED TO THE OPERATION OF THEIR MULTIFACTED LEARNING CENTERS. THE ENDOWMENTS CONSIST OF MONEY MARKET FUNDS, CORPORATE DEBT AND EQUITY SECURITIES, GOVERNMENTAL BONDS, DEBT, EQUITY FUNDS, AND A LIFE INSURANCE CONTRACT, INCOME EARNED FROM THE ENDOWMENTS IS AVAILABLE FOR GENERAL OR SPECIFIC PURPOSES. AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS.

PART IV, SECTION E, LINE 2B THE FOUNDATION IS A FUNDING SOURCE FOR THE SCHOOLS AND OWNS THE LAND AND IMPROVEMENTS THAT HOUSE THE EDUCATIONAL FACILITIES FOR THE SCHOOLS. THE FOUNDATION IS IN A POSITION OF INFLUENCE TO THE SCHOOLS, 32028 12-21-23 Schedule A (Form 990) 2023 21 12190324 795320 306403 2023.05060 ACADEMY PREP FOUNDATION, IN 306403_1

Schedule A (Fo				OUNDATI	-		59-3377	
Pa	art IV, Section A, lines the 1; Part IV, Section I action D, lines 5, 6, or 1	1, 2, 3b, 3c, 4b, 4), lines 2 and 3; Pa	c, 5a, 6, 9a, 9 rt IV, Section	b, 9c, 11a, 11b E, lines 1c, 2a,	, and 11c; Pa 2b, 3a, and 3	t IV, Section B, line b; Part V, line 1; Pa	a or 17b; Part III, line es 1 and 2; Part IV, S urt V, Section B, line	e 12; Section C,
	ection D, lines 5, 6, an See instructions.)	u 8; and Part V, Se	ECTION E, lines	\geq , 5, and 6. Als	so complete th	is part for any add	inional information.	
POTENTIA	ALLY RESULT	ING IN OU	COMES	THAT COU	JLD BE	SIGNIFICAN	ITLY	
DIFFERE	NT, IF THES	E ENTITIE;	S WERE	AUTONOM	OUS. TH	E FOUNDATI	ION'S	
INVESTM	ENTS AND SU	PPORT ARE	IMPORT	ANT FOR	THE FU	TURE OF TH	IE SCHOOLS	,
HOWEVER	, IF THE FO	UNDATION	DID NOT	EXIST,	THE SC	HOOLS WOUI	D CARRY O	N
WITH TH	ESE INVESTM	ENT ACTIV	ITIES I	NDIVIDI	JALLY.			
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** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

ACADEMY	PREP	FOUNDATION,	INC.
Organization type (check one):			

59-3377240

Filers of:		Section:
Form 990	or 990-EZ	X 501(c)(3) (enter number) organization
		4947(a)(1) nonexempt charitable trust not 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
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule 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 one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special F	Rules	ist
:	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one 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; line 1. Complete Parts I and II.
	contributor, during literary, or educatio	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter h purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purposes and the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> , etc., contributions totaling \$5,000 or more during the year for an <i>exclusively</i> religious, charitable, etc., \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

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

ACADEMY	PREP	FOUNDATION,	INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 600,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 Х Person Payroll 200, 000. Noncash (Complete Part II for noncash contributions.) (b) (d) (a) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 3 Х Person Payroll 50,000. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP **Total contributions** No. Type of contribution 4 Х Person Payroll 50,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (b) (c) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll

Schedule B (Form 990) (2023)

noncash contributions.)

Noncash

(Complete Part II for

323452 12-26-23

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Employer identification number

Page 2

59-3377240

Name of organization

	B (Form 990) (2023) organization		Page Employer identification number
vanie or c	organization		
ACADE	MY PREP FOUNDATION, INC.		59-3377240
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is neede	d.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
23453 12-2	26-23	μΨ	Schedule B (Form 990) (2023

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Page 3

Schedule	B (Form 990) (2023)			Page 4
Name of c	organization			Employer identification number
<u>ג טער</u> צ		ı		59-3377240
Part III	MY PREP FOUNDATION, INC Exclusively religious, charitable, etc., contribut		section 501(c)(7), (8), o	
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of	through (e) and the following line e	ntry For organizations	
	Use duplicate copies of Part III if additional	space is needed.	TIESS for the year. (Enter this	s mo. once., +
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
Part I		(c) Use of gift	(u)	Description of now girt is neid
		(e) Transfer of g	ift	
	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
			6	N
(a) No. from	(b) Purpose of gift	(c) Use of gift		Description of how gift is held
Part I				Description of now girt is neid
			-(-)	
			<u> </u>	
		(e) Transfer of g	ift	
		C		
	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 held
Part I				
		<u>ر</u>		
		(e) Transfer of g	ift	
	Transferee's name, address, a	nd 7IP + 4	Belationshin	of transferor to transferee
			Telationship	
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
		e) Transfer of g		
		(e) Transfer of g	int int	
	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee
323454 12-2	1 26-23			Schedule B (Form 990) (2023
		26		

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2023.05060 ACADEMY PREP FOUNDATION, IN 306403_1

SCHEDULE D

(Form	990)
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Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.



Employer identification number

59-3377240

Department of the Treasury Internal Revenue Service Name of the organization

ACADEMY PREP FOUNDATION, INC.

	organization answered "Yes" on Form 990, Part IV, lir		· ·		
		(a) Donor advised funds	(b) Funds and othe	er accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
ł	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	-			
_	are the organization's property, subject to the organization's				Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of			- T	
)ar	Impermissible private benefit? t II Conservation Easements.	application applyored "Vee" on Form (Yes No
		-	990, Fait IV,		
1	Purpose(s) of conservation easements held by the organizat			vicelly important k	and area
	Preservation of land for public use (for example, recrea			rically important la	
	Protection of natural habitat		on or a certi	fied historic struct	ure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali day of the tax year.	fied conservation contribution in the	form of a co		End of the Tax Yea
_		. ()			
-	Total number of conservation easements			2a	
b				2b	
	Number of conservation easements on a certified historic str			2c	
d	Number of conservation easements included on line 2c acqu			04	
	on a historic structure listed in the National Register			2d	1
	Number of conservation easements modified, transferred, re	eleased, extinguisned, or terminated t	by the organ	lization during the	tax
	year				
4	Number of states where property subject to conservation ea				
5	Does the organization have a written policy regarding the pe				х П.N.
	violations, and enforcement of the conservation easements				Yes LINC
5	Staff and volunteer hours devoted to monitoring, inspecting,	, nandling of violations, and enforcing	conservation	on easements dur	ing the year
,					
	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and enforcing con-	servation ea	isements during tr	ie year
	Door each concernation accompany another on line 2d about	a activity the requirements of acation	170/h)///D)	(1)	
3	Does each conservation easement reported on line 2d above and section 170(h)(4)(B)(ii)?				Yes 🗌 No
)	In Part XIII, describe how the organization reports conservat	ion accomenta in its revenue and evr			
,					
	balance sheet, and include, if applicable, the text of the foot	note to the organization's infancial st	atements th	lat describes the	
ar	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	f Art Historical Treasures	or Other	Similar Assets	s
	Complete if the organization answered "Yes" on Form				
a	If the organization elected, as permitted under FASB ASC 95		ent and bal	ance sheet works	
	of art, historical treasures, or other similar assets held for pu				
	service, provide in Part XIII the text of the footnote to its fina				
		ncial statements that describes these	e items		
b				e sheet works of	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement	and balanc		
b	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public	58, to report in its revenue statement	and balanc		,
b	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items.	58, to report in its revenue statement c exhibition, education, or research ir	and balanc furtherance	e of public service	
b	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1	58, to report in its revenue statement c exhibition, education, or research ir	and balanc furtherance	e of public service	
	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X	58, to report in its revenue statement c exhibition, education, or research ir	and balanc 1 furtherance	e of public service \$	
	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures	58, to report in its revenue statement c exhibition, education, or research ir easures, or other similar assets for fin	and balanc 1 furtherance	e of public service \$	
2	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical tre the following amounts required to be reported under FASB A	58, to report in its revenue statement c exhibition, education, or research ir easures, or other similar assets for fin ASC 958 relating to these items:	and balanc n furtherance ancial gain,	e of public service \$ provide	
2 a	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical tre the following amounts required to be reported under FASB A Revenue included on Form 990, Part VIII, line 1	58, to report in its revenue statement c exhibition, education, or research ir easures, or other similar assets for fin ASC 958 relating to these items:	and balanc 1 furtherance ancial gain,	e of public service \$ provide \$	
2 a b	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treat the following amounts required to be reported under FASB A Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X	58, to report in its revenue statement c exhibition, education, or research ir easures, or other similar assets for fin ASC 958 relating to these items:	and balanc 1 furtherance ancial gain,	e of public service \$ provide \$	
2 a b	If the organization elected, as permitted under FASB ASC 98 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical tre the following amounts required to be reported under FASB A Revenue included on Form 990, Part VIII, line 1	58, to report in its revenue statement c exhibition, education, or research ir easures, or other similar assets for fin ASC 958 relating to these items:	and balanc 1 furtherance ancial gain,	e of public service \$ provide \$	

	1 /	PREP FOUN					3377240 Page	2
Par	5 5							
3	Using the organization's acquisition, accessi collection items (check all that apply).	ion, and other record	ds, check any of the	e following that	make sigr	nificant use of	fits	
•	Public exhibition			obango program	~			
a		C		change prograr	n			
b	Scholarly research	e	e L Other					
c	Preservation for future generations							
4	Provide a description of the organization's co						Part XIII.	
5	During the year, did the organization solicit o						— —	
De	to be sold to raise funds rather than to be ma							<u> </u>
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organizatio	on answered "Y	es" on Foi	rm 990, Part I	V, line 9, or	
1a	Is the organization an agent, trustee, custod		diary for contributio	ons or other ass	sets not in	cluded		—
	on Form 990, Part X?						Yes N	0
h	If "Yes," explain the arrangement in Part XIII							Č
, N		and complete the re	nowing table.				Amount	—
c	Beginning balance					1c		
						10 10		—
	Additions during the year					10 1e		
e f	Distributions during the year					le 1f		
	Ending balance Did the organization include an amount on F						Yes N	_
	If "Yes," explain the arrangement in Part XIII.					·		0
Par								
		(a) Current year	(b) Prior year	(c) Two years		Three years ba	ack (e) Four years bac	k
10	Beginning of year balance	22,382,299.				8,258,54		
		1,410,500.				1,861,91		
	Contributions	3,547,161.				2,208,08		
	Net investment earnings, gains, and losses	5,547,101.	525,551		, / = / •	2,200,00	196,94	
	Grants or scholarships		6				190,94	±.
е	Other expenditures for facilities	180 006	1,961,961	696	5.6.2			
	and programs	-489,096.	1,301,901	• 000	,563.			
	Administrative expenses	26,850,864.	22,382,299	. 22,040	520	12,328,54	13. 8,258,543	<u></u>
g	End of year balance	· · · · ·			, 529.	12,520,5	······································	<u>.</u>
2	Provide the estimated percentage of the cur	85.9500		(a)) held as:				
	Board designated or quasi-endowment Permanent endowment 11.5200		_%					
	0 5200	%						
С								
-	The percentages on lines 2a, 2b, and 2c sho							
за	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administer	ed for the		Yes No	_
	organization by:							<u> </u>
	(i) Unrelated organizations?							_
_								
	If "Yes" on line 3a(ii), are the related organiza			?			3b	
4	Describe in Part XIII the intended uses of the		owment funds.					
Fai	t VI Land, Buildings, and Equipm		0 Dort IV line 11a	Soo Form 000	Dart V lin	o 10		
	Complete if the organization answere						()	
	Description of property	(a) Cost or c basis (investr		st or other s (other)		umulated ciation	(d) Book value	
1a	Land		,	81,089.	100010		1,781,089	•
	Buildings			11,716.	5.51	7,187.	11,394,529	
	Leasehold improvements			,	2,31	,,	, ., ., .,,	-
				9,742.		3,862.	5,880	-
	Equipment			-,		-,	5,000	<u> </u>
	Other		V lino 100 colum	n (P))			13,181,498	
Total	Aud lines ta unough te. (Column (a) must e	quai i 01111 990, Part	A, III TOC, COIUM	יי (<i>ש</i>) יי				•

Schedule D (Form 990) 2023

332052 09-28-23

Schedule D (Form 990) 2023 ACADEMY PRE	P FOUNDATION,	INC.	59-3377240 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	r end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other (A) INVESTMENTS	27,711,640.	END-OF-YEAR MARK	
(B)	27,711,040.		
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	27,711,640.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or	r end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
<u>(7)</u>			
(8)			
(9) Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))	G		
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
-	Description	, ,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	ы. (В))		
Part X Other Liabilities Complete if the organization answered "Yes"	on Form 000 Part IV line	110 or 11f Soo Form 000 Port V lin	o 95
(a) De se de tiere est lie biliter	on on 990, Fait IV, line	The of TH. See Form 990, Fait A, III	(b) Book value
(a) Description of liability (1) Federal income taxes			
(1) 1 ederar in come taxes (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, co	ol. (B))		
2. Liability for uncertain tax positions. In Part XIII, provide	e the text of the footnote to	the organization's financial stateme	
organization's liability for uncertain tax positions under	r FASB ASC 740. Check he	ere if the text of the footnote has bee	en provided in Part XIII X

Schedule D (Form 990) 2023

332053 09-28-23

Sche	edule D (Form 990) 2023 ACADEMY PREP FOUNDATION, INC.	59 –2	3377240 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R		
	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	5,507,134.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments2a2,642,827.Donated services and use of facilities2b867,367.		
b	Donated services and use of facilities 2b 867,367.		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) 2d 132,016.		
е	Add lines 2a through 2d	2e	3,642,210.
3	Subtract line 2e from line 1	3	1,864,924.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 99, 379.		
b	Other (Describe in Part XIII.) 4b		
с	Add lines 4a and 4b	4c	99,379.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,964,303.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	m
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,373,364.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 867, 367.		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.) 2d		
е	Add lines 2a through 2d	2e	867,367.
3	Subtract line 2e from line 1	3	1,505,997.
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 4a 99, 379.		
b	Other (Describe in Part XIII.) 4b		
С	Add lines 4a and 4b	4c	99,379.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part), line 18.)	5	1,605,376.
	rt XIII Supplemental Information		
D	ide the descriptions we wind for Dest II. Know O. E. and O. Dest IV. Provide and A. Dest IV. Know description of the product o		

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 V, LINE 4:

THE FOUNDATION'S ENDOWMENT FUNDS ARE FUNDS RESTRICTED OR DESIGNATED FOR
GRADUATE SUPPORT PROGRAMS OF THE SCHOOLS AND OPERATING COSTS INCURRED BY
THE SCHOOLS RELATED TO THE OPERATION OF THEIR MULTIFACETED LEARNING
CENTERS. THE ENDOWMENTS CONSIST OF MONEY MARKET FUNDS, CORPORATE DEBT AND
EQUITY SECURITIES, GOVERNMENTAL BONDS AND DEBT, EQUITY FUNDS, AND LIFE
INSURANCE CONTRACT. INCOME EARNED FROM THE ENDOWMENTS IS AVAILABLE FOR
GENERAL OR SPECIFIC PURPOSES. AS REQUIRED BY ACCOUNTING PRINCIPLES
GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED
WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR
ABSENCE OF DONOR-IMPOSED RESTRICTIONS. THESE AMOUNTS ARE REPORTED ON THIS
RETURN AND ON THE INDIVIDUAL SCHOOL'S RETURNS.
332054 09-28-23 Schedule D (Form 990) 2023
2190324 795320 306403 2023.05060 ACADEMY PREP FOUNDATION, IN 306403_1

Part XIII Supplemental Information (continued)	Page 5
PART X, LINE 2:	
THE FOUNDATION IS NOT AWARE OF ANY TAX POSITIONS IT HAS TAKEN THAT ARE	
SUBJECT TO A SIGNIFICANT DEGREE OF UNCERTAINTY. TAX YEARS AFTER 2020	
REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
CHANGE IN VALUE OF BENEFICIAL INTEREST 132,	016
$\mathbf{G}^{\mathbf{r}}$	
02	
$\mathbf{Q}^{\mathbf{v}}$	
Schedule D (Form 9	90) 202
32055 09-28-23 31	

12190324 795320 306403 2023.05060 ACADEMY PREP FOUNDATION, IN 306403_1

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.									
Name of the organization			-				Employer identification number			
		DATION, INC.					59-3377240			
Part I General Information on Grants a										
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pro- 	stance?	-					tion Yes X No			
Part II Grants and Other Assistance to recipient that received more than						es" on Form 990, Parl	t IV, line 21, for any			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
ACADEMY PREP CENTER OF ST. PETERSBURG - 2301 22ND AVE. SOUTH - ST. PETERSBURG, FL 33712	59-3623000	501(C)(3)	150,791.	270,050.			OPERATING EXPENSES, RENT AND GRADUATE SUPPORT			
ACADEMY PREP CENTER OF TAMPA 1407 E COLUMBUS DRIVE TAMPA, FL 33605	59-3622978	501(C)(3)	236,000.	302,799.			OPERATING EXPENSES, RENT AND GRADUATE SUPPORT			
ACADEMY PREP CENTER OF LAKELAND 1021 LAKELAND HILLS BLVD LAKELAND, FL 33805	82-4257263	501(C)(3)	100,000.	645,449.			OPERATING EXPENSES, RENT AND GRADUATE SUPPORT			
2 Enter total number of section 501(c)(3) a	and government o	 rganizations listed in th	l ne line 1 table	l		l	3.			

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

59-3377240

Page 2

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

(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
			6	
			908	
		CUTO		
	i sch			
equired in Part I, lir	ne 2; Part III, column	(b); and any other a	dditional information.	
ONITORING	THE USE O	F GRANT FU	NDS	
GANIZATIO	NS FOR SUP	PORT.		
Ņ,				
V				
[equired in Part I, Iir	equired in Part I, line 2, Part III, column	equired in Part I, line 2, Part III, column (b); and any other a	equired in Part I, line 2, Part III, column (b); and any other additional information.

SCHEDULE J (Form 990) Compensation Information OWE No. 1645-0047 Department of the Treasary Internal Revenue Service For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Department of the Treasary Internal Revenue Service Department of the Compensation Termal Revenue Service Department of the Compensation Internation Revenue Service (such as maid, chauffur, chef) Defar NU, Section A, Line 1a, Complete Part III to provide any of the lousing allowance or residence for personal use Intravel for companions Personal Services (such as maid, chauffur, chef) Defar NU, Section A, Line 1a, are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain in 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by
Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990, Contended and the latest information. Open to Public Inspection Name of the organization ACADEMY PREP FOUNDATION, INC. Employer identification number 59-3377240 Part I Questions Regarding Compensation Yes" No. Ia Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Yes First-class or charter travel Housing allowance or residence for personal use Part or organization and gross-up payments Health or social club dues or initiation fees Discretionary spending account Payments for business use of personal residence travel for companions Ib I Indicate which, if any, of the following the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 's CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization 's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation onsultant Compensation survey or study Compensation committee 4a X 4 During the year, did any person listed on Form 990,
Department of the Treasury Co to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection Name of the organization ACADEMY PREP FOUNDATION, INC. Employer identification number 59-3377240 Part I Questions Regarding Compensation Imployer identification number 59-3377240 Part VI, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Imployer identification and gross-up payments Imployer identification and gross-up payments Payments for business use of personal residence Imployer identification fees Discretionary spending account Personal services (such as maid, chauffeur, chef) Ib Ib Imployer identification require substantiation prior to reimbursing or allowing expenses incurred by all directors. Ib Imployer identification is cellowing the organization used to establish the compensation of the organization to establish compensation committee Ib Imployer identification is cellowing the items checked or interview or study A point the toriganization Imployment or neimbursing or allowing expenses incurred by all directors. Imployer identification is cellowing the organization used to establish the compensation of the organization to establish compensation committee Imployer identification in the cellowing the cellowing the organization used or study </td
Inspection Inspection Name of the organization ACADEMY PREP FOUNDATION, INC. Employer identification number 59 - 3377240 Part I Questions Regarding Compensation Yes Ia Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Yes No Inspection Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Yes No Inspection and gross-up payments Health or social club dues or initiation fees Inspection Inspection Ib If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1b Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation committee Weither any by the board or compensation committee 4a X 4 During the year, did any person listed on Form 990, Part VII, Section A, line 'a with respect to the filing organization or a related organization: a Receive a severance payment from a supplemental nonqualified reforement plan? 4a <
ACADEMY PREP FOUNDATION, INC. 59-3377240 Part I Questions Regarding Compensation Ia Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Yes No First-class or charter travel Housing allowance or residence for personal use Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Image: Charter travel Image: Charter travel<
Part I Questions Regarding Compensation 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Yes No Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use Part viii (Section A, line 1a. Complete Part III to expose and gross-up payments) Payments for business use of personal residence Discretionary spending account Personal services (such as maid, chauffeur, cheft) It It b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the CEO/Executive Director, but explain in Part III. 2 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a X 4 During the year, did any person listed on Fo
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Yes No First-class or charter travel Housing allowance or residence for personal use First-class or charter travel Housing allowance or residence for personal use First-class or charter travel Housing allowance or residence of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Seco/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committe Written employment contract Compensation committee Genomesation committee Secore as everance payment or related organization: Approval by the board or compensation committee Approval by the board or compensation committee Approval by the board or compensation committee Age XX Approval by the board or compensation committee Age XX C Participate in or receive payment
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Image: Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Image: Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Image: Section A, line 1a. Complete Part III to provide any relevant information regarding allowance or residence for personal use Image: Travel for companions Image: Payments for business use of personal residence Image: Travel for companions Image: Payments for business use of personal residence Image: Travel for companions Image: Payments for business use of personal residence Image: Travel for companions Image: Payments for business use of personal residence Image: Travel for companions Image: Payments for business use of personal residence Image: Travel for companions Image: Payments for business use of personal residence Image: Travel for companication and gross-up payments Image: Personal services (such as maid, chauffeur, chef) Image: Travel for companication require substantiation prior to reimbursing or allowing expenses incurred by all directors. Image: Travel for any services (such as maid, chauffeur, chef) Image: Travel for the boxes on line 1a are checked, did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors. Image: Travel for any services (such as maid, chauffeur, chef)
First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all director, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization to establish compensation of the CEO/Executive Director, but explain in Part III. 2 Compensation committee Written employment contract 2 Independent compensation consultant Compensation survey or study Approval by the board or compensation committee 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: 4a X 4 Participate in or receive payment from a supplemental nonqualified refirement plan? 4a X
Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization to establish compensation committee Written employment contract 2 3 Indicate which, if any, of the following the organization used to establish the explain in Part III. Compensation committee Written employment contract 2 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: Approval by the board or compensation committee 4a X 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: 4a X 4 Diring the year payment from a supplemental nonqualifi
Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization 's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organization: 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: 4a X b Participate in or receive payment from a supplemental nonqualified retirement plan? 4a X
Discretionary spending account Personal services (such as maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization 's CEO/Executive Director, check all that apply. Do not check any boxes for methods used by a related organization to establish compensation committee Written employment contract 1 Compensation committee Written employment contract 1 Compensation consultant Compensation or arelated organization: 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: 4a X 4 Participate in or receive payment from a supplemental nonqualified retirement plan? 4a X 4 X 4b X
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization to establish compensation of the CEO/Executive Director, but explain in Part III. 2 4 Compensation committee Written employment contract 4a 5 Form 990 of other organizations X Approval by the lobard or compensation committee 4a 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a X 4 Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. 2 2 Compensation committee Written employment contract 3 Independent compensation consultant Compensation survey or study 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: 4a 4 Participate in or receive payment from a supplemental nonqualified retirement plan? 4b 5 Participate in or receive payment from an equity-based compensation arrangement? 4c
trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. 2 Compensation committee Written employment contract 1 Independent compensation consultant Compensation survey or study 2 Form 990 of other organizations X Approval by the board or compensation committee 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: 4a X B Participate in or receive payment or change-of-control payment? 4a X 4 Darticipate in or receive payment from a supplemental nonqualified retirement plan? 4b X 4 X 4c X
 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Independent compensation consultant Compensation committee Independent compensation consultant Compensation or organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization: a Receive a severance payment or change-of-control payment? b Participate in or receive payment from a supplemental nonqualified retirement plan? c Participate in or receive payment from an equity-based compensation arrangement?
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Image: Compensation committee image: Compensation committee image: Compensation committee image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation compensation compensation committee image: Compensat
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Image: Compensation committee image: Compensation committee image: Compensation committee image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation survey or study image: Compensation committee image: Compensation compensation compensation committee image: Compensat
establish compensation of the CEO/Executive Director, but explain in Part III. Image: Compensation committee Image: Compensation committee </td
 Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan? Participate in or receive payment from an equity-based compensation arrangement? Compensation arrangement?
 Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan? Participate in or receive payment from an equity-based compensation arrangement? Compensation survey or study Approval by the board or compensation committee Approval by the board or compensation committee Approval by the board or compensation committee
 Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in or receive payment from a supplemental nonqualified retirement plan? c Participate in or receive payment from an equity-based compensation arrangement?
 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in or receive payment from a supplemental nonqualified retirement plan? c Participate in or receive payment from an equity-based compensation arrangement? 4c
organization or a related organization:4aa Receive a severance payment or change-of-control payment?4ab Participate in or receive payment from a supplemental nonqualified retirement plan?4bc Participate in or receive payment from an equity-based compensation arrangement?4c
organization or a related organization:4aa Receive a severance payment or change-of-control payment?4ab Participate in or receive payment from a supplemental nonqualified retirement plan?4bc Participate in or receive payment from an equity-based compensation arrangement?4c
a Receive a severance payment or change-of-control payment? 4a X b Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c X
b Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c X
c Participate in or receive payment from an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation
contingent on the revenues of:
a The organization? 5a X b Any related organization? 5b X
If "Yes" on line 5a or 5b, describe in Part III.
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation
contingent on the net earnings of:
a The organization? 6a X b Any related organization? 6b X
If "Yes" on line 6a or 6b, describe in Part III.
 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments 7 X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53,4958-4(a)(3)? If "Yes," describe in Part III 8
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 9 Begulations section 53 4958-6(c)?
Regulations section 53.4958-6(c)? 9 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2023

LHA 332111 11-06-23

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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.

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990		
(1) LINCOLN TAMAYO11	(i)	0.	0.	0.	0.	0.	0.	0.		
<u>coo</u>	(ii)	233,882.	0.	0.	0.	20,134.	254,016.	0.		
	(i)									
	(ii)				<u> </u>	•				
	(i)									
	(ii)									
	(i)									
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	(i)									
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	(ii)									
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	(ii)		·•. C)							
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	(ii)		¢							
	(i)									
	(ii)	•								
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i) (ii)									
	(1)									

Part III Supplemental Information

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

\mathbf{C}
i So

SCHEDULE O

Department of the Treasury

Internal Revenue Service
Name of the organization

(Form 990)

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection Employer identification number 59-3377240

OMB No 1545-0047

ACADEMY PREP FOUNDATION, INC.

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

EDUCATIONAL, SOCIAL AND ETHICAL DEVELOPMENT OF MIDDLE SCHOOL STUDENTS

THROUGH A RIGOROUS ACADEMIC PROGRAM.

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

THE FINANCE COMMITTEE REVIEWS THE 990 AND REPORTS TO THE BOARD. A COPY OF

THE 990 IS PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING.

FORM 990, PART V, LINE 2B

ACADEMY PREP FOUNDATION, INC. CONTRACTS WITH A PROFESSIONAL EMPLOYER
ORGANIZATION(PEO) FOR ADMINISTRATION OF THE EMPLOYEES. UNDER THIS
AGREEMENT, ALL EMPLOYEES OF ACADEMY PREP FOUNDATION, INC. ARE IN
ACTUALITY LEASED FROM THE PEO. DUE TO THIS AGREEMENT, ACADEMY PREP
FOUNDATION, INC. DOES NOT FILE FORM W-3 TRANSMITTAL OF WAGE AND TAX
STATEMENTS, BUT RATHER THE PEO WILL FILE FORM W-3 WHICH WOULD INCLUDE
THE EMPLOYEES OF ACADEMY PREP FOUNDATION, INC. LEASED PERSONNEL COSTS
ARE BROKEN DOWN INTO COMPONENTS OF SALARIES, PAYROLL TAXES, RETIREMENT,
AND OTHER BENEFITS AND ARE REPORTED ON THE APPROPRIATE SCHEDULES. FOR
THE YEAR ENDED OF MAY 31, 2023, ACADEMY PREP FOUNDATION, INC. UTILIZED
7 EMPLOYEES THROUGH THE PEO.

FORM 990, PART VI, SECTION B, LINE 12C: TRUSTEES ARE ASKED TO DISCLOSE ANY POSSIBLE CONFLICTS OF INTEREST AND

37

ENFORCES THE POLICY.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.LHA332211 11-14-23

Schedule O (Form 990) 2023

12190324 795320 306403

Schedule O (Form 990) 2023	Page 2
Name of the organization ACADEMY PREP FOUNDATION, INC.	Employer identification number 59-3377240
FORM 990, PART VI, SECTION B, LINE 15:	
THE BOARD APPROVES ALL COMPENSATION AND HIRING.	
FORM 990, PART VI, SECTION C, LINE 19:	
PRINTED GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY	AND FINANCIAL
STATEMENTS AVAILABLE UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
TRANSFERS FROM THE SCHOOLS TO THE FOUNDATION	1,410,500.
CHANGE IN VALUE OF BENEFICIAL INTEREST	132,016.
TOTAL TO FORM 990, PART XI, LINE 9	1,542,516.
FORM 990 PART XII, LINE 2C - FINANCIAL STATEMENTS AND REL	PORTING
THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBIL	LITY FOR
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SI	ELECTION OF AN
INDEPENDENT ACCOUNTANT. THIS OVERSIGHT PROCESS HAS NOT CH	HANGE FROM THE
PRIOR YEAR.	
332212 11-14-23	Schedule O (Form 990) 2023

SCH	EDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number

59-3377240

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

ACADEMY PREP FOUNDATION, INC.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year asset	s Direct controlling
of disregarded entity		foreign country)			entity
			\mathbf{O}		
		C C			
		6			
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization a	nswered "Yes" on Form 990,	Part IV, line 34, beca	use it had one or mo	re related tax-exempt
(a)	(b)	(c)	(d)	(e)	(f) (g) Section 512(b)(13)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr enti	olled
				501(c)(3))		Yes	No
ACADEMY PREP CENTER OF TAMPA, INC							
59-3622978, 1407 E COLUMBUS DRIVE, TAMPA, FL							
33605	EDUCATION	FLORIDA	501(C)(3)	LINE 2	N/A		Х
ACADEMY PREP CENTER OF ST. PETERSBURG, INC.	X						
- 59-3623000, 2301 22ND AVE SOUTH, ST.							
PETERSBURG, FL 33712	EDUCATION	FLORIDA	501(C)(3)	LINE 2	N/A		Х
ACADEMY PREP CENTER OF LAKELAND, INC							
82-4257263, 1021 LAKELAND HILLS BLVD,							
LAKELAND, FL 33805	EDUCATION	FLORIDA	501(C)(3)	LINE 2	N/A		х
	1						1
	1						1

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

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 ACADEMY PREP FOUNDATION, INC.

59-3377240 Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)		(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Predominant income (related, unrelated,	Share of total income	Share of end-of-year		ortionate ations?	Code V-U amount in	box ^r	General or managing	Percent owners
·		foreign country)		(related, unrelated, excluded from tax under sections 512-514)	r	assets		No	20 of Sche K-1 (Form 1	dule	partner?	
	_											
	-											
	_					\mathbf{D}						
	_					K						
	_				0							
	-				O							
				S								
Identification of Related C	Prganizations Taxable	as a Corpo	oration or Trust. Co	omplete if the organiza	ation answered "Y	es" on Form 990), Part IV	, line 3	4, because it	: had o	ne or n	nore rela
organizations treated as a c	Prganizations Taxable corporation or trust duri	as a Corpo	year.					, line 3		_		
 organizations treated as a c (a) 	corporation or trust duri	ng the tax	year. (b)	(c) (d)	(6)	(f)		(g)		(h)	
organizations treated as a c	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in			(g) Share of end-of-year	Perc		(i) Sectio 512(b) control
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or entit	ntrolling Type o) [;] entity Shar S corp, in	(f) e of tota		(g) Share of	Perc	(h) entage	(i) Sectio 512(b) control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b) control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b)(control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b)(control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b)(control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b)(control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b) control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b)(control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b)(control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i) Sectio 512(b)(control entity
 organizations treated as a c (a) Name, address, and 	EIN	ng the tax	year. (b)	(c) (d) egal domicile (state or foreign	ntrolling Type o (C corp,) [;] entity Shar S corp, in	(f) e of tota		(g) Share of end-of-year	Perc	(h) entage	(i)

Schedule R (Form 990) 2023 ACADEMY PREP FOUNDATION, INC.

(4) DUE FROM ACADEMY PREP CENTER OF TAMPA

(6) ACADEMY PREP CENTER OF TAMPA

332163 09-28-23

(5) DUE FROM ACADEMY PREP CENTER OF LAKELAND

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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.						Yes	No		
1	During the tax year, did the organization engage in any of the following transaction	s with one or more r	elated organizations listed	in Parts II-IV	?			X		
a	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity									
b Gift, grant, or capital contribution to related organization(s)										
	c Gift, grant, or capital contribution from related organization(s)									
d Loans or loan guarantees to or for related organization(s)										
	_oans or loan guarantees by related organization(s)					1e	X			
f	Dividends from related organization(s)					1f		Х		
	Sale of assets to related organization(s)					1g		Х		
	Purchase of assets from related organization(s)					1h		Х		
i I	Exchange of assets with related organization(s)		$\sim 0^{\circ}$	•		1 i		Х		
	_ease of facilities, equipment, or other assets to related organization(s)					1j	X			
-										
k	_ease of facilities, equipment, or other assets from related organization(s)		.01			1k		Х		
1.1	Performance of services or membership or fundraising solicitations for related orga	anization(s)				11		Х		
	m Performance of services or membership or fundraising solicitations by related organization(s)									
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
 o Sharing of paid employees with related organization(s) 										
g	Reimbursement paid to related organization(s) for expenses	\mathbf{C}				1p		Х		
a	Reimbursement paid by related organization(s) for expenses					1a		Х		
•										
r	Other transfer of cash or property to related organization(s)					1r		Х		
s	Other transfer of cash or property from related organization(s)					1s		Х		
	f the answer to any of the above is "Yes," see the instructions for information on w									
	(a)	(b)	(c)	•	(d)					
	Name of related organization	Transaction	Amount involved		Method of determining amount inv	volved				
		type (a-s)			Ũ					
1) A	CADEMY PREP ST. PETERSBURG	В	150,791.	CASH						
2) A	CADEMY PREP CENTER OF TAMPA	В	236,000.	CASH						
	UE FROM ACADEMY PREP CENTER OF ST.									
3) P	ETERSBURG	D	35,054.	CASH						

D

D

J

4,536.CASH

8,879.CASH

185,822.FAIR MARKET VALUE

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) ACADEMY PREP CENTER OF ST. PETERSBURG	J	153,073.	FAIR MARKET VALUE
(8) ACADMY PREP CENTER OF LAKELAND	J	528,472.	FAIR MARKET VALUE
(9) ACADEMY PREP CENTER OF TAMPA	0	116,977.	SHARING OF EMPLOYEES
(10) ACADEMY PREP CENTER OF ST. PETERSBURG	0	116,977.	SHARING OF EMPLOYEES
(11) ACADEMY PREP CENTER OF LAKELAND	0	116,977.	SHARING OF EMPLOYEES
(12) ACADEMY PREP CENTER OF LAKELAND	В	400,000.	САЅН
(13)		N .	
(14)			
(15)	- CIV		
(16)	5		
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Schedule R (Form 990) 2023 ACADEMY PREP FOUNDATION, INC.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h Dispro tiona allocati Yes) ate ons? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes I	al or Pi ging er? C	(k) Percentage pwnership
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Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 ACADEMY PREP FOUNDATION, INC.	59-3377240 _{Page}
Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.	
PART V, LINE 1N	
TRANSACTIONS WITH RELATED ORGANIZATIONS - THE ORGANIZA	TION SHARES
EQUIPMENT AND OTHER ASSETS WITH ACADEMY PREP CENTER OF	TAMPA, ACADEMY
PREP CENTER OF ST. PETERSBURG, AND ACADEMY PREP CENTER	OF LAKELAND.
NONE OF THE ORGANIZATIONS ASSIGN A VALUE OF THESE TRAN	SACTIONS.
	3
PART V, LINE 10 - TRANSACTIONS WITH RELATED ORGANIZATI	
THE ORGANIZATION SHARES PAID EMPLOYEES WITH ACADEMY PR	EP CENTER OF
LAKELAND, ACADEMY PREP CENTER OF ST. PETERSBURG, AND A	CADEMY PREP
CENTER OF TAMPA.	
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322165 00.28.23	Schedule R (Form 990) 2
332165 09-28-23 44 100224 705220 206402 2022 05060 2020 EDEM FOR	
90324 795320 306403 2023.05060 ACADEMY PREP FOU	MDATION, IN 306403

Form	886	8	

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - I	dentification			-					
Type or Print						Taxpayer identification number (TIN)			
FIIII	ACADEMY PREP FOUNDATION, I		59-3377240						
File by the due date for filing your	the te for our 1021 LAKELAND HILLS BLVD.								
return. See									
Enter the	Return Code for the return that this application is for (fi	ile a separa	te application for each return)			01			
Applicat	ion Is For	Return Code	Application Is For			Return Code			
Form 990) or Form 990-EZ	01	Form 4720 (other than individual)			09			
Form 472	20 (individual)	03	Form 5227			10			
Form 990)-PF	04	Form 6069			11			
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12			
Form 990	0-T (trust other than above)	06	Form 5330 (individual)						
Form 990	D-T (corporation)	07	Form 5330 (other than individual)			14			
Form 104	11-A	08							
 After y 	ou enter your Return Code, complete either Part II or Pa	art III. Part I	II, including signature, is applicable	only for ar	n extension of				
time to fi	le Form 5330.	5							
• If this a	application is for an extension of time to file Form 5330,	you must e	nter the following information.						
	in Name		-						
Pla	In Number								
Pla	In Year Ending (MM/DD/YYYY)								
Part II - A	utomatic Extension of Time To File for Exempt Organ	nizations (see instructions)						
	ooks are in the care of TERRI SCARCELLI,								
Telepl	1021 LAKELAND HI none No. 863-940-8900	LLS BI	LVD – LAKELAND, FL Fax No.	3380	5				
-	organization does not have an office or place of busines	s in the Ur							
	is for a Group Return, enter the organization's four-digit								
box	. If it is for part of the group, check this box								
1 re	quest an automatic 6-month extension of time until A				npt organizatio				
	organization named above. The extension is for the org								
	calendar year 20 or								
Х	tax year beginning JUN 1	, 20	2.3 , and ending	MAY 3	1.	, 20 24			
2 If t	he tax year entered in line 1 is for less than 12 months, a Change in accounting period	check reas	on: Initial return	Final retur	n				
3a lft	his application is for Forms 990-PF, 990-T, 4720, or 606	9, enter the	tentative tax, less						
an	y nonrefundable credits. See instructions.			3a	\$	0.			
b lft	his application is for Forms 990-PF, 990-T, 4720, or 606	9, enter any	/ refundable credits and						
est	imated tax payments made. Include any prior year over	payment al	lowed as a credit.	Зb	\$	0.			
c Ba	lance due. Subtract line 3b from line 3a. Include your pa	ayment wit	h this form, if required, by						
usi	ng EFTPS (Electronic Federal Tax Payment System). Se	e instructio	ons.	3c	\$	0.			