

## Appendix A - Conversion Evidences/Replication Evidences

Hobgood Academy Charter School is ready, willing, and able to hit the ground running if given the opportunity to open for the 2018-2019 school year. We are located in an economically depressed, rural community where education options are minimal and students are failing to achieve. Our belief that these students deserve better is the driving force compelling us to develop and implement a more unique plan of action for holistic, inquiry based instruction, with a focus on health and wellness. The evidences are addressed fully in the body of this application, but it was our hope to give you a brief snapshot on this appendix.

- Our mission and the methods used to accomplish it are well-researched, but not readily available in rural, distressed counties.
- We have support from the Halifax County Economic Development Commission, the Town of Hobgood, the Hobgood Revitalization Committee, Action for Healthy Kids to help us achieve our goals. We are also partnering with Edgecombe Community College in the Health Coach program, and with East Carolina University's School of Health and Human Performance using Energizers.
- If we can provide students with a quality education, the chances of business and industry to locate here is increased exponentially. Businesses require a skilled workforce and opportunities for employees. Criticality, LLC, an emerging bio-tech firm is in negotiations to locate their headquarters here. This could have an economic impact that will bring well-paying jobs and additional agricultural opportunities to our region.
- Bear Grass Charter School in Martin County has agreed to assist and mentor us through this transition. We would welcome guidance from any successful charter school.
- Hobgood Academy, Inc. has been a nonprofit school since 1969. We have been successfully graduating students who become entrepreneurs, business leaders, doctors, lawyers, teachers, linemen, farmers, and historians, to name a few. Since the economic downturn, tuition based rural schools are declining. To remain at the forefront of education, Hobgood Academy seeks to transition to Hobgood Academy Charter School so that we might continue to educate the future of leaders for our state.
- Several of our board members have served on the Hobgood Academy Board, one on a board that supports Halifax County Public Schools, one has experience as a public and a private school educator, one is currently an administrator in a public school, three of our members are experienced business administrators, and one is a director in the public agricultural service. They have worked and will continue to work to ensure the success of this charter school.
- Attached are letters of support from our community: Representative Michael H. Wray – 27<sup>th</sup> House District, Cathy Scott – Executive Director of the Halifax County Economic Development Commission, Scott Propheter – CEO of Criticality, LLC, Ricky L. Hale – President of the Hobgood Revitalization Committee, and Dannie A. Flanary – Mayor of the Town of Hobgood.



North Carolina General Assembly  
House Of Representatives

REPRESENTATIVE MICHAEL H. WRAY  
DEMOCRATIC EXECUTIVE LIAISON  
27TH DISTRICT

OFFICE: 503 LEGISLATIVE OFFICE BUILDING  
300 N. SALISBURY STREET  
RALEIGH, NC 27603-5925

PHONE: (919) 733-5662  
FAX: (919) 754-3155  
EMAIL: michael.wray@ncleg.net

DISTRICT: PO BOX 904  
GASTON NC 27512

HOME: (252) 535-3297  
CELL: (252) 536-8013  
FAX: (252) 535-7888

COMMITTEES:

COMMERCE AND JOB DEVELOPMENT—VICE-CHAIR  
APPROPRIATIONS  
AGRICULTURE AND NATURAL AND ECONOMIC  
RESOURCES  
EDUCATION—UNIVERSITIES  
ETHICS  
HEALTH  
INSURANCE  
PUBLIC UTILITIES  
RULES  
WILDLIFE RESOURCES

September 18, 2017

To Whom It May Concern:

I am writing this letter on behalf of Hobgood Academy to support their quest to convert from a private K-12 school to a K-12 Charter School. Hobgood Academy, located in my district, has been in existence since 1971. As the economy has declined, the number of families able to pay full tuition has fallen. It has been increasingly difficult to offer scholarships to economically disadvantaged students in the community as well.

Hobgood Academy has a unique mission and educational program. They use small group instruction, practice community involvement while focusing on a holistic approach to excellence. There is a clear need in our community for a public charter school as it would support local and economic development in our area. There are high rates of poverty in around Hobgood Academy, and if they are granted the charter school status, they are committed to serving all families in our community.

I support this mission and appreciate any consideration given to Hobgood Academy in their request for an accelerated planning year to become Hobgood Academy Charter School.

Sincerely,

Representative Michael H. Wray  
27<sup>th</sup> House District

MHW/sb

September 11, 2017



NC Department of Public Instruction  
Office of Charter Schools  
301 North Wilmington Street  
Raleigh, NC 27601-2825

To Whom It May Concern:

I am writing to express support for the proposed Hobgood Academy Charter School in the southeast corner of Halifax County near the Edgecombe and Martin County lines. Parents, educators, and community leaders have been working for many months to develop a plan for converting Hobgood Academy to a charter school that will serve the community without regard to county boundaries.

There is a long-standing need in this three-county area for alternatives in public education. The Hobgood community has strong agricultural ties and a tremendous commitment by parents to be involved in their children's education. Halifax, Edgecombe, and Martin Counties are Tier One, economically distressed counties that desperately need new educational options to help move students beyond their economic limitations and increase their chances for success.

One of the biggest challenges we face in business recruitment is quantifying and qualifying our ability to supply a workforce to meet a company's current and future demands. Expanding education options and improving outcomes will help us prepare today's children for tomorrow's jobs. More and more we are realizing the influence of early development on a child's readiness to learn and chances for success later in life. The Hobgood Academy Charter School will play a critical role in equipping students with the knowledge and skills to serve them in their economic, social and life pursuits.

I respectfully request that the Office of Charter Schools approve the Hobgood Academy Charter School.

Sincerely,

A handwritten signature in black ink that reads "Cathy A. Scott". The signature is written in a cursive style.

Cathy A. Scott  
Executive Director

**Halifax County Economic Development Commission**  
260 Premier Boulevard • Roanoke Rapids, NC 27870  
Phone (252) 519-2630 • Fax (252) 519-2632  
E-Mail: [cathyscott@halifaxdevelopment.com](mailto:cathyscott@halifaxdevelopment.com) • Website: [www.halifaxdevelopment.com](http://www.halifaxdevelopment.com)

September 18, 2017

NC Department of Public Instruction  
Office of Charter Schools  
301 North Wilmington Street  
Raleigh, NC 27601-2825



To Whom It May Concern:

I am writing to express enthusiastic support for the proposed Hobgood Charter School. A great deal of thought and effort has been put into this proposal by community and school leaders to enable this school to continue to function as an integral part of the educational and economic infrastructure of this area. A charter school in this geographic location would be a boon to roughly a dozen small communities in an area that covers three separate counties, all Tier 1 Economically distressed.

As a parent in this area, I have thoroughly researched the educational opportunities for my children. I firmly believe that Hobgood Academy, and the proposed Hobgood Charter School, present the best possible educational options for my children. This is one of the many reasons I have chosen to locate my business in this small community, and it is my hope that this wonderful school continues to be an option for years to come.

As a business owner in a rural community, it is important that my employees have access to the highest quality educational opportunities for their families. Having a school in Hobgood that is located just blocks away from both our current and proposed facilities will continue to significantly aid in our recruitment of high caliber employees. Our future facility, which will be located in Hobgood, is projected to employ up to 150 personnel in the coming five-year period. Without this remarkable school, which has been a staple of this community for many years, our project is less likely to attract the quality of candidates to ensure that our staffing requirements are met.

Hobgood Academy has been a staple of this community for decades. I strongly and respectfully urge you to approve the proposed charter in order to ensure that this school remains an integral part of the economic and educational infrastructure of this area for decades to come.

Respectfully,

A handwritten signature in black ink, appearing to read "Scott Propheter".

Scott Propheter  
CEO  
Criticality, LLC

**Criticality, LLC**

106 N Pine Hobgood, NC 27843

252-531-8456

criticality@botanisolholdings.com

# Hobgood Revitalization Committee

Post Office Box 444

Hobgood, North Carolina 27843

September 2, 2017

North Carolina Department of Public Instruction  
Office of Charter Schools  
301 N. Wilmington Street  
Raleigh NC, 27601

To Whom It May Concern:

The purpose of the Hobgood Revitalization Committee, a 501(c) (3) non profit organization, is to recruit businesses to locate in the Town of Hobgood. We do this by helping the town to offer opportunities to prospective companies in the form of housing, schools, and entertainment in an intimate, small town setting.

Recruitment of businesses is tied to the ability to provide an educated workforce and a positive school environment for families looking to relocate. It is our belief that having a Charter school based in Hobgood will help to improve the economic outlook and potential for growth in Hobgood and the surrounding communities.

The Hobgood Revitalization Committee has partnered with Hobgood Academy in hosting events that bring people to our town and enrich the lives of those who live here. We plan to ally even further with Hobgood Academy Charter School since it will be able to serve the needs of a greater number of our population once the conversion from Private to Charter is complete. In fact, we are desperately hoping for this to happen as soon as possible. We have been able to recruit an international extraction company to build a pilot project in Hobgood and hope to persuade them to build a proposed multi-million-dollar permanent headquarters here in the next year. Hobgood Academy Charter School will be a crucial element of that negotiation.

We thank you for your commitment to the future of North Carolina, one student at a time!

Sincerely,



Ricky L. Hale, President

# Town Of Hobgood

## Mayor

Dannie Flanary

## Town Administrator

Thomas Ellis

## Town Clerk

Joan Sykes



## Council Members

Julian Padgette

Robert Sykes

Sam Johnson

Sallie Smith

Milton Armston

September 18, 2017

NC Department of Public Instruction  
Office of Charter Schools  
301 North Wilmington Street  
Raleigh, NC 27601-2825

To Whom It May Concern:

I would like to express the Town of Hobgood's support for the proposed Hobgood Academy Charter School. Hobgood is located in the far southeastern portion of Halifax County close to the Edgecombe and Martin County lines. Families, educators, and community leaders have worked long hours planning for a proposed conversion of Hobgood Academy from a private school to a charter school that will be able to serve more in our local community, regardless of which side of the county line they live.

Even with all of the recent efforts and best intentions of our local public school systems, there remains great need in our local area for increased choice in public education. The Hobgood community has strong agricultural ties and a tremendous commitment by both families and neighbors to improve the children's education. Halifax, Edgecombe, and Martin Counties are designated Tier One, economically distressed, counties that desperately need new educational opportunities to help inspire students to see a brighter future where they will be able to succeed.

As we try to improve and develop our local economy, we have to overcome the perception that we are unable to supply a skilled/educated workforce. Having a K-12 charter school in our community, close to where these employees work and live will support our efforts to recruit new economic development to the area. We want to see all our children succeed and lead healthy, fulfilling lives. By having a local, accessible public school in our community, we can make this happen.

I respectfully request that the Office of Charter Schools approve the Hobgood Academy Charter School.

Sincerely,

A handwritten signature in black ink, appearing to read "Dannie A. Flanary".

Dannie A. Flanary  
Mayor, Town of Hobgood

P.O BOX 217•HOBGOOD, NORTH CAROLINA 27843•PHONE: 252-826-4573•FAX: 252-826-2044  
Email: [townofhobgood@embarqmail.com](mailto:townofhobgood@embarqmail.com)

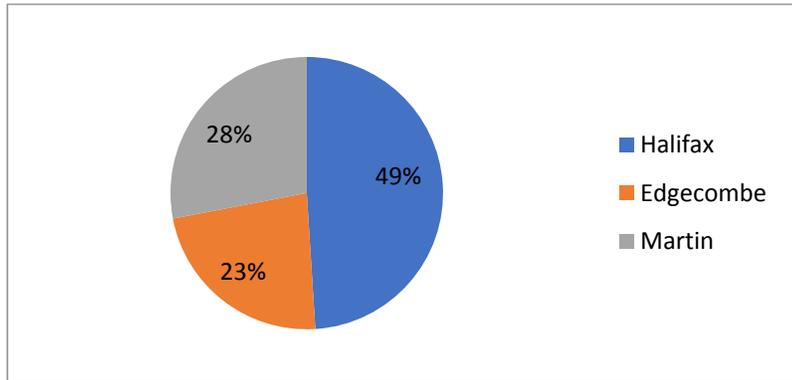
Appendix A1 - Evidence of Educational Need -survey

In order to determine and demonstrate a need for Hobgood Academy Charter School, the Board of Directors held a series of community meetings at various locations in our targeted area over the past 2 years. These meetings were advertised on social media and through flyers placed in strategic locations. Support has grown as we have presented our message more clearly. Families are frustrated by the lack of choice in their children’s education and feel that rural areas are often overlooked. Their responses have been enthusiastic as to what we hope to offer. A sample of the flyer and survey are attached.

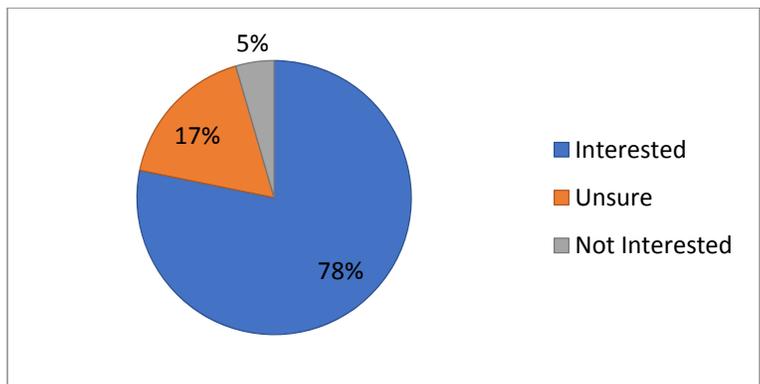
Below is data we have compiled based on survey results from all these meetings and from surveys sent home to families currently enrolled at Hobgood Academy. Board members also held in home meetings and handed out surveys, but those dates are not recorded. The dates and public places are listed below.

January 19, 2016	Robersonville Library – Robersonville, NC	7pm
February 23, 2016	Hobgood Depot – Hobgood, NC	7pm
March 19, 2016	Tarboro Coffee Shop – Tarboro	10am
April 19, 2016	Hobgood Academy – Hobgood, NC	7pm
January 19, 2017	Scotland Neck Library – Scotland Neck, NC	6pm
March 14, 2017	Hobgood Academy – Hobgood, NC	7pm

County of Residence of Respondents



Interest Survey





COMMUNITY MEETING  
**HOBGOOD ACADEMY**  
CHARTER SCHOOL

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**DATE: MARCH 14, 2017**

**TIME: 7 PM**

HOBGOOD ACADEMY LUNCHROOM  
201 S. BEECH STREET, HOBGOOD, NC 27843

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Come to Hobgood Academy to hear about our plans for converting the school to a free public charter school. There will be a presentation about the proposed plans followed by a period of Q&A. Your input is very important to us!

For more information contact us at:  
252-826-4116



## SURVEY

PLEASE ANSWER THIS SHORT SURVEY AND RETURN IT TO:

HOBGOOD ACADEMY  
CHARTER COMMITTEE  
201 S. BEECH STREET  
HOBGOOD, NC 28743  
(252)826-4116 PHONE (252)826-2265 FAX

1. IN WHICH COUNTY DO YOU LIVE?
2. DO YOU HAVE SCHOOL AGE CHILDREN?
3. WOULD YOU BE INTERESTED IN ENROLLING YOUR CHILD AT A K-12 HOBGOOD ACADEMY CHARTER SCHOOL?

Appendix A2 - secure facility - Deed

Pursuant to G.S. 161-31 this certifies to the Halifax County Register of Deeds that no delinquent ad valorem real estate taxes or other taxes which the Halifax County Tax Collector is charged with collecting are a lien on the property described in the attached deed and identified as part or all of TAX PARCEL # 080183. This certification does not constitute a written certificate under G.S. 105-361.

0804004  
0801830

12-20-16      Dois Anhi Lot  
Date                      Halifax County Tax Collector



Doc ID: 003914540003 Type: CRP  
 Recorded: 12/20/2016 at 03:42:04 PM  
 Receipt#: 2016-00004141  
 Fee Amt: \$2,026.00 Page 1 of 3  
 Revenue Tax: \$2,000.00  
 Instr# 201600005134  
 Halifax, NC  
 Christie C Avens Register of Deeds  
 BK **2516** PG **728-730**

RF \$ 26.00  
RS \$ 2,000.00

/ This instrument was prepared by Jesse E. Shearin, Jr.  
Post Office Drawer 366, Scotland Neck, NC 27874

NORTH CAROLINA  
HALIFAX COUNTY

Tax Parcels 0801831, 0804004, 0801830

THIS DEED is made on December 20, 2016. The Grantor is SCOTFIELD, INC., a North Carolina business corporation. The Grantee is HOBGOOD ACADEMY, INC. a North Carolina non-profit corporation, having an address of 201 South Beech Street, Hobgood, NC 27843

The designations "Grantor" and "Grantee" as used herein shall include said parties, their successors, and assigns.

FOR VALUE RECEIVED, Grantor does hereby grant and convey to Grantee all of Grantor's rights to and interest in any real property located in **Hobgood Township, Halifax County, North Carolina** and described more particularly as follows, to wit:

All that land used by Grantee in connection with the operation of HOBGOOD ACADEMY; and being a tract of land comprised of three parcels designated on the records of the Halifax County Tax Collector by the following numbers: **0801831**, containing 4.86 acres; **0804004**, containing 8.0 acres; and **0801830**, containing 0.5165 acre; and being the same property conveyed to Grantor by Deed of Grantee, dated, June 20, 2016, and recorded in Book 2510, pages 153-154, Halifax County Registry.

DEED, PAGE 2  
SCOTFIELD, INC.. to HOBGOOD ACADEMY, INC.

TO HAVE AND TO HOLD said real property, with all privileges and appurtenances thereunto belonging, in fee simple, **SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS, to wit:**

All of Grantee's rights to and interest in the subject property shall REVERT TO GRANTOR upon the occurrence of any of the following conditions:

1. Grantee dissolves the corporation;
2. Grantee ceases to operate a K-12 school;
3. Grantee, **as of July 1, 2027**, has not complied with the provisions of paragraph #3 of a written Agreement of even date herewith between Grantor and Grantee, which Agreement is hereby incorporated herein; it being understood, however, that, upon Grantee's compliance with paragraph #3, Grantor will immediately file a Deed of Release in the Office of the Register of Deeds.

IN WITNESS WHEREOF, Grantor has caused this Deed to be executed by the President of the Corporation the day and year first above written.

SCOTFIELD, INC.

By: Jesse E. Shearin, Jr.  
Jesse E. Shearin, Jr, President

DEED, PAGE 3  
SCOTFIELD, INC.. to HOBGOOD ACADEMY, INC.

NORTH CAROLINA  
HALIFAX COUNTY

I, Tommie R. Pendleton, a Notary Public of the County and State aforesaid, certify that JESSE E. SHEARIN, JR., personally appeared before me this day and, first being duly sworn, stated that he is PRESIDENT of SCOTFIELD, INC., and that, pursuant to authority duly given, he did sign the foregoing instrument as the act and deed of said corporation for the purposes therein expressed.

Witness my hand and official stamp or seal, this 20<sup>th</sup> day of Dec, 2016..

Tommie R Pendleton

Notary Public

My commission expires July 24, 2018

TOMMIE R. PENDLETON  
Notary Public  
North Carolina  
Halifax County



Doc ID: 003935300002 Type: CRP  
 Recorded: 03/02/2017 at 03:27:22 PM  
 Receipt#: 2016-00005960  
 Fee Amt: \$26.00 Page 1 of 2  
 Revenue Tax: \$0.00  
 Instr# 201600007430  
 Halifax, NC  
 Christie C Avens Register of Deeds

BK **2523** PG **102-103**

✓ This instrument was prepared by Jesse E. Shearin, Jr.  
 Post Office Drawer 366, Scotland Neck, NC 27874

NORTH CAROLINA  
 HALIFAX COUNTY

Tax Parcels: 0801831,0804004,0801830

THIS **DEED OF RELEASE** is made on January 9, 2017. The Grantor is SCOTFIELD, INC., a North Carolina business corporation. The Grantee is HOBGOOD ACADEMY, INC. a North Carolina non-profit corporation, having an address of 201 South Beech Street, Hobgood, NC 27843.

The designations "Grantor" and "Grantee" as used herein shall include said parties, their successors, and assigns.

WHEREAS, Grantor, by Deed dated December 20, 2016, and recorded in Book 2516, Pages 728-730, has previously conveyed unto Grantee all that land described in said Deed; and

WHEREAS, in said Deed Grantor did impose certain conditions that could result in the reversion of the subject property to Grantor;

NOW, THEREFORE, for valuable consideration, Grantor does hereby release Grantee from any and all conditions imposed upon Grantee by said Deed, it being the intent of Grantor that Grantee have and hold all land described in said deed free and clear of any appearance of a reversionary interest held by Grantor. And Grantor hereby affirms that Grantee holds, without limitation, all of Grantor's rights to and

DEED OF RELEASE, PAGE 2  
SCOTFIELD, INC., to HOBGOOD ACADEMY, INC.

interest in that real property located in **Hobgood Township, Halifax County, North Carolina** and described more particularly as follows, to wit:

All that land used by Grantee in connection with the operation of HOBGOOD ACADEMY; and being a tract of land comprised of three parcels designated on the records of the Halifax County Tax Collector by the following numbers: **0801831**, containing 4.86 acres; **0804004**, containing 8.0 acres; and **0801830**, containing 0.5165 acre; and being the same property conveyed to Grantor by Deed of Grantee, dated, June 20, 2016, and recorded in Book 2510, pages 153-154, Halifax County Registry.

IN WITNESS WHEREOF, Grantor has caused this Deed to be executed by the President of the Corporation the day and year first above written.

SCOTFIELD, INC.

By: Jesse E. Shearin, Jr.  
Jesse E. Shearin, Jr, President

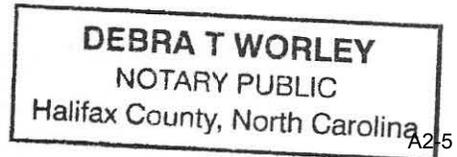
NORTH CAROLINA  
HALIFAX COUNTY

I, Debra T Worley, a Notary Public of the County and State aforesaid, certify that JESSE E. SHEARIN, JR., personally appeared before me this day and, first being duly sworn, stated that he is PRESIDENT of SCOTFIELD, INC., and that, pursuant to authority duly given, he did sign the foregoing instrument as the act and deed of said corporation for the purposes therein expressed.

Witness my hand and official stamp or seal, this 1<sup>st</sup> day of March, 2017.

Debra T Worley  
Notary Public

My commission expires Dec. 9, 2020





Concept/Skill      Grade K    Grade 1    Grade 2    Grade 3    Grade 4    Grade 5    Course 1    Course 2    Course 3

### Number and Operations in Base Ten — *continued*

#### Multiplication and Division

Use and explain strategies based on place value and properties of operations		1.NBT.4, 1.NBT.5 1.NBT.6, 1.OA.3, 1.OA.4	2.NBT.5, 2.NBT.6, 2.NBT.7, 2.NBT.9	3.NBT.2	4.NBT.4, 4.NF.3c	5.NBT.7			
Use odd and even numbers and arrays to gain foundations for multiplication			2.OA.3, 2.OA.4	3.OA.3					
Fluently multiply and divide basic facts				3.OA.7					
Compose and decompose numbers				3.NBT.3	4.NBT.5, 4.NBT.6, 4.OA.4	5.NBT.5			
Use and explain strategies based on the relationship between multiplication and division				3.OA.6, 3.OA.7	4.NBT.5, 4.NBT.6	5.NBT.6, 5.NBT.7			
Use and explain strategies based on place value and properties of operations				3.NBT.3, 3.OA.5, 3.OA.7, 3.OA.9	4.NBT.5, 4.NBT.6	5.NBT.6, 5.NBT.7			
Use multiplication to find combinations				3.OA.3					
Interpret multiplication equations as comparisons					4.OA.1, 4.OA.2				
Interpret remainders					4.NBT.6, 4.OA.3	5.NBT.6			
Estimation					4.NBT.3, 4.NBT.6	5.NBT.5, 5.NBT.6			
Divide and fluently multiply multi-digit numbers using standard algorithm					4.NBT.5, 4.NBT.6	5.NBT.5, 5.NBT.6	6.NS.2		
Prime factorization						5.NBT.2			

#### Whole Numbers

Greatest Common Factor (GCF)					4.NF.1	5.NF.2	6.NS.4		
Least Common Multiple (LCM)					4.NF.1	5.NF.2	6.NS.4		
Apply Distributive Property				3.OA.5, 3.OA.7, 3.OA.9, 3.MD.7c	4.NBT.5	5.NBT.5	6.NS.4	7.NS.2a	
Powers and exponents						5.NBT.2	6.EE.1		
Square roots of perfect squares									8.EE.2
Cube roots of perfect cubes									8.EE.2

#### Integers

Positive and negative numbers							6.NS.5		
Opposite signs of numbers							6.NS.6a		
Graph integers on a number line							6.NS.6, 6.NS.6a, 6.NS.6c		
Graph integers on a coordinate plane							6.NS.6, 6.NS.6b, 6.NS.6c, 6.NS.8		
Order integers							6.NS.7, 6.NS.7a, 6.NS.7b, 6.NS.7d		

Concept/Skill                      Grade K    Grade 1    Grade 2    Grade 3    Grade 4    Grade 5    Course 1    Course 2    Course 3

**Number and Operations in Base Ten — *continued***

**Integers *continued***

Absolute value							6.NS.7, 6.NS.7c, 6.NS.7d	7.NS.1c	
Additive inverses								7.NS.1a, 7.NS.1b	
Multiplication of integers								7.NS.2a	
Division of integers								7.NS.2b	
Properties of integer exponents									8.EE.1

**Rational Numbers**

Graph rational numbers on a number line							6.NS.6, 6.NS.6a		
Order rational numbers on a number line							6.NS.7, 6.NS.7a		
Write, interpret, and explain order of rational numbers							6.NS.7b		
Graph rational numbers on a coordinate plane							6.NS.6, 6.NS.6c, 6.NS.8		
Solve real-world problems by graphing points in all four quadrants							6.NS.8		
Add and subtract rational numbers								7.NS.1, 7.NS.1b, 7.NS.1c, 7.NS.1d	
Represent addition and subtraction on a number line								7.NS.1, 7.NS.1b	
Interpret sums of rational numbers in real-world contexts								7.NS.1b	
Understand subtraction as adding the additive inverse								7.NS.1c	
Interpret products and quotients of rational numbers in real-world contexts								7.NS.2a, 7.NS.2b	
Distance between two rational numbers on a number line								7.NS.1c	
Multiply and divide rational numbers								7.NS.2, 7.NS.2a, 7.NS.2b, 7.NS.2c	
Concept of rational numbers								7.NS.2b	
Convert rational numbers to decimals								7.NS.2d	
Terminating and repeating decimals								7.NS.2d	8.NS.1
Solve real-world problems using operations with rational numbers								7.NS.3	
Complex fractions								7.RP.1, 7.NS.3	
Solve multi-step problems involving rational numbers								7.EE.3	
Convert a decimal expansion which repeats eventually into a rational number									8.NS.1

Concept/Skill      Grade K    Grade 1    Grade 2    Grade 3    Grade 4    Grade 5    Course 1    Course 2    Course 3

Number and Operations in Base Ten — *continued*

**Real Numbers**

Concept of irrational numbers									8.NS.1
Estimate square roots									8.NS.2
Know $\sqrt{2}$ is irrational									8.EE.2
Compare the size of irrational numbers									8.NS.2
Approximate location of irrational numbers on a number line									8.NS.2

**Number and Operations**

**Fractions**

Partition shapes and understand fractions as part of a whole		1.G.3	2.G.3	3.NF.1, 3.G.2					
Express fractions as a whole number				3.NF.3c					
Represent fractions on a number line				3.NF.2, 3.NF.2a, 3.NF.2b, 3.NF.3a	4.NF.6	5.NF.2	6.NS.6c	7.NS.1	
Equivalent fractions				3.NF.3a, 3.NF.3b, 3.NF.3c	4.NF.1, 4.NF.5	5.NF.1			
Unit fractions				3.NF.1, 3.G.2	4.NF.3b, 4.NF.4a, 4.NF.4b	5.NF.7			
Compare and order fractions				3.NF.3d	4.NF.2	5.NF.5a			
Find factor pairs and multiples					4.OA.4	5.NBT.2			
Prime and composite numbers					4.OA.4	5.NBT.2			
Simplest form					4.NF.1, 4.NF.2	5.NF.5b			
Represent mixed numbers and write as improper fractions					4.NF.3b	5.NF.1			
Add, subtract, and multiply fractions and mixed numbers					4.NF.3c, 4.NF.3d, 4.NF.4	5.NF.1, 5.NF.2, 5.NF.4, 5.NF.5, 5.NF.6			
Solve word problems involving addition and subtraction of fractions					4.NF.3d	5.NF.2			
Solve word problems involving multiplication of fractions					4.NF.4c	5.NF.6			
Round fractions						5.NF.2			
Estimate sums and differences of fractions						5.NF.2			
Estimate products of fractions						5.NF.4a, 5.NF.6			
Interpret multiplication with fractions as scaling						5.NF.5			
Interpret fractions as division of numerator by denominator						5.NF.3			
Divide fractions and mixed numbers						5.NF.7	6.NS.1	7.NS.2c	
Solve word problems involving division of fractions						5.NF.7c	6.NS.1	7.NS.2c 7.NS.3 7.EE.3	

## Concept/Skill

Grade K

Grade 1

Grade 2

Grade 3

Grade 4

Grade 5

Course 1

Course 2

Course 3

Number and Operations — *continued*

## Decimals

Understand decimal notation					4.NF.6	5.NBT.3a			
Write fractions as decimals					4.NF.5, 4.NF.6	5.NF.5b, 5.NBT.3a			
Compare and order decimals					4.NF.6, 4.NF.7	5.NF.5b, 5.NBT.3b			
Add decimals					4.NF.5, 4.NF.6	5.NBT.7	6.NS.3		
Subtract/Multiply/Divide decimals to hundredths						5.NBT.7			
Estimate sums and differences of decimals by rounding						5.NBT.4			
Represent decimals on a number line					4.NF.6, 4.NF.7	5.NBT.3b	6.NS.6c		
Subtract/Multiply/Divide multi-digit decimals							6.NS.2, 6.NS.3		
Convert rational numbers to decimals								7.NS.2d	
Terminating and repeating decimals								7.NS.2d	8.NS.1
Convert a decimal expansion which repeats eventually into a rational number									8.NS.1
Non-repeating decimals/irrational numbers									8.NS.1

## Percent

Percent as rate per 100							6.RP.3c		
Find a percent of a quantity							6.RP.3c		
Solve percent problems for the whole							6.RP.3c		
Percent proportion								7.RP.3	
Percent equation								7.RP.3	
Simple interest								7.RP.3	
Sales tax and gratuities								7.RP.3	
Markups and markdowns								7.RP.3	
Commissions and fees								7.RP.3	
Percent increase and decrease								7.RP.3	
Percent error								7.RP.3	

## Ratios and Proportional Relationships

## Ratios and Rates

Understand the concept of a ratio							6.RP.1		
Use ratio and rate language							6.RP.1, 6.RP.2		
Understand the concept of a unit rate							6.RP.2		
Solve real-world problems using ratios and rates							6.RP.3	7.RP.3	
Tables of equivalent ratios							6.RP.3a	7.RP.2a	
Graph ratio tables							6.RP.3a	7.RP.2a	
Unit pricing							6.RP.3b		

Concept/Skill      Grade K    Grade 1    Grade 2    Grade 3    Grade 4    Grade 5    Course 1    Course 2    Course 3

### Ratios and Proportional Relationships — *continued*

#### Ratios and Rates *continued*

Constant speed							6.RP3b		
Use ratios to convert measurements							6.RP3d	7.RP3	
Unit rates involving fractions (complex fractions)								7.RP1	
Ratio and probability								7.SP.8a	
Interpret unit rate as the slope									8.EE.5
Rate of change of a linear function									8.F.4

#### Proportional Relationships

Recognize and represent proportional relationships								7.RP.2	
Identify proportional relationships using tables or graphs								7.RP.2a	
Constant of proportionality (unit rate)								7.RP.2b, 7.RP.2d	
Represent proportional relationships by equations								7.RP.2c	
Explain what a point on the graph of a proportional relationship means								7.RP.2d	
Solve proportions								7.RP.3	
Use proportional relationships to solve multi-step ratio problems								7.RP.3	
Graph proportional relationships								7.RP.2a	8.EE.5
Compare two different proportional relationships									8.EE.5
Scale drawings								7.G.1	

### Algebra and Functions

#### Algebraic Representation

Compose and decompose numbers	K.OA.1, K.OA.2, K.OA.3, K.OA.4, K.OA.5	1.OA.1, 1.OA.2, 1.OA.3, 1.OA.4, 1.OA.5, 1.OA.6, 1.OA.8	2.OA.1	3.OA.5, 3.OA.7	4.NBT.5, 4.NBT.6, 4.NF.3b	5.NBT.6			
Identify/Generate/Explain patterns	K.CC.4, K.CC.4a	1.NBT.5	2.NBT.2	3.OA.9, 3.NBT.3	4.NBT.1, 4.NBT.4, 4.OA.5	5.OA.3, 5.NBT.1, 5.NBT.2			
Solve addition and subtraction word problems	K.OA.2, K. NBT.1	1.OA.1, 1.OA.2	2.OA.1	3.OA.8, 3.MD.1	4.OA.3, 4.MD.2, 4.NF.3d	5.NF.2			
Assess the reasonableness of answers by rounding and estimating				3.OA.8	4.OA.3, 4.NBT.3, 4.NBT.6	5.NBT.5, 5.NBT.6			
Determine the unknown/variable		1.OA.1, 1.OA.2, 1.OA.4, 1.OA.8	2.OA.1	3.OA.3, 3.OA.4, 3.OA.6, 3.OA.8	4.OA.2, 4.OA.3	5.NBT.6	6.EE.6		
Write and solve number sentences/ equations	K.OA.1, K.OA.3, K.OA.4, K.NBT.1	1.OA.1, 1.OA.2, 1.OA.7, 1.OA.8	2.OA.1, 2.OA.3, 2.OA.4	3.OA.3, 3.OA.4, 3.OA.5, 3.OA.7, 3.OA.8	4.OA.1, 4.OA.2, 4.OA.3, 4.NF.3d, 4.NF.4c, 4.NBT.5, 4.NBT.6	5.NBT.6			

Concept/Skill                      Grade K    Grade 1    Grade 2    Grade 3    Grade 4    Grade 5    Course 1    Course 2    Course 3

### Algebra and Functions — *continued*

#### Algebraic Representation *continued*

Determine if addition or subtraction equations are true or false.		1.OA.7							
Solve word problems that call for addition of three numbers		1.OA.2							
Order of operations				3.OA.8	4.OA.3	5.OA.1	6.EE.2c		
Write and solve multiplication and division word problems				3.OA.3, 3.OA.8	4.OA.2, 4.OA.3, 4.NF.4c, 4.MD.2, 4.MD.3	5.NBT.5, 5.NF.6, 5.NF.7c			
Write and evaluate expressions involving variables				3.OA.5, 3.OA.8	4.OA.3	5.OA.1, 5.OA.2	6.EE.2, 6.EE.2a, 6.EE.2c, 6.EE.6		
Identify and generate non-numeric patterns					4.OA.5				
Apply properties of operations		1.OA.3, 1.NBT.2	2.NBT.5, 2.NBT.6, 2.NBT.7, 2.NBT.9	3.NBT.3, 3.OA.5, 3.OA.7, 3.OA.9	4.OA.5, 4.NBT.5	5.NBT.5	6.EE.3	7.EE.1, 7.EE.2	
Parts of an expression							6.EE.2b		
Identify equivalent expressions							6.EE.4		
Properties of integer exponents									8.EE.1
Use scientific notation to estimate quantities									8.EE.3
Perform operations using scientific notation									8.EE.4
Choose units of appropriate size for very large or very small quantities									8.EE.4
Scientific notation and technology									8.EE.4

#### Equations and Inequalities

Identify values that make an equation or inequality true							6.EE.5		
Use variables and expressions to solve real-world problems							6.EE.6	7.EE.4	
Write and solve equations of the form $x + p = q$ and $px = q$							6.EE.7		
Inequalities of the form $x > c$ or $x < c$							6.EE.8		
Graph inequalities on a number line							6.EE.8	7.EE.4b	
Solve equations of the form $px + q = r$ and $p(x + q) = r$								7.EE.4, 7.EE.4a	
Compare an algebraic solution to an arithmetic solution								7.EE.4a	
Solve multi-step problems involving rational numbers								7.EE.3	8.EE.7.8
Solve inequalities of the form $px + q < r$ or $px + q > r$								7.EE.4, 7.EE.4b	
Solve linear equations with one, infinitely many, or no solutions									8.EE.7, 8.EE.7a
Solve linear equations with rational coefficients								7.EE.4a	8.EE.7, 8.EE.7b

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### Algebra and Functions — *continued*

#### Equations and Inequalities *continued*

Solve equations of the form $x^2 = p$ and $x^3 = p$										8.EE.2
<b>Equations in Two Variables</b>										
Dependent and independent variables								6.EE.9		
Write equations using two variables								6.EE.9		
Form ordered pairs						5.OA.3, 5.G.1, 5.G.2				
Tables of ordered pairs						5.OA.3, 5.G.1, 5.G.2		6.EE.9		
Graphs of ordered pairs						5.OA.3, 5.G.1, 5.G.2		6.EE.9		
Analyze patterns and relationships						5.OA.3, 5.NBT.2		6.EE.9		
Represent proportional relationships by equations									7.RP.2c	
Use similar triangles to explain slope of a line										8.EE.6
Derive the equations $y = mx$ and $y = mx + b$										8.EE.6
Solve systems of linear equations by graphing										8.EE.8, 8.EE.8a
Solve systems of linear equations algebraically										8.EE.8, 8.EE.8b
Solve problems leading to two linear equations in two variables										8.EE.8, 8.EE.8c

### Functions

Relations and functions										8.F.1
Understand functions										8.F.1
Graph of a function										8.F.1
Compare properties of functions										8.F.2
Identify non-linear functions										8.F.3
Linear functions in $y = mx + b$ form										8.F.3
Construct a function										8.F.4
Rate of change and initial value of a function										8.F.4
Qualitative graphs										8.F.5

### Measurement

#### Measurement

Describe and compare measurable attributes of objects	K.MD.1, K.MD.2									
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## Concept/Skill

## Grade K

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## Grade 2

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## Course 1

## Course 2

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Measurement — *continued*

## Linear Measurement

Measure and order by comparing indirectly and by iterating using non-standard units of length		1MD.1, 1MD.2							
Measure length using appropriate tools			2.MD.1						
Use customary units of length to estimate, measure, and compare			2.MD.1, 2.MD.2, 2.MD.3, 2.MD.4						
Use addition and subtraction to solve word problems of length			2.MD.5,		4.MD.2, 4.MD.3, 4.MD.4	5.MD.1, 5.MD.2			
Measure to half and quarter of an inch				3.MD.4	4.MD.2	5.MD.2			
Measure to eighth of an inch					4.MD.2	5.MD.2			
Estimate using customary and metric units of length					4.MD.1, 4.MD.2				
Measure metric units of length					4.MD.1	5.MD.1			
Know measurement equivalencies within a measurement system					4.MD.1	5.MD.1			
Convert customary and metric units of length					4.MD.1, 4.MD.2	5.MD.1			

## Perimeter and Area

Measure perimeter				3.MD.8	4.MD.3				
Apply the formula for perimeter					4.MD.3				
Use concepts of area to measure area				3.MD.5, 3.MD.5a, 3.MD.5b 3.MD.6, 3.MD.7, 3.MD.7a, 3.MD.7b, 3.MD.7c, 3.MD.7d, 3.MD.8	4.MD.3	5.NF.4b			
Apply the formula for area				3.MD.7, 3.MD.7b	4.MD.3	5.NF.4b			
Relate area and perimeter				3.MD.5, 3.MD.7, 3.MD.8	4.MD.3				
Find area of composite figures by decomposing				3.MD.5, 3.MD.7, 3.MD.7b, 3.MD.7d			6.G.1	7.G.6	
Relate area to multiplication and addition				3.MD.7, 3.MD.7a, 3.MD.7b, 3.MD.7c, 3.MD.7d	4.MD.3	5.NF.4b			
Solve problems involving same perimeter but different area and vice versa				3.MD.8	4.MD.3				

## Liquid Volume

Estimate metric units of capacity				3.MD.2	4.MD.1, 4.MD.2	5.MD.1			
Measure metric units of capacity				3.MD.2		5.MD.1			

Concept/Skill	Grade K	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Course 1	Course 2	Course 3
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### Measurement — *continued*

#### Liquid Volume *continued*

Solve word problems involving liquid volumes				3.MD.2	4.MD.1, 4.MD.2, 4.MD.4	5.MD.1, 5.MD.2			
Convert metric units of capacity					4.MD.1, 4.MD.2	5.MD.1			
Estimate customary units of capacity					4.MD.1, 4.MD.2	5.MD.1			
Measure customary units of capacity						5.MD.1			
Convert customary units of capacity					4.MD.1, 4.MD.2	5.MD.1			

#### Weight and Mass

Estimate metric units of mass				3.MD.2	4.MD.1, 4.MD.2	5.MD.1			
Measure metric units of mass				3.MD.2		5.MD.1			
Solve word problems involving mass				3.MD.2	4.MD.1, 4.MD.2	5.MD.1			
Estimate customary units of weight					4.MD.1, 4.MD.2	5.MD.1			
Measure customary units of weight						5.MD.1			
Convert customary units of weight					4.MD.1, 4.MD.2	5.MD.1			
Convert metric units of mass					4.MD.1, 4.MD.2	5.MD.1			

#### Time

Tell and write time to the hour and half hour		1.MD.3	2.MD.7						
Tell and write time to the quarter hour and 5-minute intervals			2.MD.7						
A.M./P.M.			2.MD.7						
Tell and write time to the minute				3.MD.1					
Measure time intervals in minutes				3.MD.1	4.MD.1, 4.MD.2				
Solve word problems involving time in minutes				3.MD.1	4.MD.1, 4.MD.2				
Convert units of time					4.MD.1, 4.MD.2	5.MD.1			
Solve measurement word problems using the four operations					4.MD.2, 4.MD.3	5.MD.1			

#### Money

Recognize and count using coins		1.NBT.1	2.MD.8						
Sort and compare using coins and bills			2.MD.8						
Solve word problems involving money			2.MD.8						

### Statistics and Probability

#### Data Sets and Populations

Classify objects by size, shape, and count	K.MD.3								
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## Concept/Skill

## Grade K

## Grade 1

## Grade 2

## Grade 3

## Grade 4

## Grade 5

## Course 1

## Course 2

## Course 3

Statistics and Probability — *continued*Data Sets and Populations *continued*

Organize, represent, and interpret data		1.MD.4	2.MD.9, 2.MD.10	3.MD.3, 3.MD.4	4.MD.4	5.MD.2			
Generate data in whole units of linear measurement			2.MD.9						
Generate data in fractions of an inch				3.MD.4	4.MD.4	5.MD.2			
Recognize statistical questions							6.SP.1		
Distribution of a set of data							6.SP.2		
Statistics and population samples								7.SP.1	
Random sampling of populations								7.SP.1	
Draw inferences from random samples								7.SP.2	
Multiple samples of data								7.SP.2	
Visual overlap of data distributions								7.SP.3	
Comparative inferences between two populations								7.SP.4	

## Measures of Center and Variability

Measures of center							6.SP.3	7.SP.3, 7.SP.4	
Median							6.SP.5c		
Mean							6.SP.5c		
Measures of variation							6.SP.3	7.SP.3, 7.SP.4	
Range							6.SP.2, 6.SP.3		
Outliers							6.SP.5c		
Mean absolute deviation							6.SP.5c		
Shape of the data distribution							6.SP.5d		
Summarize and describe numerical data sets							6.SP.5, 6.SP.5a, 6.SP.5b, 6.SP.5c		

## Represent Data, Statistical Displays

Draw scaled picture graphs and scaled bar graphs				3.MD.3					
Solve problems involving bar graph analysis			2.MD.10	3.MD.3					
Make line plots using generated linear measurement data			2.MD.9	3.MD.4	4.MD.4	5.MD.2			
Solve addition and subtraction of fractions problems involving line plot analysis					4.MD.4	5.MD.2			
Solve multiplication and division of fractions problems involving line plot analysis						5.MD.2			
Dot plots							6.SP.4	7.SP.3, 7.SP.4	
Histograms							6.SP.4		
Box plots							6.SP.4	7.SP.4	
Scatter plots									8.SP.1
Clustering and outliers									8.SP.1
Positive and negative association									8.SP.1

Concept/Skill      Grade K    Grade 1    Grade 2    Grade 3    Grade 4    Grade 5    Course 1    Course 2    Course 3

### Statistics and Probability — *continued*

#### Represent Data, Statistical Displays *continued*

Linear and nonlinear association										8.SP.1
Line of best fit										8.SP.2
Use the equation of a linear model to solve problems										8.SP.3
Two-way tables										8.SP.4

#### Probability

Probability and chance events									7.SP.5	
Likely and unlikely events									7.SP.5	
Relative frequency									7.SP.6	
Develop a probability model									7.SP.7, 7.SP.7a, 7.SP.7b	
Compare theoretical and experimental probability									7.SP.7	
Compound events									7.SP.8, 7.SP.8a	
Sample spaces									7.SP.8, 7.SP.8b	
Number of outcomes									7.SP.8a	
Permutations									7.SP.8a	
Simulations									7.SP.6, 7.SP.7, 7.SP.8, 7.SP.8c	
Fair and unfair games									7.SP.7b	

### Geometry

#### Two- and Three-Dimensional Shapes and Figures

Describe shapes in the environment	K.G.1									
Position of shapes	K.G.1									
Compose two-dimensional shapes	K.G.6	1.G.2								
Decompose two-dimensional shapes		1.G.2	2.G.2, 2.G.3	3.G.2						
Analyze and compare two-dimensional shapes	K.G.4	1.G.1	2.G.1	3.G.1						
Model, build, and draw two-dimensional shapes	K.G.5	1.G.1	2.G.1	3.G.1						
Identify, name, and describe two-dimensional shapes	K.G.1, K.G.2, K.G.3, K.G.4	1.G.1	2.G.1	3.G.1	4.G.1, 4.G.2					
Partition two-dimensional shapes into equal shares/areas		1.G.3	2.G.2, 2.G.3	3.G.2						
Identify equal shares of two-dimensional shapes		1.G.3	2.G.3	3.G.2						
Identify, name, and describe three-dimensional shapes	K.G.1, K.G.2, K.G.3, K.G.4	1.G.1	2.G.1							
Analyze and compare three-dimensional shapes	K.G.4	1.G.1	2.G.1							
Classify two-dimensional figures by their properties					4.G.1, 4.G.2	5.G.4				

## Concept/Skill

Grade K

Grade 1

Grade 2

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Course 1

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Geometry — *continued*Two- and Three-Dimensional Shapes and Figures *continued*

Describe and classify polygons by their attributes				3.G.1					
Identify, describe, and classify triangles and quadrilaterals by their attributes				3.G.1	4.G.1, 4.G.2	5.G.3, 5.G.4			
Measure sides and angles of triangles and quadrilaterals					4.MD.6, 4.G.2	5.G.3, 5.G.4			
Draw and identify points, lines, line segments, rays, and angles in two-dimensional figures					4.G.1				
Identify lines of symmetry/symmetric figures					4.G.3				
Draw polygons on the coordinate plane							6.G.3		
Use coordinates to find the length of sides of polygons							6.G.3		
Construct triangles from three measures of angles or sides								7.G.2	
Plane sections of three-dimensional figures								7.G.3	
Circles and circumference								7.G.4	

## Angle Measure and Relationship

Explore angles of two-dimensional shapes				3.G.1	4.G.1, 4.MD.5				
Classify angles by their attributes					4.G.1, 4.MD.5				
Measure and draw angles					4.G.1, 4.MD.5, 4.MD.6				
Recognize angle measures as additive					4.MD.7				
Solve addition and subtraction problems to determine measures of unknown angles					4.G.1, 4.MD.7				
Supplementary angles								7.G.5	
Complementary angles								7.G.5	
Vertical angles								7.G.5	
Adjacent angles								7.G.5	
Sum of angles in a triangle									8.G.5
Exterior angle of a triangle									8.G.5
Parallel lines cut by a transversal									8.G.5
Angle-angle criterion for similar triangles									8.G.5

## Area and Surface Area

Area of triangles							6.G.1		
Area of parallelograms							6.G.1		
Area of trapezoids							6.G.1		
Area of composite figures							6.G.1	7.G.6	
Area of a circle								7.G.4	

Concept/Skill	Grade K	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Course 1	Course 2	Course 3
<b>Geometry — continued</b>									
<b>Area and Surface Area</b> <i>continued</i>									
Informal derivation of area of circle from circumference								7.G.4	
Represent three-dimensional figures using nets							6.G.4		
Use nets to find surface area							6.G.4		
Surface area of rectangular prisms							6.G.4	7.G.6	
Surface area of triangular prisms							6.G.4	7.G.6	
Surface area of pyramids							6.G.4	7.G.6	
Surface area of composite figures								7.G.6	
Surface area of cylinders								7.G.4	
<b>Volume</b>									
Understand concepts of volume						5.MD.3			
Measure volume by counting cubes						5.MD.3, 5.MD.4	6.G.2		
Relate volume to addition and multiplication						5.MD.5			
Apply the formula for volume						5.MD.5b	6.G.2		
Build composite figures and find the volume						5.MD.5c			
Volume of right rectangular prisms						5.MD.5a	6.G.2	7.G.6	
Volume of triangular prisms								7.G.6	
Volume of pyramids								7.G.6	
Volume of composite figures								7.G.6	
Volume of cones									8.G.9
Volume of cylinders									8.G.9
Volume of spheres									8.G.9
<b>Scale Drawings</b>									
Compute lengths and areas of figures from scale drawings								7.G.1	
Reproduce scale drawings with a different scale								7.G.1	
<b>Transformations, Congruence, and Similarity</b>									
Properties of rotations									8.G.1
Properties of reflections									8.G.1
Properties of translations									8.G.1
Line segments, angles, and parallel lines in transformations									8.G.1a, 8.G.1b, 8.G.1c
Congruent figures based on transformations									8.G.2
Effect of transformations using coordinates									8.G.3
Similar figures based on transformations									8.G.4

Concept/Skill	Grade K	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Course 1	Course 2	Course 3
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Geometry — <i>continued</i>									
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Pythagorean Theorem									
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Proof of the Pythagorean Theorem										8.G.6
Converse of the Pythagorean Theorem										8.G.6
Apply the Pythagorean Theorem to solve real-world and mathematical problems										8.G.7
Distance between two points in the coordinate plane										8.G.8

## Hobgood Academy High School Math Scope and Sequence

### Algebra I

A0 Introductory Unit	3 days
A1 Modeling with Functions	8 days
A2 Linear Functions	8 days
A3 Linear Equations and Inequalities in One Variable	8 days
M1 Modeling Unit	2 days
A4 Linear Equations and Inequalities in Two Variables	7 days
P1 Project	3 days
A5 Quadratic Functions	10 days
A6 Quadratic Equations	13 days
M2 Modeling Unit	2 days
S1 Statistics	15 days
P2 Project	3 days
Total	82 days

### Geometry

G0 Introduction and Construction Unit	6 days
G1 Basic Definitions and Rigid Motions	10 days
G2 Geometric Relationships and Properties	8 days
G3 Similarity	10 days
M3 Modeling Unit	3 days
P3 Project	3 days
G4 Coordinate Geometry	8 days
G5 Circles and Conics	8 days
G7 Geometric Measurement and Dimensions	8 days
G6 Trigonometric Ratios	8 days
M4 Geometric Modeling Project	5 days
P4 Project	3 days
Total	80 days

## Algebra Two

A0 Introductory Unit	2 days
A7 Exponential Functions	13 days
A8 Trigonometric Functions	7 days
A9 Functions	8 days
M5 Modeling Unit	4 days
P5 Project	2 days
A10 Rational and Polynomial Expressions	10 days
P1 Probability	14 days
S2 Statistics (Random Processes)	14 days
M6 Modeling Unit	3 days
P6 Project	2 days
Total	79 days

## Precalculus

A2P.0 Introduction	3 days
A2P.1 Exponential Functions	10 days
A2P.2 Functions	11 days
A2P.3 Trigonometric Functions	10 days
A2P.4 Polynomials and Rational Expressions and Functions	11 days
M5 Modeling Unit	4 days
P5 Project	2 days
A2P.5 Statistics: Random Processes	7 days
A2P.6 Building Functions	8 days
A2P.7 Trigonometric Equations and Identities	8 days
M7 Modeling Unit	3 days
P7 Project	2 days
Total	79 days

**Hobgood Academy Charter School**  
**High School Course Requirements**

<b>Content Area</b>	<b>Future-Ready Core Course Requirements</b>
<b>English</b>	<b>4 Credits: I, II, III, IV</b>
<b>Math</b>	<b>4 Credits:</b> <ul style="list-style-type: none"><li>• Algebra I</li><li>• Geometry</li><li>• Algebra II</li><li>• Pre-Calculus or Applied Math</li></ul>
<b>History</b>	<b>4 credits:</b> <ul style="list-style-type: none"><li>• American History: The Founding Principles, Civics and Economics</li><li>• US History I</li><li>• US History II</li><li>• World History</li></ul>
<b>Science</b>	<b>3 credits:</b> <ul style="list-style-type: none"><li>• Biology</li><li>• Chemistry</li><li>• Earth and Environmental</li></ul>
<b>Physical/Health Education</b>	<b>4 credits</b>
<b>Foreign Language</b>	<b>2 credits of the same language</b>
<b>Electives</b>	<b>4 credits</b> <ul style="list-style-type: none"><li>• Horticulture</li><li>• Computer Applications</li><li>• Drama</li><li>• Carpentry</li><li>• Art</li><li>• Family &amp; Consumer Science</li></ul>

\*Advanced coursework will be approved by the Head of School and facilitated by Edgecombe Community College



Department of the Treasury

Appendix D - 501(c)(3)

District Director  
**Internal Revenue Service**

Date: 7-2-16-71 In reply refer to 411-12:ARG



EXEMPTION  
LETTER

Bobgood Academy, Inc.  
P. O. Box 307  
Bobgood, North Carolina 27843

COPY

Gentlemen:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

We have further determined you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 501(c)(3)(A)(ii).

You are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. You are not liable for the taxes imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes under sections 2055, 2106, and 2522 of the Code.

If your purposes, character, or method of operation is changed, you must let us know so we can consider the effect of the change on your exempt status. Also, you must inform us of all changes in your name or address.

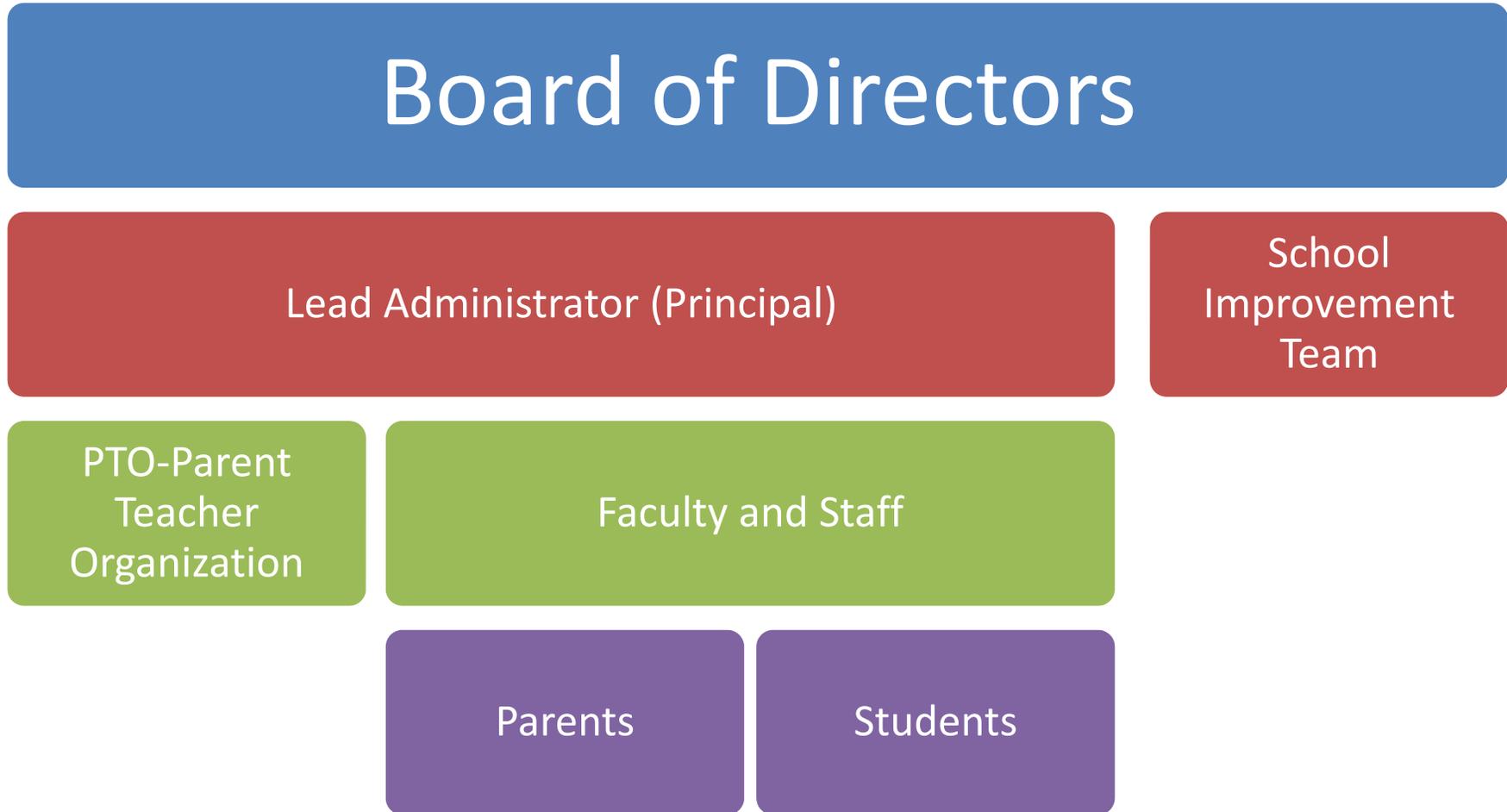
If your gross receipts each year are normally more than \$5,000, you are required to file Form 990, Return of Organization Exempt From Income Tax, by the 15th day of the fifth month after the end of your annual accounting period. The penalty is \$10 a day, up to a maximum of \$5,000, for failure to file a return on time.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service. Please keep this determination letter in your permanent records.

Sincerely yours,

W. T. Coppinger  
District Director





# J. Scott Kiser

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Objective	NC Charter School Board Member
Summary of qualifications	Conservation experience in agriculture and industrial environments. Highly motivated and dedicated to the preservation of natural resources. Excellent knowledge of all USDA/NRCS best management practices. Experience in developing conservation plans, wildlife plans, and maintaining records. Trained in conservation engineering and USDA/NRCS planning software. Excellent presentation skills. Effective in developing working relationships with diverse clients. Works collaboratively with team members to achieve common goals while maintaining individual responsibilities and commitments. Strong interpersonal skills and a positive work ethic. Resourceful and knowledgeable in job prerequisites.
Education	2001 Wayne Community College Goldsboro, NC Associate Degree Park Ranger Technology *Environmental Resource Interpretation *Ecology *Wildlife Management *Forest Management *Dendrology *Soil Science *Criminal Justice *Woodsmanship
Work experience	<p>Director</p> <p>May 2007-Present Edgecombe Soil and Water Conservation District</p> <ul style="list-style-type: none"> <li>➤ Manage all operations for a Local Unit of Government</li> <li>➤ Coordinate and carry out the decisions of Elected Board</li> <li>➤ Develop Federal and State contracts for Cost Share Assistance</li> <li>➤ Write Comprehensive Nutrient Management Plans</li> <li>➤ Provide technical assistance to land owners</li> <li>➤ Develop conservation plans</li> <li>➤ Work to protect and improve water quality</li> <li>➤ Provide assistance to land owners to promote conservation practices</li> <li>➤ Develop and oversee Conservation Security Program contracts</li> </ul> <p>Natural Resource Conservationist</p> <p>Sept. Jan.05 – May 2007 Fishing Creek Soil and Water Conservation District</p> <ul style="list-style-type: none"> <li>➤ Provide technical assistance to land owners to allow for the production of food and fiber on working land in North Carolina</li> </ul> <p>Quality Assurance Technician</p> <p>Sept.2002 – January 2005 Abbott Labs Rocky Mount NC</p> <ul style="list-style-type: none"> <li>➤ Use a plans and schematics to evaluate the quality of incoming goods.</li> </ul> <p>Assistant Park Ranger</p> <p>May 2001- Sept. 2002 Hammocks Beach State Park Swansboro, NC</p> <ul style="list-style-type: none"> <li>➤ Supervised summer employees, provided Nature based educational programs and maintained safety of park visitor.</li> </ul>

**Appendix F:**

**Charter School Board Member Information Form**

*Note: To be completed individually by each proposed founding charter school board member. All forms must be signed by hand.*

Serving on a public charter school board is a position of public trust and as a board member of a North Carolina public charter school; you are responsible for ensuring the quality of the school's entire program, competent stewardship of public funds, and the school's fulfillment of its public obligations and all terms of its charter.

As part of the application for a new charter school, the State Board of Education requests that each prospective board member respond individually to this questionnaire. Where narrative responses are required, brief responses are sufficient.

The purpose of this questionnaire is twofold: 1) to give application reviewers a clearer introduction to the applicant team behind each school proposal in advance of the applicant interview, in order to be better prepared for the interview; and 2) to encourage board members to reflect individually as well as collectively on their common mission, purposes, and obligations at the earliest stage of school development.

**Background**

1. Name of charter school on whose Board of Directors you intend to serve: Hobgood Academy Charter School

2. Full name: Jeffrey Scott Kiser

Home Address: 1881 Ellis Road, Tarboro NC 27886

Business Name and Address: N/A

Telephone No.: 252-531-3149

E-mail address: gameonmgmt@aol.com

3. Brief educational and employment history.

Outdoor Parks and Recreation, Associate Degree, Wayne Community College

Further education in business at North Carolina State University and East Carolina University

Park Ranger North Carolina Park Service, Fort Macon and Hammocks Beach State Parks

Quality Assurance Technician Abbott Laboratories

Natural Resource Conservationist, Halifax and Edgecombe County Soil and Water Conservation Districts

Director Edgecombe County Soil and Water Conservation District

4. Have you previously served on a board of a school district, another charter school, a non-public school or any not-for-profit corporation?

No:

Yes:

5. How were you recruited to join this Board of Directors? Why do you wish to serve on the board of the proposed charter school?

As a current member on the Board of Directors for Hobgood Academy, I was excited to volunteer to be on the Charter School Board. I believe in the mission of our proposed Charter School. I am dedicated to and interested in the quality of education that our young people receive and the community that we serve.

6. What is your understanding of the appropriate role of a public charter school board member?

My role as a board member is to ensure the academic programs are successful through evaluative measures, we comply with our charter, we are in compliance with any regulations governing charter schools, we are financially solvent, and we are carrying out our mission.

7. Describe any previous experience you have that is relevant to serving on the charter school's board (e.g., other board service). If you have not had previous experience of this nature, explain why you have the capability to be an effective board member.

I currently serve as Director, of the Edgecombe Soil and Water Conservation District. We operate as an independent local unit of Government. As such I manage staff and serve a Board of elected officials. My role is to manage all budget concerns including both State and Federal Cost Share dollars, as well as personnel. I currently serve on several local boards including the Agricultural Advisory Council, Eastern Livestock Show and Sale, Conetoe Volunteer Fire Department, and Edgecombe Cooperative Extension Advisory Board. I currently serve as Chair Person for 3 of the 4 Boards.

8. Describe the specific knowledge and experience that you would bring to the board.

I bring management experience, both financial and personnel related. I also bring a career's worth of experience in teamwork and compromise to achieve common goals and/or finding common ground.

### **School Mission and Program**

1. What is your understanding of the school's mission and guiding beliefs?

The Mission of Hobgood Academy Charter is to develop healthy bodies and healthy minds by incorporating nutritional education and physical activity within core subjects to produce healthy learners. The Hobgood Academy Charter School team joins our parents and community in providing a safe learning environment that promotes diversity, self-discipline and motivation, and healthy living for our school and community. We strive to prepare students both physically and educationally for their futures. Creating engaging learning environments which include physical activity that enhance student academic success, increasing family and community access to healthy foods and programming, and building positive connections between the school and the surrounding community will help us to carry out our mission.

2. What is your understanding of the school's proposed educational program?

To provide a quality education while instilling the value and benefit of healthy living using a variety of innovative teaching methodologies.

3. What do you believe to be the characteristics of a successful school?

Inclusive Environment, Quality Educational Opportunity, Firm Discipline Policy, a Family Atmosphere

4. How will you know that the school is succeeding (or not) in its mission?

In addition to the State assessment and accountability system, we have identified measurable goals that support the mission of our school. After the data is collected, it will be shared with the board where we will evaluate it to see if the school is succeeding and if not what actions need to be taken.

### **Governance**

1. Describe the role that the board will play in the school's operation.

The board should guide the Mission and set forth policy which governs the school. It should also manage the budget and insure the school is financially solvent. We will hire and evaluate the Head of School.

2. How will you know if the school is successful at the end of the first year of operation?

In addition to the State assessment and accountability system, we have identified measureable goals that support the mission of our school. After the data is collected, it will be shared with the board where we will evaluate it to see if the school is succeeding and if not what actions need to be taken. During and at year's end we will also be evaluating the financial status of the school. Positive numbers/gains in all measures will indicate the success of the school. On a personal note, seeing our first graduating class walk across the stage will also be an indication of success!

3. How will you know at the end of five years if the schools is successful?

We would have achieved the goals set out in our charter, we will be under consideration for charter renewal, and we would have made a difference in the lives of our students and community.

4. What specific steps do you think the charter school board will need to take to ensure that the school is successful?

The most important step is being involved. Conducting monthly meetings to assess the academic and financial performance of the school and developing performance improvement plans if needed. Creating good communication between the head of school, teachers, and parents with the board.

5. How would you handle a situation in which you believe one or more members of the school's board were acting unethically or not in the best interests of the school?

We will have a written code of ethics in place to assist with handling these types of situations. The situation would be addressed and any penalty would be imparted.

\*Please include the following with your Information Form

- a one page resume
- a national criminal background check

\*If you responded within the application that disciplinary action has been taken against any past or present professional licenses, provide a detailed response below outlining the disciplinary action taken and the license validity.

**Certification**

I, J. Scott Kiser, certify to the best of my knowledge and ability that the information I am providing to the North Carolina State Board of Education as a prospective board member for Hobgood Academy Charter School is true and correct in every respect.

\_\_\_\_\_  
Signature J. Scott Kiser \_\_\_\_\_ Date 9/11/2017

# JULIANA W. HARRIS

1298 AIRPORT ROAD • ROBERSONVILLE, NC 27871  
252-341-4640 • JULESHARRIS1976@GMAIL.COM

## EDUCATION AND CERTIFICATION

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[MSA, School Administration]  
[ August 2009-May 2011 ] [ East Carolina University ] [ Greenville, NC ]  
[ BS, Birth thru Kindergarten Education ]  
[ August 1994-May 1998 ] [ East Carolina University ] [ Greenville, NC ]  
[ K-6 Certification ]  
[ Curriculum Instructional Specialist ]  
[ K-12 Reading License ]

## WORK OF EXPERIENCE

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[ Assistant Principal ]  
-Eastern Elementary, Washington, NC, August 2016-present  
-Facilitated behavioral guidance and discipline support for students  
-Bus Coordinator with experience in hiring new drivers  
-Testing Coordinator  
-PBIS School Administrator  
-Facilitator/presenter for Prek-K Collaborative professional development series  
[ Kindergarten Teacher ]  
-East End Elementary School, Robersonville, NC, August 2012-June 2016  
-Stocks Elementary School, Tarboro, NC, July 1998-July 2005, August 2006-July 2012  
-Stokes School, Stokes NC, July 2006-June 2006  
[ Professional Development Consultant ]  
-November 2016 & April 2017, Minnesota Principal Leadership Series  
-April 2016, Elko County School District 2-Day Symposium, Nevada, "The Power of the Kindergarten Year: Finding the Balance"  
-June 2015, South Dakota Kindergarten Academy  
-April 2014, Minnesota Department of Education Full-Day K Symposium

## AWARDS AND RECOGNITION IN TEACHING

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[ Kindergarten Demonstration Site Classroom, NCDPI, 2010-2016 ]  
[ Author of Getting Our Hands Dirty: Holding Onto Our Beliefs, chapter included in Teaching Kindergarten: Learner-Centered Classrooms for the 21<sup>st</sup> Century, 2015 ]  
[ Author of "Centers in Kindergarten: When Do You Have Time for That?", Spring 2015 issue of NCAeysc's Milestones ]  
[ North Carolina Kindergarten Teacher Leader, NCDPI Power of K Initiative, 2007-2010 ]  
[ Edgecombe County Teacher of the Year, 2007-2008 ]  
[ National Board Certification, 2004; recertification, 2014 ]

**Appendix F:**

**Charter School Board Member Information Form**

***Note:** To be completed individually by each proposed founding charter school board member. All forms must be signed by hand.*

Serving on a public charter school board is a position of public trust and as a board member of a North Carolina public charter school; you are responsible for ensuring the quality of the school’s entire program, competent stewardship of public funds, and the school’s fulfillment of its public obligations and all terms of its charter.

As part of the application for a new charter school, the State Board of Education requests that each prospective board member respond individually to this questionnaire. Where narrative responses are required, brief responses are sufficient.

The purpose of this questionnaire is twofold: 1) to give application reviewers a clearer introduction to the applicant team behind each school proposal in advance of the applicant interview, in order to be better prepared for the interview; and 2) to encourage board members to reflect individually as well as collectively on their common mission, purposes, and obligations at the earliest stage of school development.

**Background**

1. Name of charter school on whose Board of Directors you intend to serve: Hobgood Academy Charter School

2. Full name: Juliana Whitehurst Harris

Home Address: 1298 Airport Road, Robersonville, NC 27871

Business Name and Address: n/a

Telephone No.: 252-792-6242

E-mail address: julesharris1976@gmail.com

3. Brief educational and employment history.

I have a Bachelor of Science degree in Birth thru Kindergarten Education with a Master’s in School Administration. I have also obtained a K-6 elementary education certification and a K-12 Reading Specialist certification. I taught kindergarten in Edgecombe, Pitt, and Martin Counties over a period of 18 years, and am currently employed by Beaufort County Schools as an Assistant Principal at Eastern Elementary. During my stent in education, I have worked closely with the Office of Early Learning by taking part in multiple initiatives including the Prek-K Demonstration Program and FirstSchool.

4. Have you previously served on a board of a school district, another charter school, a non-public school or any not-for-profit corporation?

No:

Yes:

5. How were you recruited to join this Board of Directors? Why do you wish to serve on the board of the proposed charter school?

I was asked to become part of the Hobgood Academy Board of Directors by current Directors because of my experience in public education and my commitment to the success of the transition of Hobgood Academy to Hobgood Academy Charter. My career has been spent serving children in Title 1 Schools in eastern NC, and much of my professional development has been working on how to improve school experiences for such learners.

I wish to serve on the board of Hobgood Academy Charter to initially get the school established at which time I will transition to the role of lead administrator.

6. What is your understanding of the appropriate role of a public charter school board member?  
The role of a public school charter board member is to insure all federal and state guidelines are followed and to assist in the development of any policies and procedures that insure the well-being of the school, staff, students, and families served. The role includes representing the school at-large, not that of any individual or group.
7. Describe any previous experience you have that is relevant to serving on the charter school's board (e.g., other board service). If you have not had previous experience of this nature, explain why you have the capability to be an effective board member.

I previously served on the NC Association for the Education of Young Children's governing board for a term of 3 years. During that term, I worked on the policy committee to insure policies were in place to support the work of the organization. As the northeast representative for the state, I also worked to recruit members for the organization and to bring concerns from my region back to the governing board for discussion and action, if necessary. Although I am no longer a current board member, I am still a very active participant in the organization and am called upon to present at the state conference each year. I have also written articles related to the early childhood field for the organization's statewide newsletter. With the previous experience of being a board member, I feel well-prepared to serve on the Board of Directors for Hobgood Academy Charter and feel that my experience as a former board member and educator will be beneficial to the overall success of Hobgood Academy Charter School.

8. Describe the specific knowledge and experience that you would bring to the board.  
I bring to the board a wealth of information regarding policies and procedures of current NC public schools having been both a classroom teacher and administrator. Having served on larger committees at the state level such as the K-3 Formative Assessment review panel and the Pathways to Reading on Gradelevel by 3rd Grade, I have insight into the current practices and policies being discussed at the state level as well as insight into what is on the horizon in regards to public schools. I bring 18 years of classroom experience working with economically disadvantaged students from the school districts in which we hope to serve at Hobgood Academy Charter School. As a current administrator, I have further insight into the management side of schools as it relates to budgets, schedules, discipline, policies related to exceptional children, testing and accountability, and curriculum which are crucial to the day-to-day workings of a school. As a board member, this will allow me to insure the school is on track and that school goals are well within the parameters of effective and legal education practices.

### **School Mission and Program**

1. What is your understanding of the school's mission and guiding beliefs?  
The goal of Hobgood Academy Charter School is to provide an educational experience for students that is holistic in nature – addressing the developmental domains of learners, not just the academic learner, and to graduate students who are healthy both physically and emotionally so they are prepared for their next challenges in life in a greater capacity than higher education or work. The goal is to also insure our students from economically disadvantaged homes receive an education that allows them to excel beyond the level that surrounding districts are currently demonstrating.

The guiding beliefs of Hobgood Academy Charter include the following:

-All students should be provided opportunities equivalent to or of higher quality than that of traditional public schools or private schools. Providing families with expanded choices for education in an economically depleted area will provide benefits for families and the community at-large.

-Students should be taught in a means that is not simply focused on academics. In order for a student to excel academically, he or she must be physically and emotionally healthy in order to meet the challenges faced in learning new content.

-Family and community involvement and engagement are critical to the success of students. Developing a reciprocal partnership with families and communities is a benefit for all stakeholders.

-Students living in economically disadvantaged homes face long-term challenges of poverty – diseases such as heart disease and diabetes, mental illness, and breaking the cycle of poverty. By creating a school that provides an intentional focus on supporting the physical and emotional well-being of students, the goal is to minimize the risk of students graduating without the tools necessary to break out of the poverty cycle.

2. What is your understanding of the school's proposed educational program?

The focus of the school's educational program is to provide an education that focuses on the developmental domains of learning – cognitive, physical, social, and emotional development. A specific emphasis on healthful living will be incorporated through continuous opportunities for physical activity both within the walls of the classroom and beyond. Students will have opportunities for outdoor learning experiences with school gardens where they will be provided opportunities to grow healthy foods and taste them, as well, encouraging them to expand on the variety of healthy foods they eat.

Students will be taught from a strengths-based approach where student interest is incorporated with hands-on learning experiences that include in-depth projects to demonstrate learning. Students will have opportunities to interact and learn in multi-age groups and older students will have opportunities to mentor younger students in a variety of ways including the development of outdoor learning gardens and other physical activity experiences.

The school will serve all students in grades K-12 with all levels of ability. The school will offer services for children with special needs including disabilities, English Language learners, and academically gifted students. The school's target population includes students from economically disadvantaged homes. The academic design of the school consistently provides instruction that is research-based to insure students from economically disadvantaged homes receive the specific types of learning strategies proven to be successful with this population of children.

The school will use ongoing assessments within the scope of regular instruction as well as state mandated assessments to assess the progress of students and to guide the instructional staff in areas of needed growth.

3. What do you believe to be the characteristics of a successful school?

A successful school is first and foremost a place where learning successfully takes place as evidenced by student performance, graduation rates, and attendance rates. It is also a place where students, families, and the community feel welcome and have a sense of ownership in the goings-on of the school. A successful school is also a place where the staff feel valued and are challenged to stretch their own professional learning, modeling the tenets of being a lifelong learner. A successful school is a place where students thrive, growing into adults that are well-prepared for their future endeavors after graduating from high school.

A successful school is also a place that is well-managed in terms of finances, personnel, and maintenance. It should be a place that is safe, well-maintained, and necessary resources are available for those who work and learn there. It is equipped to meet the needs of all learners and provide supports to the families it serves.

4. How will you know that the school is succeeding (or not) in its mission?

As a board member, it is imperative that I am connected to the school by being present. Attendance at school functions and attendance at board meetings will provide me with firsthand knowledge of the climate and management of the school. During board meetings, insuring there is clarity and transparency in the school's finances, management, academic endeavors, and policies will be crucial to monitoring the school's success.

As a board member, it will be evident that the school is succeeding based on the following:

- Student achievement is on track to meet determined goals.
- Students are graduating with clear plans for future endeavors.
- Attendance rates are high (90-95%).
- Discipline referrals are handled effectively and suspension rates are low.
- Family and community engagement in the school is evident and frequent.

## **Governance**

1. Describe the role that the board will play in the school's operation.

The role of the board is to monitor to insure all federal and state guidelines are being followed and to insure sound financial decision-making is taking place to keep the school in good standing. The board is responsible for evaluating the lead administrator. The board will review and make a determination in discipline issues concerning suspension and expulsion when a parent requests a due process hearing. The board is responsible for developing and amending policies to insure the well-being of the school.

2. How will you know if the school is successful at the end of the first year of operation?

At the end of the first year of operation, school success can be determined by proficiency rates on state assessments being above that of the surrounding school districts. School success will be determined by the positive financial standings of the school and the number of students remaining enrolled in the school for the coming year. School success can also be determined by minimal teacher turnover rates.

3. How will you know at the end of five years of the schools is successful?

Progress in the school's well-being will be monitored constantly. At the end of 5 years, the school should be able to demonstrate 90% of students meeting proficiency on state assessments, the graduation rate should be at 95% or better, the attendance rate should be 96% or better, and enrollment should be at 100% capacity. Stakeholder surveys should reflect high levels of satisfaction which includes 90% teacher retention rates or better.

4. What specific steps do you think the charter school board will need to take to ensure that the school is successful?

The charter school board will need to be diligent in reviewing all financial reports to insure expenditures are warranted and necessary. The charter school board will need to have a positive working relationship with the head of school and maintain constant conversation about the development of the school and progress, especially during the first 2 years of opening. The board will need to insure follow-through

from each level of governance of the school and not be hesitant to question when something seems amiss.

5. How would you handle a situation in which you believe one or more members of the school's board were acting unethically or not in the best interests of the school?

I would ask to meet with the Board Chair to make him/her aware of the situation initially. I would offer to meet with the member in question and the Board Chair to discuss the matter with the member in question. Should there be possible legal concerns, I would encourage the Board Chair to seek legal advice before proceeding.

\*Please include the following with your Information Form

- a one page resume
- a national criminal background check

\*If you responded within the application that disciplinary action has been taken against any past or present professional licenses, provide a detailed response below outlining the disciplinary action taken and the license validity.

**Certification**

I, Juliana Harnis, certify to the best of my knowledge and ability that the information I am providing to the North Carolina State Board of Education as a prospective board member for Hobgood Academy Charter School is true and correct in every respect.

Juliana Harnis  
Signature

9-11-17

Date

# DOROTHY ROGERS ARMSTON

446 East Second Street, Hobgood N.C. 27843

252-826-5022

## EDUCATION:

West Martin High School, Oak City, NC 27857      Graduated 1961

Edgecombe Community College, Tarboro, NC 27886      Two (2) years

## WORK EXPERIENCE:

Sara Lee Bakery, Tarboro, NC 27886      Ten (10) years

Air System Components, Tarboro, NC 27886  
UPS And Fed-X Shipping      Seven (7) years

Shadows Incorporated, Robersonville, NC 27871      Two (2) years

RETIRED:      May 12 ,2006

## CHURCH:

### **James Mount Pilgrim Missionary Baptist**

Secretary of Deaconess Ministry

Assistant Financial Secretary

Deaconess

Choir Member

**Appendix F:**

**Charter School Board Member Information Form**

***Note:** To be completed individually by each proposed founding charter school board member. All forms must be signed by hand.*

Serving on a public charter school board is a position of public trust and as a board member of a North Carolina public charter school; you are responsible for ensuring the quality of the school’s entire program, competent stewardship of public funds, and the school’s fulfillment of its public obligations and all terms of its charter.

As part of the application for a new charter school, the State Board of Education requests that each prospective board member respond individually to this questionnaire. Where narrative responses are required, brief responses are sufficient.

The purpose of this questionnaire is twofold: 1) to give application reviewers a clearer introduction to the applicant team behind each school proposal in advance of the applicant interview, in order to be better prepared for the interview; and 2) to encourage board members to reflect individually as well as collectively on their common mission, purposes, and obligations at the earliest stage of school development.

**Background**

1. Name of charter school on whose Board of Directors you intend to serve: Hobgood Academy Charter School

2. Full name: Dorothy Rogers Armston

Home Address: 446 E. 2<sup>nd</sup> Street, Hobgood, NC 27843

Business Name and Address: n/a

Telephone No.: 252-826-5022

E-mail address: n/a

3. Brief educational and employment history.

I graduated high school from West Martin High School in Oak City, NC. I attended Edgecombe Community College to pursue a degree in business. I worked at Sarah Lee in production, UPS as a small package handler, and FedEx as a small package handler. I also mentored disturbed young adults for Shadows, Inc. in Robersonville.

4. Have you previously served on a board of a school district, another charter school, a non-public school or any not-for-profit corporation?

No:       Yes:

5. How were you recruited to join this Board of Directors? Why do you wish to serve on the board of the proposed charter school?

I was asked by a friend who served on the Hobgood Academy Board of Directors and on the Town of Hobgood Planning and Adjustments Boards. I joined the board in order to work with others to help serve the needs of our local children in our community and improve the school.

6. What is your understanding of the appropriate role of a public charter school board member?

A public charter school board member should have a duty to serve with the rest of the board as a team to improve the educational opportunities for the children in the community and to govern the public charter school operations to ensure compliance with all applicable laws.

7. Describe any previous experience you have that is relevant to serving on the charter school's board (e.g., other board service). If you have not had previous experience of this nature, explain why you have the capability to be an effective board member.

I have served as a board member of our Deaconess Auxiliary Group at my church and on the Town of Hobgood Planning and Adjustments Boards.

8. Describe the specific knowledge and experience that you would bring to the board.

I have developed a strong work ethic and the ability to listen and make decisions based on what is right. I also have experience raising and educating my son as a working parent. Based on my years of experience, I also will strive to ensure the community understands the importance of proper support for education through love, goal setting and financial support.

### **School Mission and Program**

1. What is your understanding of the school's mission and guiding beliefs?

I believe the mission of Hobgood Academy Charter School is that all students can successfully learn in a small group setting that will address their academic, physical and emotional needs.

2. What is your understanding of the school's proposed educational program?

Hobgood Academy Charter School is going to teach the basics like reading, writing and math, but also teach students how to apply them in today's world. The school also believes that the students will learn better if they are healthy, feel safe and have a sense of belonging to the community. The school also believes that focusing on all parts will show better results.

3. What do you believe to be the characteristics of a successful school?

A successful school will have a clear and shared focus, high standards and expectations for all students and be led by effective leaders.

4. How will you know that the school is succeeding (or not) in its mission?

We can know the school is succeeding by the students' measured outcomes as stated in the educational plan, how the families continue to support the school, and effective communications from the school regarding performance.

### **Governance**

1. Describe the role that the board will play in the school's operation.

The role of the board members is to help make decisions and uphold policies that will contribute to the education and well-being, of the students as well as their overall success.

2. How will you know if the school is successful at the end of the first year of operation?

We will know the school is successful by evaluating test results, seeing continued re-enrollment and growth, and graduation rates.

3. How will you know at the end of five years of the schools is successful?

At the end of five years, the school will be successful if it has met their projected growth and goals.

4. What specific steps do you think the charter school board will need to take to ensure that the school is successful?

The board will create and uphold policies that are lawful and fair to all students. It will also critically evaluate reports to the board to see if changes need to be made.

5. How would you handle a situation in which you believe one or more members of the school's board were acting unethically or not in the best interests of the school?

I would approach the Chair of the Board and ask that we add some time on the agenda to discuss board behavior. If it would be the chair, I would just ask for time on the agenda to discuss an unspecified issue. The board could then discuss the behavior. Any decisions or actions would have to be made in an open session.

\*Please include the following with your Information Form

- a one page resume
- a national criminal background check

\*If you responded within the application that disciplinary action has been taken against any past or present professional licenses, provide a detailed response below outlining the disciplinary action taken and the license validity.

**Certification**

I, Dorothy R. Armston, certify to the best of my knowledge and ability that the information I am providing to the North Carolina State Board of Education as a prospective board member for Hobgood Academy Charter School is true and correct in every respect.

Dorothy R. Armston  
Signature

9-11-17  
Date

**Brandon D. Lanier**  
**312 Scotwoods Drive**  
**Enfield NC 27823**  
**252-678-0441 – [brandonlanier56@yahoo.com](mailto:brandonlanier56@yahoo.com)**

### **Education**

Master of Public Administration: Public Administration, 2014  
East Carolina University – Greenville NC

Graduate Certificate: Security Studies, 2013  
East Carolina University – Greenville NC

Bachelor of Science: Criminal Justice, 1998  
East Carolina University – Greenville NC

Associate in Arts, 1996  
Halifax Community College- Weldon NC

### **Professional Certifications**

NC Certified Assisted Living Administrator: NC DHHS 2016

Advanced Law Enforcement Certification: NC Department of Public Safety 2005

### **Professional Summary**

Affinity Living Group – Certified Assisted Living Administrator - 2016 to Current

Signature Healthcare – Regional Marketing Director – 2014 to 2016

COECO – Regional Account Executive - 2013 to 2014

NC Department of Public Safety – Special Agent – 2000 to 2013

### **PROFESSIONAL ORGANIZATIONS**

Hobgood School Board of Trustees – Vice Chairman

Hobgood Athletic Committee- Chairman

Scotland Neck First Baptist Church Youth Advisory Committee

Scotland Neck Business Association - Member

**Appendix F:**

**Charter School Board Member Information Form**

**Note:** To be completed individually by each proposed founding charter school board member. All forms must be signed by hand.

Serving on a public charter school board is a position of public trust and as a board member of a North Carolina public charter school; you are responsible for ensuring the quality of the school’s entire program, competent stewardship of public funds, and the school’s fulfillment of its public obligations and all terms of its charter. As part of the application for a new charter school, the State Board of Education requests that each prospective board member respond individually to this questionnaire. Where narrative responses are required, brief responses are sufficient.

The purpose of this questionnaire is twofold: 1) to give application reviewers a clearer introduction to the applicant team behind each school proposal in advance of the applicant interview, in order to be better prepared for the interview; and 2) to encourage board members to reflect individually as well as collectively on their common mission, purposes, and obligations at the earliest stage of school development.

**Background**

1. Name of charter school on whose Board of Directors you intend to serve: Hobgood Academy Charter School
2. Full name: Brandon Darrell Lanier  
Home Address: 312 Scotwoods Drive, Enfield NC 27823  
Business Name and Address: Affinity Living Group: The Scotland House, Scotland Neck NC 27874  
Telephone No.: 252-678-0441  
E-mail address: Scot.adm@affinitylivinggroup.com

3. Brief educational and employment history.  
Masters of Public Administration – East Carolina University  
BS Criminal Justice – East Carolina University  
Affinity Living Group – Certified Assisted Living Administrator - 2016 to current  
Signature Healthcare – Regional Marketing Director – 2014 to 2016  
COECO – Regional Account Executive -2013 to 2014  
NC Department of Public Safety – Special Agent – 2000 to 2013

4. Have you previously served on a board of a school district, another charter school, a non-public school or any not-for-profit corporation?

No:       Yes:

5. How were you recruited to join this Board of Directors? Why do you wish to serve on the board of the proposed charter school?  
Current Board member who will transition to the Hobgood Academy Charter Board. I believe in the mission and vision of the proposed charter application and want to ensure all students receive a quality education.

6. What is your understanding of the appropriate role of a public charter school board member?  
To serve in an advisory and hands on capacity to ensure the policies, procedures and total governance of the proposed charter is successful.

7. Describe any previous experience you have that is relevant to serving on the charter school’s board (e.g., other board service). If you have not had previous experience of this nature, explain why you have the capability to be an effective board member.  
Hobgood Academy Board of Trustees – Current

Hobgood Academy Athletic Board – Chairman – current  
Scotland Neck Business Association

8. Describe the specific knowledge and experience that you would bring to the board.  
Current Professional Executive with broad knowledge related to budgeting, human resources, recruiting and marketing.

### **School Mission and Program**

1. What is your understanding of the school's mission and guiding beliefs?  
Small class setting, holistic approach, targeting the student's physical, emotional well-being, community involvement and establishing patterns for healthy living.
2. What is your understanding of the school's proposed educational program?  
The proposed educational program will be designed to ensure the mission of the charter is successful.
3. What do you believe to be the characteristics of a successful school?  
Strong and dedicated staff with clear policies and procedures. Strong Leadership.
4. How will you know that the school is succeeding (or not) in its mission?  
Student performance and engagement. To review the students baseline and look for improvement.

### **Governance**

1. Describe the role that the board will play in the school's operation.  
To serve as leaders and advisors to ensure the mission and vision is successful.
2. How will you know if the school is successful at the end of the first year of operation?  
Evaluation of metrics
3. How will you know at the end of five years of the schools is successful?  
Growth of school, academic improvement of students, staff and student retention.
4. What specific steps do you think the charter school board will need to take to ensure that the school is successful?  
To initially set the charter up correctly. Think outside the box academically, acquire strong leadership. Additional training annually.
5. How would you handle a situation in which you believe one or more members of the school's board were acting unethically or not in the best interests of the school?  
Communicate and determine if board members need to be removed.

\*Please include the following with your Information Form

- a **one page** resume
- a national criminal background check

\*If you responded within the application that disciplinary action has been taken against any past or present professional licenses, provide a detailed response below outlining the disciplinary action taken and the license validity.

**Certification**

I, Brandon Lanier, certify to the best of my knowledge and ability that the information I am providing to the North Carolina State Board of Education as a prospective board member for \_\_\_\_\_ Charter School is true and correct in every respect.

Brandon D. Lanier

9/11/17

Signature

Date

# Cassandra C. Dolberry

Post Office Box 41

Hobgood, North Carolina 27843

## EDUCATION

St. Augustine College, Raleigh, NC	BA, Business Management
Edgecombe Community College, Tarboro, NC	AA, Office Systems
Raleigh School of Data Processing, Raleigh, NC	Diploma, Data Processing

## WORK HISTORY

1981-Present	Town of Scotland Neck Post Office Box 537 Scotland Neck, NC 27874	Office Assistant, Utility Clerk
1981-1991	Thomas Dental Office	Office Assistant
1989-1991	Halifax County Schools	Teacher Assistant

## AFFILIATIONS

Hobgood Citizens Group – Board Member  
Halifax County Education Board  
Cherry’s Chapel Church – Fundraising Chairperson

**Appendix F:**

**Charter School Board Member Information Form**

***Note:** To be completed individually by each proposed founding charter school board member. All forms must be signed by hand.*

Serving on a public charter school board is a position of public trust and as a board member of a North Carolina public charter school; you are responsible for ensuring the quality of the school's entire program, competent stewardship of public funds, and the school's fulfillment of its public obligations and all terms of its charter.

As part of the application for a new charter school, the State Board of Education requests that each prospective board member respond individually to this questionnaire. Where narrative responses are required, brief responses are sufficient.

The purpose of this questionnaire is twofold: 1) to give application reviewers a clearer introduction to the applicant team behind each school proposal in advance of the applicant interview, in order to be better prepared for the interview; and 2) to encourage board members to reflect individually as well as collectively on their common mission, purposes, and obligations at the earliest stage of school development.

**Background**

1. Name of charter school on whose Board of Directors you intend to serve: Hobgood Academy Charter School

2. Full name: Cassandra Camp Dolberry

Home Address: PO Box 21, Hobgood, NC 27886

Business Name and Address: n/a

Telephone No.: 252-904-0201

E-mail address: dolberryvictory@aol.com

3. Brief educational and employment history.

I received a BS in Business Administration from St. Augustine College, an AA for Office Systems at Edgecombe Community College, and a diploma in Computer Systems from the Raleigh School of Data Processing. From 1989 to 1999, I worked as a Teacher Assistant for Halifax County Schools. From 1998 to 1999 I worked as an Office Assistant for the Thomas Dental Office. I have also worked from 1991 to present day, for the Town of Scotland Neck, starting as a dispatcher, moving to an office assistant and finally promoted to a Utility Clerk.

4. Have you previously served on a board of a school district, another charter school, a non-public school or any not-for-profit corporation?

No:       Yes:

5. How were you recruited to join this Board of Directors? Why do you wish to serve on the board of the proposed charter school?

I was asked by a current board member to join. I want to serve on the Board of Directors because there is an extreme need for educational improvements and opportunities in our area and I want to be a part of an organization that helps improve our community.

6. What is your understanding of the appropriate role of a public charter school board member?

Board members of a public charter school should advise and help formulate the strategic direction of the school. This includes financial oversight and progress to achieving identified goals.

7. Describe any previous experience you have that is relevant to serving on the charter school's board (e.g., other board service). If you have not had previous experience of this nature, explain why you have the capability to be an effective board member.

I worked with the Halifax County Educational Foundation as a board member. In that role, I managed the financials and raised supplemental funds for Halifax County Public Schools. These funds were invested and provided returns to help fund Halifax County Public School teacher needs that were not provided for in the budget. I've also worked with the Hobgood Citizen Group for the past 9 years as the Secretary, Treasurer, and most recently Chair of Fundraising Committee.

8. Describe the specific knowledge and experience that you would bring to the board.

I bring insight regarding overall management, teamwork, an understanding of what is required of an educational board, and experience with financial oversight of non-profit organizations

### **School Mission and Program**

1. What is your understanding of the school's mission and guiding beliefs?

The school provides an overall approach to educating the whole child; academically, physically, emotionally, and socially. The school will educate all students from k-12 and from EC to Academically Gifted.

2. What is your understanding of the school's proposed educational program?

The school's education program will provide a quality education in small groups addressing the core education, foreign language, and healthy living. The curriculum intends to improve students' social, emotional, physical and academic progress.

3. What do you believe to be the characteristics of a successful school?

Successful schools would work to develop additional educational opportunities for their students such as additional foreign languages and field trips. Successful schools would have healthy, well-adjusted students. A successful school would also have the staff, educators, board members and families all working together to meet student needs.

4. How will you know that the school is succeeding (or not) in its mission?

We will see the results in NC ABC Accountability school performance report card, maintain full school enrollment, and improving student grades from year to year.

### **Governance**

1. Describe the role that the board will play in the school's operation.

The board's role is to review and monitor the performance of the school and principal to ensure excellence. The board must also ensure that the principal has everything needed to operate the school successfully.

2. How will you know if the school is successful at the end of the first year of operation?

The board will know the school is successful the after completion of the first year by reviewing the grades, test results, student attendance, and the report from the principal that describes the overall performance of the teachers and staff as well as a plan of action for appraisals that are below proficient.

3. How will you know at the end of five years of the schools is successful?

Each year should show academic improvements, high levels of proficient performance for teachers and staff, and full student enrollment with a waitlist

4. What specific steps do you think the charter school board will need to take to ensure that the school is successful?

The charter school board would need to listen to teachers, students, families and the principal in order to assess their needs. Then, the board would need to act to meet these needs and obtain these resources to ensure success.

5. How would you handle a situation in which you believe one or more members of the school's board were acting unethically or not in the best interests of the school?

If the member was the chair of the board, during the next meeting, I would ask to move to a closed session in order to discuss the behavior. If the behavior was of another board member, I would talk to chair first so the chair can move to a closed session to bring up and discuss. In either case, no action could be taken in closed session and the board would have to move to an open session to vote on any action.

\*Please include the following with your Information Form

- a **one page** resume
- a national criminal background check

\*If you responded within the application that disciplinary action has been taken against any past or present professional licenses, provide a detailed response below outlining the disciplinary action taken and the license validity.

**Certification**

I, Kassandra C Dolberry, certify to the best of my knowledge and ability that the information I am providing to the North Carolina State Board of Education as a prospective board member for Holzgold Academy Charter School is true and correct in every respect.

Kassandra C Dolberry  
Signature

9/11/2017  
Date

# Nicole B Flanary

PO Box 154, Hobgood, NC • Phone (252) 813-3530 • email [nbf0315@earthlink.net](mailto:nbf0315@earthlink.net)

## Education

**East Carolina University** – May 2009 - Greenville, NC -BSBA – Management with a concentration in Small Business and Entrepreneurship  
Graduated Magna Cum Laude (3.67 GPA), Chancellor’s List, Dean’s List, Golden Key Society  
BPWN Most Promising Female Entrepreneur Finalist 2009  
ACRA Undergraduate Student Retail Analysis Competition – First Place Nationally 2009

**North Carolina State University** – Multi disciplinary International Studies

**Continuing Education** - Seminars, workshops, lectures & research regarding economics, business & employment law, leadership & mgmt

## Qualifications, Skills and Proficiencies

- MS Office (multiple versions for Windows and Mac) – Over 16 year’s experience
  - highly proficient - Word, Excel, PowerPoint, and Outlook, intermediate proficiency Access
  - Experience creating spreadsheet reports, including pivot tables (over 16 years)
- Maximo experience (3.5 years) CAPS experience (3 years) Purchasing – PR/PO’s and reviewing proposals (3.5 years)
- Over 16 years experience excelling in rapidly evolving and changing industries and environments
- Experience processing and maintaining time reporting for numerous employees (8 years)
- Over 10 years total experience in accounting, purchasing and inventory management
- Experience setting up and managing multiple filing systems
- Extensive experience working in a self-directed environment, maintaining multiple priorities while reporting to several different people
- Consistently demonstrate a sense of urgency and timeliness, as well as maintaining confidentiality
- Proven strong organizational skills

## Professional Experience

**04/2016 to Present**      **Duke Energy Renewables, Tarboro, NC**      **Site Resource Coordinator**

- Using Maximo, obtain quotes, create PR’s, send PO’s and receive services and materials as required.
- Using CAPS, verify and approve invoices and related payments. Route invoices and payments that are over the DOA.
- Maintain inventory for team with cycle counts and reconciliations.
- Track and Facilitate planning and scheduling activities
- Document control and records retention
- Communicate with managers, co-workers, customers, land owners, corporate departments, contractors and local/state officials

**10/2013 to 04/2016**      **SunEnergy1, LLC - Bethel NC**      **Site Administrator**

- Coordinate payroll, HR, vendor services and management reporting for a large (80MW) construction site as well as several smaller sites
- Assisted coordination of subcontractors and assisted Spanish translations
- Obtain quotes and purchase materials for site as required
- Develop accounting and HR procedures with corporate headquarters and tools to implement the aforementioned
- Support Executive personnel as required with data analysis and project reporting
- Manage administrative team of 4 assistants

**08/2010 to 08/2013**      **SePRO Corporation – Rocky Mount, NC**      **Office Manager/Production Support/Purchasing**

- *Administrative Role* - secured grant, streamlined the new hire orientation/documentation including HazCom training, developed EAP for multiple sites, coordinated events for vendors, customers and intra-company personnel- international and domestic, assisted moving distribution to a larger facility and implementation of new ERP system
- *Production Role* - managed production internally and at 3<sup>rd</sup> party manufacturing facilities, reported production, reconciled inventory
- *Purchasing* – Sourced several components and negotiated pricing, developed packaging solutions for products
- *Other* – back up for Customer Service, coordinated freight and logistics for manufacturing and distribution, and managed inventory for multiple third party warehouses.

**08/2000 to 03/2005**      **RBC Centura – Rocky Mount, NC**      **Collection Specialist**

- Resolved payment problems with Retail and Commercial clients
- Met and exceeded team performance goals as well as stretch goals
- Collaborated with branches regarding portfolio delinquencies and potential losses
- Discussed potential losses over \$100,000 with regional managers and evaluated cost/benefit of reclaiming collateral

**Appendix F:**

**Charter School Board Member Information Form**

***Note:** To be completed individually by each proposed founding charter school board member. All forms must be signed by hand.*

Serving on a public charter school board is a position of public trust and as a board member of a North Carolina public charter school; you are responsible for ensuring the quality of the school's entire program, competent stewardship of public funds, and the school's fulfillment of its public obligations and all terms of its charter.

As part of the application for a new charter school, the State Board of Education requests that each prospective board member respond individually to this questionnaire. Where narrative responses are required, brief responses are sufficient.

The purpose of this questionnaire is twofold: 1) to give application reviewers a clearer introduction to the applicant team behind each school proposal in advance of the applicant interview, in order to be better prepared for the interview; and 2) to encourage board members to reflect individually as well as collectively on their common mission, purposes, and obligations at the earliest stage of school development.

**Background**

1. Name of charter school on whose Board of Directors you intend to serve: Hobgood Academy Charter School

2. Full name: Nicole Flanary

Home Address: PO Box 154, Hobgood, NC 27843

Business Name and Address: n/a

Telephone No.: 252-813-3530

E-mail address: nflanary@earthlink.net

3. Brief educational and employment history.

As a child, I attended public schools in Plymouth, WI and graduated from East Wake High School in Wendell, NC. I attended NC State my freshman year seeking a multidisciplinary degree in International Studies. I didn't finish my degree until my children were older and I graduated from East Carolina University with a BS in Business Management concentrating on Small Business and Entrepreneurship. I have worked in the problem loan areas in banking, office management and purchasing for retail, manufacturing and construction businesses. Currently I am a site resource coordinator for Duke Energy Renewables and have responsibilities reviewing budgets, purchasing, inventory control and management, and anticipating future needs for the teams that support my 15 sites.

4. Have you previously served on a board of a school district, another charter school, a non-public school or any not-for-profit corporation?

No:       Yes:

5. How were you recruited to join this Board of Directors? Why do you wish to serve on the board of the proposed charter school?

I was recruited by a previous board member. I initially joined the board because I was very concerned about the future of Hobgood Academy as a private school. Over the previous 12 years as a parent, I observed the economic decline in the local area and the resulting loss of jobs. Families were just unable to keep paying private tuition which gave the school even less funds to offer financial assistance. We have helped many

families work on Opportunity Scholarships, but the funds are limited. Local LEA's are having difficulties with the increased number of families falling into poverty. Now, I remain on the board because after looking at the state of the local economy and the local challenges faced by our LEA's, I want to do something about it. This is the perfect opportunity to provide educational opportunities to our community. We are located in an area that is remote and difficult for the local LEA's to serve efficiently. To improve the lives of our local community, we need economic development. Any type of economic development or growth is dependent on a well-educated and healthy work force.

6. What is your understanding of the appropriate role of a public charter school board member?  
A public charter school board member should be dedicated to responsible governance and oversight of the public charter school of operations. The school will be operating with government allotted funds and will be held accountable for the fiscally sound use of these funds to educate our children in accordance with all applicable laws and policies.
7. Describe any previous experience you have that is relevant to serving on the charter school's board (e.g., other board service). If you have not had previous experience of this nature, explain why you have the capability to be an effective board member.  
I have served as the Chair of the Town of Hobgood's Planning Board and Vice Chair of the Adjustments boards for over five years. I have also served on the Hobgood Academy Board of Trustees for over two years.
8. Describe the specific knowledge and experience that you would bring to the board.  
My experience in the business world gives me firsthand knowledge and experience with accountability and fiscal responsibility. If operations are not managed and supported with an eye on the bottom line, organizations will not be around long. I have worked with budget development and compliance. Finally, years of experience have taught me the value of integrity and hard work. Organizations that do not operate ethically or operate with only lukewarm effort and enthusiasm do not last long. Oftentimes they sabotage their future by taking shortcuts to look good in the short term but are not sustainable in the long term. They also tend to alienate their supporters and employees.

### **School Mission and Program**

1. What is your understanding of the school's mission and guiding beliefs?  
The school is committed to serving all children and preparing them for life not only academically, but also physically, emotionally, and socially. We want children to excel, not just "get by". We can be an integral part of our community development and well-being.
2. What is your understanding of the school's proposed educational program?  
The educational program will approach teaching and learning as an active, ongoing process with high expectations for performance. The program will develop the whole child, academically, physically, emotionally and socially. Expectations for high academic performance will not be realized if the child maintains an unhealthy lifestyle, and doesn't have the emotional and social skills to navigate daily life.
3. What do you believe to be the characteristics of a successful school?  
Successful schools operate in a fiscally responsible manner with a commitment to investing in our children's long term success. A successful school will have a sense of family and teamwork. Everyone has an integral role in educating our children and should be valued for their contribution.
4. How will you know that the school is succeeding (or not) in its mission?  
If we are succeeding in our mission, we will see an increase in performance metrics overall. Individual student success will be observed not only in the continued academic improvement and achievement

throughout the years, but also with the display of responsible, caring daily interactions with other students, school personnel and the community.

## **Governance**

1. Describe the role that the board will play in the school's operation.  
The board creates policies that align with both the mission statement of the school and the multitude of legal requirements. These policies will be implemented in the daily operations by the Lead Administrator (Principal).
2. How will you know if the school is successful at the end of the first year of operation?  
Some indicators of a successful first year would be a high number of returning students, a waitlist from the lottery, successful fiscal performance resulting in a positive financial balance, results of student assessments showing adequate growth, positive results from satisfaction surveys.
3. How will you know at the end of five years of the schools is successful?  
At the end of five years, we should see adequate cumulative yearly student growth, positive community and family feedback, and meeting goals.
4. What specific steps do you think the charter school board will need to take to ensure that the school is successful?  
The board will need to assess the performance of its policies and reevaluate the policies if expected results are not seen. The board will need to listen to feedback and maintain a watchful eye for current performance and possible impacts of future developments.
5. How would you handle a situation in which you believe one or more members of the school's board were acting unethically or not in the best interests of the school?  
I would try to make sure my belief was first based on credible evidence, not conjecture or gossip. If, after reflection, I still believed there may be a situation with actions that may possibly be unethical or contrary to the best interest of the school, I would ask the chair of the board to enter into an executive session at the next board meeting to discuss board actions. If the actions were possibly involving the chair, I would just ask for an executive session without disclosing a reason. If it was a matter of great urgency, I would push for a called meeting.

\*Please include the following with your Information Form

- a **one page** resume
- a national criminal background check

\*If you responded within the application that disciplinary action has been taken against any past or present professional licenses, provide a detailed response below outlining the disciplinary action taken and the license validity.

**Certification**

I, Nicole Flanary, certify to the best of my knowledge and ability that the information I am providing to the North Carolina State Board of Education as a prospective board member for Hobgood Academy Charter School is true and correct in every respect.

Nicole Flanary  
Signature

9/19/17  
Date

Rhonda H. Mayer  
2331 Mayo Farm Road  
Hobgood, North Carolina 27843  
(252) 883-9827  
[rhondamayer1110@gmail.com](mailto:rhondamayer1110@gmail.com)

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### Education

Deep Creek High School, Chesapeake, VA	1972
Longwood College, Farmville, VA	1972-1974
College of William & Mary, Williamsburg, VA	1973
East Carolina University, Greenville, NC BS Intermediate Education	1987
Numerous Continuing Education Units	1988-present

### Employment

Chilton Corp, Dallas, TX Accounting Clerk	1974-1975
VA Dept of Highways, Richmond, VA Engineering Technician	1976-1978
Self Employed, Hobgood, NC Farmer	1979- present
Edgecombe County Public Schools, Tarboro, NC Teacher	1987-1997
Hobgood Academy. Hobgood, NC Teacher	1997-2013

### Affiliations

- Hobgood Academy Board of Directors (Secretary)
- Hobgood Players (Manager)
- Hobgood Revitalization Committee (Vice President)
- Hobgood United Methodist Church (Administrative Council)
- Hobgood United Methodist Women (President)
- Kappa Delta Pi (Member)
- Sylvan Heights Bird Park (Member)
- United Women's Prayer Corps (Member)

### **Charter School Board Member Information Form**

*Note: To be completed individually by each proposed founding charter school board member. All forms must be signed by hand.*

Serving on a public charter school board is a position of public trust and as a board member of a North Carolina public charter school; you are responsible for ensuring the quality of the school's entire program, competent stewardship of public funds, and the school's fulfillment of its public obligations and all terms of its charter.

As part of the application for a new charter school, the State Board of Education requests that each prospective board member respond individually to this questionnaire. Where narrative responses are required, brief responses are sufficient.

The purpose of this questionnaire is twofold: 1) to give application reviewers a clearer introduction to the applicant team behind each school proposal in advance of the applicant interview, in order to be better prepared for the interview; and 2) to encourage board members to reflect individually as well as collectively on their common mission, purposes, and obligations at the earliest stage of school development.

#### **Background**

1. Name of charter school on whose Board of Directors you intend to serve: Hobgood Academy Charter School
2. [RM1]Full Name: Rhonda H Mayer  
Home Address: 2331 Mayo Farm Road, Hobgood, NC 27843  
Business Name and Address: none  
Telephone No.: 252-883-9827  
E-mail address: rhm1110@aol.com
3. Brief educational and employment history.  
I graduated from Deep Creek High School in Chesapeake, VA in June of 1972 and enrolled in Longwood College in Farmville, VA in September 1972 and attended through 1974. In the summer of 1973, I enrolled in summer sessions at the College of William & Mary in Williamsburg, VA. In 1985, I enrolled in the East Carolina School of Education in Greenville, NC and graduated in June of 1987.  
I began working as an accounting clerk at the Chilton Corporation in Dallas, Texas in 1974, moved to Richmond, VA and went to work as an engineering technician for the VA Department of Highways. In 1979 my husband and I began operating a farm. Upon graduating from ECU, I went to work as a teacher with Edgecombe County Schools in 1987, then in 1997, I was hired as a teacher at Hobgood Academy.

4. Have you previously served on a board of a school district, another charter school, a non-public school or any not-for-profit corporation?

No:  Yes:

5. How were you recruited to join this Board of Directors? Why do you wish to serve on the board of the proposed charter school?

The Board of Directors of Hobgood Academy as undergoing a transformation in 2014, and as I had recently retired, I was asked to join the Board because of my experience in education and nonprofits. I am so excited to serve on the Board of Hobgood Academy Charter School because of having the opportunity to work with such talented and visionary colleagues to develop an innovative educational community that will prepare our students to excel in their future endeavors.

6. What is your understanding of the appropriate role of a public charter school board member?

The appropriate role of a public charter school board member is to assist in creating a vision, hiring the Lead Administrator, short-term and long-term strategic planning, and in setting and monitoring measurable goals. The Board is responsible following the by-laws and ensuring that the school is in compliance the federal, state, and local laws.

7. Describe any previous experience you have that is relevant to serving on the charter school's board (e.g., other board service). If you have not had previous experience of this nature, explain why you have the capability to be an effective board member.

I have served on the Hobgood Academy, Inc. Board of Directors for the past three years and on the Administrative Council of Hobgood United Methodist Church for many years in various roles. I currently serve as Vice President of the Hobgood Revitalization Committee and Chairperson of the Annual Hobgood Cotton Festival. These duties involve marketing, fundraising, and community organization.

8. Describe the specific knowledge and experience that you would bring to the board.

I bring to the board the experience of having been employed in both private and public schools. In these positions, I have been responsible for program development and grant-writing

### **School Mission and Program**

1. What is your understanding of the school's mission and guiding beliefs?

The mission of Hobgood Academy Charter School is basically one of excellence. We will work to educate each child through a holistic approach that includes academic, physical, emotional, and social growth. We believe that every child should have the opportunity for an excellent education even economically disadvantaged rural students.

2. What is your understanding of the school's proposed educational program?

The school's proposed educational plan follows the North Carolina Standard Course of Study and is based on a project based learning model. We will use multi-age groupings and outdoor learning with an emphasis on health and wellness. Students will be evaluated by many methods including digital portfolios, and end of grade/end of course testing.

3. What do you believe to be the characteristics of a successful school?

I believe that in a successful school all students show growth in core classes and engage in positive social interactions. They exhibit a love for learning and creative problem-solving. Teachers are actively engaged as facilitators and continually seek professional development opportunities. I expect to see a good rapport between staff and involved parents, the local community should be involved, and high expectations should be the norm. Measurable goals should be set and evaluated and all stakeholders held accountable. A successful school should be fiscally sound.

4. How will you know that the school is succeeding (or not) in its mission?

I will know if the school is succeeding in its mission by careful analysis of academic evaluations, by attendance rates, by disciplinary referrals, by staff, student, parent satisfaction, and if students continue to select Hobgood Academy Charter as their school of choice.

## **Governance**

1. Describe the role that the board will play in the school's operation.

The Board of Directors of Hobgood Academy Charter School will be responsible for hiring and evaluating a Lead Administrator, short and long term strategic planning, insuring that the school is able to meet its financial obligations, setting and monitoring goals.

2. How will you know if the school is successful at the end of the first year of operation?

I will deem the school a success in the first year if students are meeting proficiency in academic areas, healthy, have a positive perception of school and themselves, and want to return. Additionally, we would have to meet our financial obligations.

3. How will you know at the end of five years of the schools is successful?

By year five, I would expect to see higher proficiency rates, more creative problems solving and life skills, higher rates of acceptance in 4 year colleges, greater opportunities for staff development, a high rate of attendance, and a low rate of disciplinary referrals.

4. What specific steps do you think the charter school board will need to take to ensure that the school is successful?

I think the two key factors that will ensure the success of the school are 1) the hiring of an outstanding Lead Administrator who embraces our vision and has the skill to make it a reality, and 2) developing a high profile marketing plan to effectively communicate our mission.

5. How would you handle a situation in which you believe one or more members of the school's board were acting unethically or not in the best interests of the school?
6. If it came to my attention that a Board member was behaving in an unethical manner, I would ask for it to be address in a closed session of the board. If it was decided that action needed to be taken, that would be acknowledged in the next open session of the board.

\*Please include the following with your Information Form

- a *one page* resume
- a national criminal background check

\*If you responded within the application that disciplinary action has been taken against any past or present professional licenses, provide a detailed response below outlining the disciplinary action taken and the license validity.

**Certification**

I, Rhonda Mayer, certify to the best of my knowledge and ability that the information I am providing to the North Carolina State Board of Education as a prospective board member for Hobgood Academy Charter School is true and correct in every respect.

Rhonda Mayer  
Signature

Sept 11, 2017  
Date

BY-LAWS OF HOBGOOD ACADEMY, INC

The Board of Directors of Hobgood Academy, Inc. ("the Corporation") does hereby create and establish the following RESTATED BY-LAWS governing the affairs of the Corporation:

1. PURPOSE.

The Corporation exists solely to serve the educational needs of families residing in or near the Town of Hobgood. Since 1970 the Corporation has served those needs by operating a private independent school for grades K-12. Now the Corporation seeks to serve those needs by operating a charter school for grades K-12 and plans to file the Application with the Office of Charter Schools for consideration.

2. BOARD OF DIRECTORS.

a. Number of Members. The Board of Directors shall be comprised of five (5) to seven (7) members.

b. Composition of Board. All current board members were solicited based on their skill set in the areas of education, finance, administration, and community involvement. Furthermore, they were selected to reflect the diversity of our community and a strong commitment to providing every student with an excellent education.

c. Terms. Each of the current Board of Directors will serve for the first three (3) years of the Charter's opening, except to the extent necessary to implement a system of staggered Directorships, in which case Directors may serve terms of less than three (3) years. Each Director may serve up to two successive terms (i.e., up to nine (9) total consecutive years) upon approval by a majority of the Board of Directors at its next meeting following the expiration of such Director's current term of office. New Directors will also serve three (3) year terms.

d. Nominations. At least thirty (30) days prior to the Annual Meeting of the Board of Directors, the Nominating Committee shall present to the Board of Directors a slate of nominees to be elected to serve on the Board of Directors at the Annual Meeting. Other candidates may be nominated from the floor, provided the nominees willingness to serve has been determined in advance of the nomination.

e. Elections. Voting Directors shall be elected at the Annual Meeting by a majority vote of the Directors present.

f. Resignation and Removal. Any Director may resign providing thirty (30) days written notice. Any Director may be removed at any time for just cause by a majority vote of the Directors then in office at a duly called meeting. Just cause shall include, without limitation, conduct such as neglect of duty failure to comply with board policies, conduct unbecoming of a board member, conviction of a crime, or charges of a crime. If a Director resigns or is removed, a new Director may be elected to fill the remaining term at the same meeting or as shortly thereafter as possible.

g. Faculty Representative. The faculty of the charter school may elect a representative to serve as an additional Non-Voting member of the Board of Directors.

### 3. MEETINGS OF THE BOARD.

a. Annual Meeting. An annual meeting of the Board of Directors of this Corporation shall normally take place in July on a date, time, and place designated by the Chairperson of the Board of Directors.

b. Election of Officers. At the annual meeting, prior to the election of new board members, a Chairman, Vice-Chairman, Secretary, and a Treasurer shall be elected from the members who will be serving in the coming year.

c. Quorum. At all meetings of the Board of Directors, the presence of a majority of the Directors shall constitute a quorum.

d. Regular Meetings. The Board of Directors shall hold regular monthly meetings and such special meetings as the Board may deem necessary.

e. Attendance by Remote Communication. Any Director may participate in a meeting by, or conduct the meeting through the use of, any reasonable and legal means of communications by which all Directors participating in the meeting may simultaneously hear each other during the meeting. A Director participating by this means is deemed present unless otherwise determined by the Board or required by the law.

f. Notice of Meetings. The location and time of regular meetings shall be posted on the website at least ten (10) days prior to the meeting. Special call meetings shall be posted at least 72 hours prior to the meeting.

g. Open Meetings. All meetings of the Board shall at all times be in compliance with Article 33C of Chapter 143 (Open Meetings) and Chapter 132 (Public Records) of the North Carolina General Statutes. Parents and interested citizens are encouraged to attend.

h. Minutes. A draft of the minutes shall be posted on the website.

### 4. CONFLICTS OF INTEREST

a. Pecuniary Interest. No member of the Board of Directors shall discuss or vote upon a matter that is likely to advance a pecuniary interest of the member at the expense of any interest of the Corporation.

b. Screening for Conflicts of Interest. Prior to accepting a nomination for election to the Board of Directors, every candidate shall certify in writing that there is no matter known by that member which is likely to create a conflict of interest between the member and the Corporation.

c. Considering Exceptions. When a matter which has been presented to the Board of Directors for its consideration is likely to create a conflict of interest or the appearance of a conflict of interest, the Board shall prohibit the matter from going forward unless the following conditions are met:

- i. The matter is fully disclosed at an open meeting of the Board;
- ii. The affected parties are present at the meeting;
- iii. After a full review of the matter the Board determines that it will clearly promote the purposes of the Corporation to allow the matter to go forward; and

iv. The Board votes unanimously to allow the matter to go forward.

5. OFFICERS. Officers of the Corporation shall consist of a Chairman, Vice Chairman, Secretary, and a Treasurer and other officers as the Board of Directors may from time to time elect. These officers will be elected for a one (1) year term at the Annual Meeting each year.

a. Chairman. The Chairman shall be a Director and preside at all meetings, shall make reports to the Board of Directors and shall perform all such other duties as are incident to his/her office or may properly be required of him/her by the Board of Directors. He/She shall be ex-officio, a member of all committees.

b. Vice Chairman. In the absence of the Chairman of the Board of Trustees, the Vice Chairman shall perform the duties of the Chairman.

c. Secretary. The Secretary shall:

- i. keep the minutes of the meetings of the Board of Directors in one or more books provided for that purpose;
- ii. see that all notices are duly given in accordance with the provisions of these By-laws as required by law;
- iii. in general, perform all duties incident to the office of Secretary and such other duties as from time to time may be assigned to him/her by the Chairman or Board of Directors.

d. Treasurer. The Treasurer shall:

- i. have charge and custody of and be responsible for all funds and securities of the Corporation; receive and give receipts for monies due and payable to the Corporation from any source and deposit all monies in the name of the Corporation;
- ii. prepare or cause to be prepared a true statement of the Corporation's assets and liabilities at the close of each fiscal year;
- iii. in general, perform all of the duties incident to the office of Treasurer and such other duties as from time to time may be assigned to him/her by the Chairman or by the Board of Directors.

6. EXECUTIVE COMMITTEE.

a. Membership. The Chairman, Vice Chairperson, and one other Director chosen by the Chairperson shall be held whenever the Chairperson deems necessary.

b. Power. Actions taken by the Executive Committee shall be deemed to be actions of the Board of Directors unless such actions are rescinded by the Board of Directors at its next regular meeting.

c. Record of Actions. If any action is taken at any meeting of the Executive Committee, a record shall be kept of the action and presented at the next regular meeting of the Board.

d. Board Affirmation. At the next regular meeting, the full Board may choose to affirm an action previously taken by the Executive Committee or, if deemed appropriate to rescind the action to the extent that it is possible to do so.

7. OTHER COMMITTEES.

a. Optional. The Board of Directors may, from time to time, create such committees, as it deems necessary in order to carry out its mission.

b. Committee Chair. The Chairman of the Board shall appoint the chair of each committee who, in turn, shall select such other members as may be necessary to perform the functions of the committee.

c. Termination. The Chairman of the Board may terminate a committee or appoint a new Committee Chair as he/she deems necessary.

8. AMENDMENTS.

a. When Amendments Are Possible. These By-Laws may be amended at any regular meeting of the Board of Directors or at a special meeting of the Board called for that purpose. Amendments must be approved by at least four (4) Directors.

b. Notice of Proposed Amendments. Proposed amendments to the By-Laws must be submitted in writing to all Directors at least 24 hours prior to the meeting.

These are Amended By-Laws approved by the Board of Directors on the 11 day of September, 2017.

A handwritten signature in cursive script, appearing to read "R. H. Mays", is written over a horizontal line.

Secretary to the Board of Directors

**State of North Carolina  
Department of the Secretary of State**

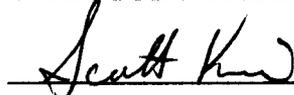
**ARTICLES OF RESTATEMENT  
FOR NONPROFIT CORPORATION**

Pursuant to §55A-10-06 of the General Statutes of North Carolina, the undersigned corporation hereby submits the following for the purpose of restating its Articles of Incorporation.

1. The name of the corporation is: HOBGOOD ACADEMY, INC.
2. The text of the Restated Articles of Incorporation is attached.
3. These Restated Articles of Incorporation were adopted by the board of directors.
4. The Restated Articles of Incorporation contain various amendments, but none of the amendments require the approval of any person or persons other than the directors of the corporation.
5. These articles will be effective upon filing.

This the 20 day of July, 2016

**HOBGOOD ACADEMY, INC.**



\_\_\_\_\_  
**Scott Kiser, Board Chair**

Notes 1. Filing fee is \$10, unless the Restated Articles of Incorporation include an amendment, in which case the filing fee is \$25. This document and one exact or conformed copy of these articles must be filed with the Secretary of State.

Corporations Division

PO Box 29622

Raleigh, NC 27626-0622

**ATTACHMENT : PAGE ONE OF TWO PAGES**

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**TEXT OF RESTATED ARTICLES OF INCORPORATION**

1. The name of the nonprofit corporation is: HOBGOOD ACADEMY, INC.
2. The corporation is a charitable or religious corporation as defined in NCGS 55A-1-40(4).
3. The name of the registered agent is: JESSE E. SHEARIN, JR.
4. The street address and county of the registered agent is:  
1609 Church Street, Scotland Neck, NC 27874, Halifax County.
5. The mailing address of the registered agent is:  
P. O. Drawer 366, Scotland Neck, NC 27874.
6. The corporation has no members.
7. The street address and county of the principal office of the corporation is:  
201 South Beech Street, Hobgood, NC 27843, Halifax County.
8. The telephone number of the principal office is: (252)826-4116.
9. 

<i>Privacy Redaction</i>
--------------------------

## ATTACHMENT : PAGE TWO OF TWO PAGES

### Purpose of Corporation

This corporation is organized for the following purpose(s) (*check as applicable*):

religious,

charitable,

educational,

testing for public safety,

scientific,

literary,

fostering national or international amateur sports competition, and/or

prevention of cruelty to children or animals,

including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code of 1986 (herein the "Code") (or the corresponding provisions of any future United States Internal Revenue Code).

### Prohibited Activities

No part of the net earnings of the corporation shall inure to the benefit of or be distributable to, its members, directors, officers, or other private persons except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of purposes set forth in these articles of incorporation. No substantial part of the activities of the corporation shall be the carrying on of propaganda or otherwise attempting to influence legislation, and the corporation shall not participate in or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provisions of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under Section 501(c)(3) of the Code or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Code.

### Distributions Upon Dissolution

Upon the dissolution of the corporation, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities of the corporation, dispose of all of the assets of the corporation exclusively for the purposes of the corporation in such manner, or to such organization or organizations organized and operated exclusively for religious, charitable, educational, scientific or literary purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Code as the Board of Directors shall determine, or to federal, state, or local governments to be used exclusively for public purposes. Any such assets not so disposed of shall be disposed of by the Superior Court of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organizations, such as the court shall determine, which are organized and operated exclusively for such purposes, or to such governments for such purposes.





# CRAWFORD - HENDERSON, INC.

*Insurance Since 1892*

POST OFFICE BOX 10885 - 202 NORTH SPENCE AVENUE

GOLDSBORO, NORTH CAROLINA 27532

(919) 778-9400

## Hobgood Academy Inc.

Educational Institution Package: \$15,515

**Commercial Property:**

Blanket Building	\$3,705,000
Blanket Business Personal Property (schedule included)	\$ 700,000
Commercial Property Expanded Endorsement Crime	
Equipment Breakdown	
Crisis Event Expense Endorsement	

**General Liability:**

General Aggregate	\$2,000,000
Each Occurrence	\$1,000,000
Products & Completed Operations	\$2,000,000
Personal & Advertising Injury	\$1,000,000
Fire Damage	\$ 100,000
Hired & Non-Owned Auto Liability	\$1,000,000
Sexual Misconduct	\$1,000,000
Medical Payments	\$ 10,000
Educational Institutions Endorsement	

**Commercial Umbrella:**

Each Occurrence	\$1,000,000	\$ 750
Aggregate Limit	\$1,000,000	

**Workers Compensation & Employers Liability: \$ 3,765**

<b>Bodily Injury By Accident</b>	<b>\$1,000,000</b>	<b>Each Accident</b>
<b>Bodily Injury By Disease</b>	<b>\$1,000,000</b>	<b>Policy Limit</b>
<b>Bodily Injury By Disease</b>	<b>\$1,000,000</b>	<b>Each Employee</b>
<b>8868 Professional Employees</b>	<b>\$388,400</b>	
<b>9101 All Other Employees</b>	<b>\$ 26,800</b>	

**Total Commercial Package and Workers Compensation: \$20,030**

**Quote does not include Directors & Officers or Employment Practices Liability. This should be renewed with current carrier: Scottscale Indemnity Company through E&O Risk. We will be trying to find another market but because of the limited amount of time, we recommend renewing with them for 2016.**



**CONFIRMATION OF COVERAGE BOUND**  
**Business and Management**  
**Indemnity Insurance Coverage**  
**Non-Profit Organizations**

Producer: Paul Sult  
Broker Company: PROvision Underwriters  
Fax #: 704-844-8118

Renewal

- Item A. **Parent Organization:** **Hobgood Academy**  
Principal Address: 201 S. Beech St.  
Hobgood, NC 27843
- Item B. **Policy Number:** **EKI3204761**
- Item C. **Carrier:** **Scottsdale Indemnity Company**
- Item D. **Policy Period:** From 11/01/2016 to 11/01/2018

Item E. **Coverage Sections**

**Employment Practices**

Limit of Liability \$1,000,000 maximum aggregate for this Coverage Section

Retention(s):

\$1,000 each **Employment Practices Claim**

\$1,000 each **Third Party Claim**

**Continuity Date:** 11/1/2010

**Third Party Coverage:** Yes  No

- Congratulations! Your policy includes a state-of-the-art EPL Risk Management service that provides Insureds the ability to ask their organization's specific human resource and employment law questions directly to employment law attorneys, access to an Online Resource Portal and more. To register, please visit <https://eriskeplhelpline.hrhelpline.com/Reg> and follow the instructions.

**Insured Person and Organization**

Limit of Liability \$1,000,000 maximum aggregate for this Coverage Section

Retention(s):

\$0 each **Claim** as respects **Insured Person**

\$2,500 each **Claim** as respects the **Organization**

**Continuity Date:** 11/1/2010

Item F. **Premium:** \$3,292

1st installment of \$1,646 is effective 11/1/2016 (effective date of policy)

2nd installment of \$1,646 is effective 11/1/2017 (2nd year effective date of policy)

Item G. **Discovery Period:**

1. One (1) year 30% of the premium
2. Two (2) years 125% of the premium
3. Three (3) years 150% of the premium

**Item H. Run-Off Period:**

1. One (1) year 100% of the premium
2. Two (2) years 125% of the premium
3. Three (3) years 150% of the premium
4. Four (4) years 165% of the premium
5. Five (5) years 185% of the premium
6. Six (6) years 200% of the premium

**Item I. Endorsements and Notices:**

- EKI-D-2 (04/08) > Declarations
- EKI-326 (04/08) > General Terms and Conditions
- EKI-P-7 (04/08) > Employment Practices Coverage Section
- EKI-P-8 (04/08) > Insured Person and Organization Coverage Section
- EKI-99 (04/08) > Advisory Board Extension - IPO Coverage Section
- EKI-804 (01/09) > Allocation Provision (Non Profit)
- EKI-888 (12/09) > Amend Definition of Insured Person-Leased/Contracted Employees - IPO Coverage Section
- EKI-803(01/09) > Amend Discovery Election - 90 Days
- EKI-255 (08/09) > Amend Insured Versus Insured Exclusion (Non-Profit) - IPO Coverage Section
- EKI-1142A (11/12) > Amend Notice of Circumstances - EPL Coverage Section
- EKI-1143A (11/12) > Amend Notice of Circumstances - IPO Coverage Section
- EKI-266 (04/08) > Amend Notice Provision - (Non-Profit) - EPL Coverage Section
- EKI-267 (04/08) > Amend Notice Provision (Non-Profit) - IPO Coverage Section
- EKI-1018A (01/12) > Amend Notice Provision 60 Days - (Non-Profit) - EPL Coverage Section
- EKI-1109A (06/12) > Amend Other Insurance to be Primary - IPO - IPO Coverage Section
- EKI-805 (01/09) > Amend Subrogation Provision - Final Judgment
- EKI-261 (04/09) > Amend Warranty Provision Non-Rescindable Coverage (Non-Profit)
- EKI-313-NC (04/08) > Amendatory Endorsement - North Carolina
- EKI-814 (05/09) > Amended Insured Versus Insured Exclusion - Foreign Jurisdiction - IPO Coverage Section
- EKI-930 (02/11) > Amended Insured Versus Insured Exclusion Whistleblower Carveback - IPO Coverage Section
- EKI-806 (01/09) > Amended Insured Versus Insured Exclusion with Creditor Committee Carveback - IPO Coverage Section
- EKI-807 (04/09) > Cost Of Investigations Coverage (Non-Profit) - IPO Coverage Section
- EKI-269 (04/08) > Crisis Fund for Non-Profits - Crisis Communications Management Insurance (Non-Profit) - \$10,000 Crisis Fund - IPO Coverage Section
- EKI-1539 (02/14) > Employed Lawyers Extension - IPO Coverage Section
- EKI-1128 (09/12) > Employee Privacy Coverage with Sub-Limit (Non-Profit) - EPL Coverage Section
- EKI-104 (04/08) > Excess Benefit Transaction Excise Tax Coverage Endorsement - IPO Coverage Section
- EKI-869 (08/09) > Immigration Claim Endorsement (Non-Profit) - \$100,000 Sub-Limit - EPL Coverage Section
- EKI-112 (04/08) > Multi-Year Endorsement
- EKI-355 (06/08) > Outside Entity Coverage for Non-Profit Companies - IPO Coverage Section
- EKI-238 (04/08) > Priority of Payments Provision (Non-Profit) - IPO Coverage Section
- EKI-121 (04/08) > Professional Services Errors and Omissions Exclusions - IPO Coverage Section
- EKI-110 (04/08) > Sexual Misconduct, Child Abuse, Neglect Exclusion (Non-Profit) - IPO Coverage Section
- EKI-111 (04/08) > Sexual Misconduct, Child Abuse, Neglect Exclusion-EPL (Non-Profit) - EPL Coverage Section
- EKI-848 (05/09) > State Amendatory Inconsistent
- EKI-802 (01/09) > Tolling or Waiving the Statute of Limitations - IPO Coverage Section
- EKI-866 (07/09) > Wage and Hour Claim Endorsement - Non-Profit - \$250,000 Sub-Limit - EPL Coverage Section
- NOTI0164CW (1-08) > TRIA Disclosure Notice

**Item J. Subjectivities:**

- None



**Sean OConnor**

Confirmation Issuance Date: 11/9/2016

**Note:** This confirmation of coverage will expire 90 days from 11/9/2016

**Note:** This confirmation of coverage document will expire on the earlier of 90 days from 11/1/2016 or the inception of the Policy Period listed in Item 2. Further, this document and any coverage hereunder is subject to modification or withdrawal if, after 11/1/2016 and before the proposed inception date set forth in Item 2., Scottsdale Indemnity Company or any of its representatives, including E-Risk Services, LLC, becomes aware of any new, corrected or updated information relating to any Claim or other risk exposure which may affect or change the underwriting evaluation of any proposed Insured and Scottsdale Indemnity Company or any of its representatives, including E-Risk Services, LLC, in their sole discretion, determines that the terms of this document are no longer appropriate.

This document does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from offering or providing insurance. To the extent any such prohibitions apply, this document is void ab initio.

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

**2014**

Department of the Treasury  
Internal Revenue Service

**Do not enter social security numbers on this form as it may be made public.**  
**Information about Form 990 and its instructions is at www.irs.gov/form990.**

**Open to Public Inspection**

**A For the 2014 calendar year, or tax year beginning** 07/01/14 , **and ending** 06/30/15

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization Hobgood Academy Inc	<b>D</b> Employer identification number 56-0940857
	Doing business as	<b>E</b> Telephone number 252-826-4116
	Number and street (or P.O. box if mail is not delivered to street address) PO Box 307	Room/suite
	City or town, state or province, country, and ZIP or foreign postal code Hobgood NC 27843	<b>G</b> Gross receipts \$ 644,306

<b>F</b> Name and address of principal officer: Joe Ayers PO Box 279 Oak City NC 27857	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
---	---

<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <b>t</b> (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: <b>u</b> www.hobgoodacademy.com	<b>H(c)</b> Group exemption number <b>u</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>u</b>	<b>L</b> Year of formation:	<b>M</b> State of legal domicile:

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: Educational institution		
	<b>2</b> Check this box <input type="checkbox"/> <b>u</b> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	9
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	9
	<b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a)	<b>5</b>	33
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	50
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	82,841	135,345
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	567,739	410,619
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,336	130
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,096	4,647
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	596,296	447,042
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b> 14,626		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	288,740	226,539
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	885,036	673,581	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-212,024	-122,840	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	465,049	541,771
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	65,117	264,679

**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.

<b>Sign Here</b>	Signature of officer	Date
	Kelly Craft Type or print name and title	Treasurer

<b>Paid Preparer Use Only</b>	Print/Type preparer's name David A. Ess, CPA	Preparer's signature	Date 08/03/15	Check <input type="checkbox"/> if self-employed	PTIN P01338004
	Firm's name } Pate, Horton & Ess, P.A.	Firm's EIN } 56-1315531			
	Firm's address } Nashville, NC 27856	Phone no. 252-459-3186			

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

DAA

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Educational institution

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  No

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?

Yes  No

If "Yes," describe these changes on Schedule O.

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 \$ 584,143 including grants of \$ ) (Revenue \$ ) Private school providing education to approximately 80 students grades K-12 in a racially nondiscriminatory manner

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses u 584,143

**Part IV Checklist of Required Schedules**

		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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> 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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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 Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		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		X
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)		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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules (continued)**

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13		X
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
<b>13</b>	Did the organization have a written whistleblower policy?		X
<b>14</b>	Did the organization have a written document retention and destruction policy?		X
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official		X
<b>15b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **u** None
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 books and records: **u**

Kelly Craft  
Hobgood  
PO Box 307

NC 27843

252-826-4116

**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 instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Rhonda Mayer ..... Director	0.00 ..... 0.00	X						0	0	0
(2) Shelley Mobley ..... Director	0.00 ..... 0.00	X						0	0	0
(3) Jesse Council ..... Chair	0.00 ..... 0.00	X						0	0	0
(4) Buddy Leggett ..... Director	0.00 ..... 0.00	X						0	0	0
(5) Josh Roberson ..... Director	0.00 ..... 0.00	X		X				0	0	0
(6) Kip Roberson ..... Director	0.00 ..... 0.00	X		X				0	0	0
(7) Miriam Kemp ..... Director	0.00 ..... 0.00	X						0	0	0
(8) Julie Hyman ..... Director	0.00 ..... 0.00	X						0	0	0
(9) Harris Josey ..... Director	0.00 ..... 0.00	X		X				0	0	0
(10) .....										
(11) .....										

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
<b>1b Sub-total</b> .....							<b>u</b>			
<b>c Total from continuation sheets to Part VII, Section A</b> .....							<b>u</b>			
<b>d Total (add lines 1b and 1c)</b> .....							<b>u</b>			

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u** 0

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u** 0

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	135,345			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h Total.</b> Add lines 1a-1f	<b>u</b>	135,345			
<b>Program Service Revenue</b>		<b>Busn. Code</b>				
	<b>2a</b> Tuition & fees		376,443	376,443		
	<b>b</b> Lunchroom revenue		34,176	34,176		
	<b>c</b>					
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
<b>g Total.</b> Add lines 2a-2f	<b>u</b>	410,619				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)	<b>u</b>	1,408	1,408		
	<b>4</b> Income from investment of tax-exempt bond proceeds	<b>u</b>				
	<b>5</b> Royalties	<b>u</b>				
		(i) Real	(ii) Personal			
	<b>6a</b> Gross rents					
	<b>b</b> Less: rental exps.					
	<b>c</b> Rental inc. or (loss)					
	<b>d</b> Net rental income or (loss)	<b>u</b>				
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		92,287				
	<b>b</b> Less: cost or other basis & sales exps.					
		93,565				
	<b>c</b> Gain or (loss)					
		-1,278				
	<b>d</b> Net gain or (loss)	<b>u</b>	-1,278	-1,278		
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>					
<b>b</b> Less: direct expenses	<b>b</b>					
<b>c</b> Net income or (loss) from fundraising events	<b>u</b>					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
<b>b</b> Less: direct expenses	<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities	<b>u</b>					
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
<b>b</b> Less: cost of goods sold	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory	<b>u</b>					
Miscellaneous Revenue		<b>Busn. Code</b>				
<b>11a</b> Miscellaneous			4,647	4,647		
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d	<b>u</b>		4,647			
<b>12 Total revenue.</b> See instructions.	<b>u</b>		550,741	415,396	0	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	410,320	359,256	51,064	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,812	4,198	614	
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes	31,910	27,939	3,971	
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	4,130		4,130	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
<b>12</b> Advertising and promotion	2,014		2,014	
<b>13</b> Office expenses				
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	90,460	85,257	5,203	
<b>17</b> Travel	109		109	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	23,341	23,341		
<b>23</b> Insurance	23,984	23,984		
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> Supplies	46,365	28,102	3,637	14,626
<b>b</b> Lunchroom expense	31,884	31,884		
<b>c</b> Miscellaneous	4,070		4,070	
<b>d</b> Staff development	182	182		
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	673,581	584,143	74,812	14,626
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1	Cash—non-interest bearing		1
	2	Savings and temporary cash investments	120,349	2 309,266
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	21,180	4 16,634
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	2,029	9 2,591
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,025,663	
	b	Less: accumulated depreciation	10b 836,762	10c 188,901
	11	Investments—publicly traded securities	114,250	11 24,379
	12	Investments—other securities. See Part IV, line 11		12
	13	Investments—program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	465,049	16 541,771	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	58,486	17 51,202
	18	Grants payable		18
	19	Deferred revenue	6,631	19 13,477
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties		23 200,000
	24	Unsecured notes and loans payable to unrelated third parties		24
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25
	26	<b>Total liabilities.</b> Add lines 17 through 25	65,117	26 264,679
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27	Unrestricted net assets	399,932	27 277,092
	28	Temporarily restricted net assets		28
	29	Permanently restricted net assets		29
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
33	<b>Total net assets or fund balances</b>	399,932	33 277,092	
34	<b>Total liabilities and net assets/fund balances</b>	465,049	34 541,771	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	550,741
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	673,581
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-122,840
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	399,932
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	277,092

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

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

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
u Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

**2014**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

u Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Hobgood Academy Inc

Employer identification number

56-0940857

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b> Public support. Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>11 Total support.</b> Add lines 7 through 10						

**12** Gross receipts from related activities, etc. (see instructions) 12

**13 First five 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 2014 (line 6, column (f) divided by line 11, column (f)) 14 %

**15** Public support percentage from 2013 Schedule A, Part II, line 14 15 %

**16a 33 1/3% support test—2014.** 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—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**17a 10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test—2013.** 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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five 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**

<b>15</b> Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2013 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2014</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2013</b> Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
<b>b</b> Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
<b>c</b> Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
<b>10a</b> Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
<b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

**Part IV Supporting Organizations** (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b	A family member of a person described in (a) above?	11b	
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c	

**Section B. Type I Supporting Organizations**

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

**Section 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	

**Section 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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3	

**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 year ( <b>see instructions</b> ):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
2	<b>Activities Test. Answer (a) and (b) below.</b>		
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 <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3	<b>Parent of Supported Organizations. Answer (a) and (b) below.</b>		
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? Provide details in <b>Part VI</b> .	3a	
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 <b>Part VI</b> the role played by the organization in this regard.	3b	

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

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

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2014 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2014</b>	<b>(iii) Distributable Amount for 2014</b>
<b>1</b> Distributable amount for 2014 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2014:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b> From 2013 . . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2014 distributable amount			
<b>i</b> Carryover from 2009 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2014 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2014 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
<b>6</b> Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
<b>7 Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> Excess from 2013 . . . . .			
<b>e</b> Excess from 2014 . . . . .			



**Schedule B**  
**(Form 990, 990-EZ,**  
**or 990-PF)**Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0047

**2014****u Attach to Form 990, Form 990-EZ, or Form 990-PF.****u** Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**Name of the organization**

Hobgood Academy Inc

**Employer identification number**

56-0940857

**Organization type** (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 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 foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- 
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ► \$ .....

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

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

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

<b>Name of organization</b> Hobgood Academy Inc	<b>Employer identification number</b> 56-0940857
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	June Judge 1700 Pine Forest Dr Scotland Neck NC 27874	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	David & Rhonda Mayer 2331 Mayo Farm Rd Hobgood NC 27843	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Lawrence & Julie Rawls PO Box 46 Oak City NC 27857	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Sutton & Wanda Edmondson 1370 NC Hwy 111 Oak City NC 27857	\$ 5,775	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Brent & Annette Fleming 1421 Moonlight Rd Halifax NC 27839	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Janey Price Nodeen 11600 Ten Penny Dr Fairfax Station VA 22039	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> Hobgood Academy Inc	<b>Employer identification number</b> 56-0940857
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Willam H Bunting 2305 Bynums Bridge Rd Scotland Neck NC 27874	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

u Attach to Form 990.

u Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

Open to Public Inspection

Name of the organization

Hobgood Academy Inc

Employer identification number

56-0940857

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u .....

4 Number of states where property subject to conservation easement is located u .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year u .....

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year u \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance .....
- d** Additions during the year .....
- e** Distributions during the year .....
- f** Ending balance .....

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u** %
- b** Permanent endowment **u** %
- c** Temporarily restricted endowment **u** %

The percentages in lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations .....
- (ii)** related organizations .....

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

**b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? .....

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....				
<b>b</b> Buildings .....				
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....				
<b>e</b> Other .....		1,025,663	836,762	188,901
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) <b>u</b>				188,901

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) <b>u</b>		

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) <b>u</b>		

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) <b>u</b>	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) <b>u</b>	

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>		
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	

**Part XIII Supplemental Information.**

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

**Part X - FIN 48 Footnote**

Management of the School considers the likelihood of changes by taxing authorities in its exempt organization returns and discloses potential significant changes that management believes are more likely than not to occur upon examination by tax authorities. Management has not identified any uncertain tax positions in filed returns that require disclosure in the accompanying financial statements. The School's tax returns for the past three years are subject to examination by tax authorities, and may change upon examination.



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

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Schools**

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

u Attach to Form 990 or Form 990-EZ.

u Information about Schedule E (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

Open to Public  
Inspection

Hobgood Academy Inc

Employer identification number  
56-0940857

**Part I**

		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II Solicitation of students of any race, creed or color is publicized in the local newspapers during May of each year. Also have a brochure which includes a statement of its nondiscriminatory policy. The school provides two scholarships specifically for black students.	X	
4	Does the organization maintain the following?		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	X	
5	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		X
b	Admissions policies?		X
c	Employment of faculty or administrative staff?		X
d	Scholarships or other financial assistance?	X	
e	Educational policies?		X
f	Use of facilities?		X
g	Athletic programs?		X
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. The policy in force is due to an IRS audit that specifically stipulates the school is to provide at least two scholarships annually specifically to black students.		X
6a	Does the organization receive any financial aid or assistance from a governmental agency?		X
6b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II.		X
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	X	



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

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

**2014**

Department of the Treasury  
Internal Revenue Service

u Attach to Form 990 or 990-EZ.

**Open to Public  
Inspection**

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Hobgood Academy Inc

Employer identification number

56-0940857

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Copy of tax return is given to management before it is filed.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Governing documents are made available upon written request.

Form **990**

**Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Do not enter social security numbers on this form as it may be made public.**  
**Information about Form 990 and its instructions is at www.irs.gov/form990.**

**A For the 2015 calendar year, or tax year beginning 07/01/15, and ending 06/30/16**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: **Hobgood Academy Inc**  
 Doing business as  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**PO Box 307**  
 City or town, state or province, country, and ZIP or foreign postal code  
**Hobgood NC 27843**

**D** Employer identification number: **56-0940857**  
**E** Telephone number: **252-826-4116**  
**G** Gross receipts \$: **502,827**

**F** Name and address of principal officer:  
**Scott Kiser**  
**PO Box 307**  
**Hobgood NC 27843**

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) **t** (insert no.)  4947(a)(1) or  527

**J** Website: **www.hobgoodacademy.com** **H(c)** Group exemption number **u**

**K** Form of organization:  Corporation  Trust  Association  Other **u** **L** Year of formation: **M** State of legal domicile:

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>Educational institution</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>5</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>5</b>
	<b>5</b> Total number of individuals employed in calendar year 2015 (Part V, line 2a)	<b>5</b>	<b>28</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>50</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	135,345	63,491
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	410,619	413,818
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	130	-1,543
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,647	6,068
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	550,741	481,834
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	447,042	565,263
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b> 11,475		0
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	226,539	219,306
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	673,581	784,569	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	-122,840	-302,735
	<b>21</b> Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	541,771	470,226
		264,679	495,869
	277,092	-25,643	

**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 Here**

Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_  
 Kelly Craft Treasurer  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: David A. Ess, CPA  
 Preparer's signature: \_\_\_\_\_ Date: 07/18/16  
 Check  if self-employed PTIN: P01338004  
 Firm's name: Pate, Horton & Ess, P.A. Firm's EIN: 56-1315531  
 Firm's address: P.O. Box 787, Nashville, NC 27856 Phone no.: 252-459-3186

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2015)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [ ]

1 Briefly describe the organization's mission:

Educational institution

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] No

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? [ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

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 \$ 657,242 including grants of \$ ) (Revenue \$ 413,818 )

Private school providing education to approximately 93 students in either preschool or grades K-12 in a racially nondiscriminatory manner

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses u 657,242

**Part IV Checklist of Required Schedules**

	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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 <b>Section 501(c)(3) organizations.</b> 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		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		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		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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 Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		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		X
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)		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		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
<b>22</b> 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		X
<b>23</b> 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		X
<b>24a</b> 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		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>b</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		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
<b>37</b> 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		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1a</b> 5		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	<b>1b</b> 5		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13		X
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>12b</b>			
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
<b>12c</b>			
<b>13</b>	Did the organization have a written whistleblower policy?		X
<b>14</b>	Did the organization have a written document retention and destruction policy?		X
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official		X
<b>15a</b>			
<b>b</b>	Other officers or key employees of the organization		X
<b>15b</b>			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **u** None
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 books and records: **u**

Kelly Craft  
Hobgood  
PO Box 307

NC 27843

252-826-4116

**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 instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Rhonda Mayer Secretary	2.00 0.00	X		X				0	0	0
(2) Scott Kiser Chair	5.00 0.00	X		X				0	0	0
(3) Buddy Leggett Director	2.00 0.00	X						0	0	0
(4) Nicole Flanary Director	2.00 0.00	X						0	0	0
(5) Brandon Lanier Director	2.00 0.00	X						0	0	0
(6) Kelly Craft Treasurer	35.00 0.00			X				0	0	0
(7)										
(8)										
(9)										
(10)										
(11)										



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	63,491			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h Total.</b> Add lines 1a-1f	<b>u</b>	63,491			
<b>Program Service Revenue</b>		<b>Busn. Code</b>				
	<b>2a</b> Tuition & fees		380,275	380,275		
	<b>b</b> Lunchroom revenue		33,543	33,543		
	<b>c</b>					
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
<b>g Total.</b> Add lines 2a-2f	<b>u</b>	413,818				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)	<b>u</b>	-1,543	-1,543		
	<b>4</b> Income from investment of tax-exempt bond proceeds	<b>u</b>				
	<b>5</b> Royalties	<b>u</b>				
		(i) Real	(ii) Personal			
	<b>6a</b> Gross rents					
	<b>b</b> Less: rental exps.					
	<b>c</b> Rental inc. or (loss)					
	<b>d</b> Net rental income or (loss)	<b>u</b>				
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		20,993				
	<b>b</b> Less: cost or other basis & sales exps.	20,993				
	<b>c</b> Gain or (loss)					
	<b>d</b> Net gain or (loss)	<b>u</b>				
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>				
	<b>b</b> Less: direct expenses	<b>b</b>				
<b>c</b> Net income or (loss) from fundraising events	<b>u</b>					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
<b>b</b> Less: direct expenses	<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities	<b>u</b>					
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
<b>b</b> Less: cost of goods sold	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory	<b>u</b>					
	Miscellaneous Revenue	<b>Busn. Code</b>				
<b>11a</b> Miscellaneous			6,068	6,068		
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d	<b>u</b>		6,068			
<b>12 Total revenue.</b> See instructions.	<b>u</b>		481,834	418,343	0	0

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	521,197	433,610	87,587	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,507	4,558	949	
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes	38,559	32,044	6,515	
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	4,239		4,239	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
<b>12</b> Advertising and promotion	583		583	
<b>13</b> Office expenses				
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	72,754	66,730	6,024	
<b>17</b> Travel	622		622	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest	3,000		3,000	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	21,612	21,612		
<b>23</b> Insurance	27,240	27,240		
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> Supplies	49,238	35,067	2,696	11,475
<b>b</b> Lunchroom expense	35,076	35,076		
<b>c</b> Miscellaneous	3,637		3,637	
<b>d</b> Staff development	1,305	1,305		
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	784,569	657,242	115,852	11,475
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1	Cash—non-interest bearing		1
	2	Savings and temporary cash investments	309,266	2 78,182
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	16,634	4 16,990
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	2,591	9 2,847
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,222,141	
	b	Less: accumulated depreciation	10b 849,934	10c 372,207
	11	Investments—publicly traded securities	24,379	11
	12	Investments—other securities. See Part IV, line 11		12
	13	Investments—program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	541,771	16 470,226	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	51,202	17 62,081
	18	Grants payable		18
	19	Deferred revenue	13,477	19 33,788
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties	200,000	23 400,000
	24	Unsecured notes and loans payable to unrelated third parties		24
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25
	26	<b>Total liabilities.</b> Add lines 17 through 25	264,679	26 495,869
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27	Unrestricted net assets	277,092	27 -25,643
	28	Temporarily restricted net assets		28
	29	Permanently restricted net assets		29
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
33	<b>Total net assets or fund balances</b>	277,092	33 -25,643	
34	<b>Total liabilities and net assets/fund balances</b>	541,771	34 470,226	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	481,834
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	784,569
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-302,735
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	277,092
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	-25,643

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

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

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
**u Attach to Form 990 or Form 990-EZ.**

OMB No. 1545-0047

**2015**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**u** Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization: **Hobgood Academy Inc** Employer identification number: **56-0940857**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations:
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b> Public support. Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>11 Total support.</b> Add lines 7 through 10						

**12** Gross receipts from related activities, etc. (see instructions) 12

**13 First five 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**

<b>14</b> Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2014 Schedule A, Part II, line 14	<b>15</b>	%

**16a 33 1/3% support test—2015.** 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—2014.** 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—2015.** 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—2014.** 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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five 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**

<b>15</b> Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2014 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> 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 <b>Part VI</b> 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 11a or 11b in Part I, answer (b) and (c) below.		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> 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 <b>Part VI</b> .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11a</b>	
<b>b</b> A family member of a person described in (a) above?	<b>11b</b>	
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	<b>11c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	<b>1</b>	
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?	<b>1</b>	
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	<b>2</b>	
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	<b>3</b>	

**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 year (**see instructions**):
- a**  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 government entity (see instructions).

	Yes	No
<b>2</b> <b>Activities Test. Answer (a) and (b) below.</b>		
<b>a</b> 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 <b>Part VI</b> <b>identify those supported organizations and explain</b> 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>2a</b>	
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	<b>2b</b>	
<b>3</b> <b>Parent of Supported Organizations. Answer (a) and (b) below.</b>		
<b>a</b> 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? Provide details in <b>Part VI</b> .	<b>3a</b>	
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.	<b>3b</b>	

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

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

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2015 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2015</b>	<b>(iii) Distributable Amount for 2015</b>
<b>1</b> Distributable amount for 2015 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> From 2013 .....			
<b>e</b> From 2014 .....			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<b>i</b> Carryover from 2010 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2015 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
<b>6</b> Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
<b>7 Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b>			
<b>c</b> Excess from 2013 .....			
<b>d</b> Excess from 2014 .....			
<b>e</b> Excess from 2015 .....			



**Schedule B**  
**(Form 990, 990-EZ,**  
**or 990-PF)**Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0047

**2015**

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**Name of the organization**

Hobgood Academy Inc

**Employer identification number**

56-0940857

**Organization type** (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 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 foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- 
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

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

- 
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

- 
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the
- General Rule**
- applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ .....

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Hobgood Academy Inc

Employer identification number

56-0940857

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Sutton & Wanda Edmondson 1370 NC Hwy 111 Oak City NC 27857	\$ 6,300	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Jesse Shearin 1609 Church Street Scotland Neck NC 27874	\$ 23,438	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

u 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.

u Attach to Form 990.

u Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

Name of the organization

Hobgood Academy Inc

Employer identification number

56-0940857

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u .....

4 Number of states where property subject to conservation easement is located u .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u .....

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other .....

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c Beginning balance .....
- d Additions during the year .....
- e Distributions during the year .....
- f Ending balance .....

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment **u** .....
- b Permanent endowment **u** .....
- c Temporarily restricted endowment **u** .....

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations .....
- (ii) related organizations .....

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? .....

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....				
<b>b</b> Buildings .....				
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....				
<b>e</b> Other .....		1,222,141	849,934	372,207
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .....			<b>u</b>	372,207

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) <b>u</b>		

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) <b>u</b>		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) <b>u</b>	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) <b>u</b>	

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>		
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	

**Part XIII Supplemental Information.**

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

**Part X - FIN 48 Footnote**

Management of the School considers the likelihood of changes by taxing authorities in its exempt organization returns and discloses potential significant changes that management believes are more likely than not to occur upon examination by tax authorities. Management has not identified any uncertain tax positions in filed returns that require disclosure in the accompanying financial statements. The School's tax returns for the past three years are subject to examination by tax authorities, and may change upon examination.



**SCHEDULE E**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service

Name of the organization

**Schools****u Complete if the organization answered "Yes" on Form 990,  
Part IV, line 13, or Form 990-EZ, Part VI, line 48.****u Attach to Form 990 or Form 990-EZ.****u Information about Schedule E (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2015****Open to Public  
Inspection**

Hobgood Academy Inc

Employer identification number  
56-0940857**Part I**

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II Solicitation of students of any race, creed or color is publicized in the local newspapers during May of each year. Also have a brochure which includes a statement of its nondiscriminatory policy. The school provides two scholarships specifically for black students. ....	X	
4 Does the organization maintain the following? .....		
a Records indicating the racial composition of the student body, faculty, and administrative staff? .....	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	X	
d Copies of all material used by the organization or on its behalf to solicit contributions? .....	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II. ..... .....		
5 Does the organization discriminate by race in any way with respect to: .....		
a Students' rights or privileges? .....		X
b Admissions policies? .....		X
c Employment of faculty or administrative staff? .....		X
d Scholarships or other financial assistance? .....	X	
e Educational policies? .....		X
f Use of facilities? .....		X
g Athletic programs? .....		X
h Other extracurricular activities? .....		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. The policy in force is due to an IRS audit that specifically stipulates the school is to provide at least two scholarships annually specifically to black students. ....		
6a Does the organization receive any financial aid or assistance from a governmental agency? .....		X
b Has the organization's right to such aid ever been revoked or suspended? .....		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II. .....		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II .....	X	



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

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

**2015**

Department of the Treasury  
Internal Revenue Service

u Attach to Form 990 or 990-EZ.

**Open to Public  
Inspection**

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

Hobgood Academy Inc

56-0940857

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Copy of tax return is given to management before it is filed.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Governing documents are made available upon written request.

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2016**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Do not enter social security numbers on this form as it may be made public.**  
**Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**A For the 2016 calendar year, or tax year beginning** 07/01/16 , **and ending** 06/30/17

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization Hobgood Academy Inc Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO Box 307 City or town, state or province, country, and ZIP or foreign postal code Hobgood NC 27843	<b>D</b> Employer identification number 56-0940857 <b>E</b> Telephone number 252-826-4116 <b>G</b> Gross receipts \$ 413,320
<b>F</b> Name and address of principal officer: Scott Kiser PO Box 307 Hobgood NC 27843		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <b>t</b> (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c)</b> Group exemption number <b>u</b>
<b>J</b> Website: <b>u</b> <a href="http://www.hobgoodacademy.com">www.hobgoodacademy.com</a>		<b>L</b> Year of formation: <b>M</b> State of legal domicile:
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>u</b>		

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: Educational institution		
	<b>2</b> Check this box <input type="checkbox"/> <b>u</b> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	5
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	5
	<b>5</b> Total number of individuals employed in calendar year 2016 (Part V, line 2a)	<b>5</b>	34
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	50
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0
<b>Revenue</b>		Prior Year	Current Year
	<b>8</b> Contributions and grants (Part VIII, line 1h)	63,491	58,167
	<b>9</b> Program service revenue (Part VIII, line 2g)	413,818	354,707
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,543	446
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,068	0
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	481,834	413,320
<b>Expenses</b>			
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	565,263	450,608
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b> 18,281		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	219,306	242,911
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	784,569	693,519
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-302,735	-280,199
<b>Net Assets or Fund Balances</b>		Beginning of Current Year	End of Year
	<b>20</b> Total assets (Part X, line 16)	470,226	740,037
	<b>21</b> Total liabilities (Part X, line 26)	495,869	1,045,879
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	-25,643	-305,842

**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.

<b>Sign Here</b>	Signature of officer Kelly Craft Type or print name and title	Date Treasurer
<b>Paid Preparer Use Only</b>	Print/Type preparer's name David A. Ess Preparer's signature Date 07/25/17 Check <input type="checkbox"/> if self-employed PTIN P01338004	Firm's name } Pate, Horton & Ess, P.A. P.O. Box 787 Firm's address } Nashville, NC 27856 Firm's EIN } 56-1315531 Phone no. 252-459-3186

May the IRS discuss this return with the preparer shown above? (see instructions)  **Yes**  **No**

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2016)

DAA

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Educational institution

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  No

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?  Yes  No

If "Yes," describe these changes on Schedule O.

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 \$ 585,347 including grants of \$ ) (Revenue \$ 354,707 )

Private school providing education to approximately 94 students in either preschool or grades K-12 in a racially nondiscriminatory manner

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses u 585,347

**Part IV Checklist of Required Schedules**

		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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> 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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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 Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		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		X
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)		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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
<b>22</b> 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		X
<b>23</b> 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		X
<b>24a</b> 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		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>b</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		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
<b>37</b> 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		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13		X
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
<b>13</b>	Did the organization have a written whistleblower policy?		X
<b>14</b>	Did the organization have a written document retention and destruction policy?		X
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official		X
<b>15b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **u** None
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 books and records: **u**

Kelly Craft PO Box 307 NC 27843 252-826-4116  
 Hobgood

**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 instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Rhonda Mayer ..... Secretary	2.00 0.00	X		X				0	0	0
(2) Scott Kiser ..... Chair	5.00 0.00	X		X				0	0	0
(3) Nicole Flanary ..... Director	2.00 0.00	X						0	0	0
(4) Brandon Lanier ..... Vice Chair	2.00 0.00	X		X				0	0	0
(5) Kelly Craft ..... Treasurer	35.00 0.00			X				0	0	0
(6) .....										
(7) .....										
(8) .....										
(9) .....										
(10) .....										
(11) .....										



**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>			
	<b>b</b> Membership dues	<b>1b</b>			
	<b>c</b> Fundraising events	<b>1c</b>			
	<b>d</b> Related organizations	<b>1d</b>			
	<b>e</b> Government grants (contributions)	<b>1e</b>			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	58,167		
	<b>g</b> Noncash contributions included in lines 1a-1f: \$				
	<b>h Total.</b> Add lines 1a-1f	<b>u</b>	58,167		
<b>Program Service Revenue</b>		<b>Busn. Code</b>			
	<b>2a</b> Tuition & fees		348,328	348,328	
	<b>b</b> Miscellaneous and other		6,379	6,379	
	<b>c</b>				
	<b>d</b>				
	<b>e</b>				
	<b>f</b> All other program service revenue				
<b>g Total.</b> Add lines 2a-2f	<b>u</b>	354,707			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)	<b>u</b>	446	446	
	<b>4</b> Income from investment of tax-exempt bond proceeds	<b>u</b>			
	<b>5</b> Royalties	<b>u</b>			
		(i) Real	(ii) Personal		
	<b>6a</b> Gross rents				
	<b>b</b> Less: rental exps.				
	<b>c</b> Rental inc. or (loss)				
	<b>d</b> Net rental income or (loss)	<b>u</b>			
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	<b>b</b> Less: cost or other basis & sales exps.				
	<b>c</b> Gain or (loss)				
	<b>d</b> Net gain or (loss)	<b>u</b>			
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>			
	<b>b</b> Less: direct expenses	<b>b</b>			
	<b>c</b> Net income or (loss) from fundraising events	<b>u</b>			
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>				
<b>b</b> Less: direct expenses	<b>b</b>				
<b>c</b> Net income or (loss) from gaming activities	<b>u</b>				
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>				
<b>b</b> Less: cost of goods sold	<b>b</b>				
<b>c</b> Net income or (loss) from sales of inventory	<b>u</b>				
	Miscellaneous Revenue	<b>Busn. Code</b>			
<b>11a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b> All other revenue					
<b>e Total.</b> Add lines 11a-11d	<b>u</b>				
<b>12 Total revenue.</b> See instructions.	<b>u</b>	413,320	355,153	0	0

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	413,793	352,142	61,651	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,430	3,748	682	
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes	32,385	27,519	4,866	
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	4,890		4,890	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
<b>12</b> Advertising and promotion	237		237	
<b>13</b> Office expenses				
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	105,513	98,956	6,557	
<b>17</b> Travel	324		324	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	22,896	22,896		
<b>23</b> Insurance	18,628	18,628		
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> Supplies	81,991	61,160	2,550	18,281
<b>b</b> Miscellaneous	4,838		4,838	
<b>c</b> Bad debt expense	3,296		3,296	
<b>d</b> Staff development	298	298		
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	693,519	585,347	89,891	18,281
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1	Cash—non-interest bearing		1
	2	Savings and temporary cash investments	78,182	2 354,016
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	16,990	4 29,839
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	2,847	9 6,871
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,217,725	
	b	Less: accumulated depreciation	10b 868,414	10c 349,311
	11	Investments—publicly traded securities		11
	12	Investments—other securities. See Part IV, line 11		12
	13	Investments—program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	470,226	16 740,037	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	62,081	17 47,771
	18	Grants payable		18
	19	Deferred revenue	33,788	19 10,108
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties	400,000	23 988,000
	24	Unsecured notes and loans payable to unrelated third parties		24
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25
	26	<b>Total liabilities.</b> Add lines 17 through 25	495,869	26 1,045,879
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27	Unrestricted net assets	-25,643	27 -305,842
	28	Temporarily restricted net assets		28
	29	Permanently restricted net assets		29
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
33	<b>Total net assets or fund balances</b>	-25,643	33 -305,842	
34	<b>Total liabilities and net assets/fund balances</b>	470,226	34 740,037	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	413,320
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	693,519
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-280,199
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	-25,643
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	-305,842

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

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

**2016**

Department of the Treasury  
Internal Revenue Service

**u Attach to Form 990 or Form 990-EZ.**

**Open to Public Inspection**

**u** Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Hobgood Academy Inc

Employer identification number

56-0940857

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five 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 2016 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2015 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test—2016.** 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—2015.** 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—2016.** 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—2015.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five 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**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations (continued)**

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11a</b>	
<b>b</b>	A family member of a person described in (a) above?	<b>11b</b>	
<b>c</b>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	<b>11c</b>	

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	<b>1</b>	
<b>2</b>	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.	<b>2</b>	

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	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).	<b>1</b>	

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	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?	<b>1</b>	
<b>2</b>	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).	<b>2</b>	
<b>3</b>	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	<b>3</b>	

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b>	Activities Test. Answer (a) and (b) below.		
<b>a</b>	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>2a</b>	
<b>b</b>	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	<b>2b</b>	
<b>3</b>	Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b>	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? Provide details in Part VI.	<b>3a</b>	
<b>b</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.	<b>3b</b>	

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

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

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4).	8	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013 .....			
d From 2014 .....			
e From 2015 .....			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 <b>Excess distributions carryover to 2017.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013 .....			
c Excess from 2014 .....			
d Excess from 2015 .....			
e Excess from 2016 .....			

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

**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

u 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.

u Attach to Form 990.

u Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

**Open to Public Inspection**

Name of the organization

Hobgood Academy Inc

Employer identification number

56-0940857

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Preservation of a certified historic structure	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	<b>Held at the End of the Tax Year</b>
a Total number of conservation easements .....	<b>2a</b>
b Total acreage restricted by conservation easements .....	<b>2b</b>
c Number of conservation easements on a certified historic structure included in (a) .....	<b>2c</b>
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	<b>2d</b>
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u .....	
4 Number of states where property subject to conservation easement is located u .....	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u .....	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u \$ .....	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 .....	u \$ .....
(ii) Assets included in Form 990, Part X .....	u \$ .....
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 .....	u \$ .....
b Assets included in Form 990, Part X .....	u \$ .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment **u** %
- b Permanent endowment **u** %
- c Temporarily restricted endowment **u** %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements				
<b>d</b> Equipment				
<b>e</b> Other		1,217,725	868,414	349,311
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)			<b>u</b>	349,311

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) <b>u</b>		

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) <b>u</b>		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) <b>u</b>	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) <b>u</b>	

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>		
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	

**Part XIII Supplemental Information.**

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

**Part X - FIN 48 Footnote**

Management of the School considers the likelihood of changes by taxing authorities in its exempt organization returns and discloses potential significant changes that management believes are more likely than not to occur upon examination by tax authorities. Management has not identified any uncertain tax positions in filed returns that require disclosure in the accompanying financial statements. The School's tax returns for the past three years are subject to examination by tax authorities, and may change upon examination.



**SCHEDULE E**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service

Name of the organization

**Schools****u Complete if the organization answered "Yes" on Form 990,  
Part IV, line 13, or Form 990-EZ, Part VI, line 48.****u Attach to Form 990 or Form 990-EZ.****u Information about Schedule E (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2016****Open to Public  
Inspection**

Hobgood Academy Inc

Employer identification number  
56-0940857**Part I**

		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II Solicitation of students of any race, creed or color is publicized in the local newspapers during May of each year. Also have a brochure which includes a statement of its nondiscriminatory policy. The school provides two scholarships specifically for black students.	X	
4	Does the organization maintain the following?		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	X	
5	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		X
b	Admissions policies?		X
c	Employment of faculty or administrative staff?		X
d	Scholarships or other financial assistance?	X	
e	Educational policies?		X
f	Use of facilities?		X
g	Athletic programs?		X
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. The policy in force is due to an IRS audit that specifically stipulates the school is to provide at least two scholarships annually specifically to black students.		X
6a	Does the organization receive any financial aid or assistance from a governmental agency?		X
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain on Part II.		X
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	X	



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

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

**2016**

Department of the Treasury  
Internal Revenue Service

**u** Attach to Form 990 or 990-EZ.

**Open to Public  
Inspection**

**u** Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

Hobgood Academy Inc

56-0940857

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Copy of tax return is given to management before it is filed.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Governing documents are made available upon written request.

## Appendix O- Marketing Action Plan

### Marketing Action Plan and Timeline (with relation to specified critical stages):

#### July –September 2017 (and previous year) (considered part of the initial application process)

- School personnel and board members held meetings in various locations in the local communities to share our mission and plans for converting to a public charter school. (Open house at Hobgood Academy, meet and greet at Tarboro Coffee House, Ridgcroft Academy, the Hobgood Depot, Robersonville Library and in private homes)
- Hobgood Cotton Festival – 10/2016 – Hobgood Academy had a booth with marketing materials and information run by students, staff, families, and board members.
- Sharing school events (such as Fall Festival, Christmas Concert, Grandparent’s Day and Graduations) on Facebook throughout the year.
- School personnel, families, community leaders and board members continuously network and share our vision and commitment to improving educational opportunities for children one-on-one with people we meet in our every day lives.
- Planning for the booth at the Hobgood Cotton Festival 10/2017 and the Fall Festival.

#### October 2017 (Selection Process and Preliminary Planning period)

- Develop initial marketing materials for Hobgood Academy Charter School describing the school’s mission and goals as well as emphasizing that it will be a NC Public Charter School serving the entire community and will not charge tuition. These materials will also include preliminary application information with application procedures and timelines. Materials will be updated to include dates of the open enrollment time frame and updated locations to obtain applications once final SBE approval is received.
- Hobgood Cotton Festival – 10/14/2017 – Hobgood Academy will have a booth with marketing materials including preliminary application information run by students, staff, families, and board members.
- Hobgood Academy Fall Festival – 10/2017 – Hobgood Academy PHA (parent group) has a fundraising event marketed throughout the community and via social media. There are local vendor booths, games and activities for all ages, High School Haunted Hall, and a variety of food options. Marketing materials including preliminary application information will be available.
- Begin Charter School updates on the Hobgood Academy website and social media. These updates will include application information and a preliminary estimate of the open enrollment timeframe.

#### November –December 2017 (Selection Process and Preliminary Planning period)

- Begin arranging outreach presentations to local community organizations, churches, and local governments to provide information about Hobgood Academy Charter School’s mission, goals, application information and a preliminary timeline for open enrollment.
- Requests for mailed applications will be logged.
- Enter floats in local holiday parades with families, students, staff and board members. (PHA to assist)
- Update the school’s website with continued progress updates for the Charter School Process.
- Potential volunteers for the public lottery will be identified and approached.
- Community outreach and marketing efforts will continue.
- Development of school branded marketing merchandise will begin.

#### January 2018 - (Selection Process and Preliminary Planning period)

- Upon CSAB recommendation for fast track approval, applications will be distributed to the Town of Hobgood Business Office, the school office, sent to logged addresses requesting mailed applications, and a downloadable copy of the application will be ready to add to the website.
- Public lottery volunteers will be notified of the CSAB recommendation.
- Planning will begin for the open enrollment school open house(s).
- Community outreach and marketing efforts will continue.
- Continued development of school branded marketing merchandise.
- Provide marketing materials to local realtors and local businesses.

#### February 2018 – (Final approval, Student Enrollment, and Planning Period)

- Upon final SBE approval, dates for open enrollment will be set. Notice of the dates for open enrollment and the date for a public lottery (if necessary) will immediately be sent to the Town of Hobgood Business Office, logged addresses requesting mailed applications, local community organizations, churches and local governments. Notices for the dates of open enrollment and the public lottery will be posted in the local communities including post offices and businesses. The school website will be updated with the dates of open enrollment and the public lottery.
- Public lottery volunteers will be confirmed and materials procured.
- Plans for the open enrollment open house(s) will be finalized.
- Open enrollment and public lottery dates will be promoted via social media.
- Community outreach and marketing efforts will continue.
- Upon receipt of final SBE approval, school branded marketing merchandise will be ordered.

#### March 2018 (Final approval, Student Enrollment, and Planning Period)

- Open enrollment begins and applications will be accepted via USPS mail to 201 Beech St., Hobgood, NC 27843 or in person at the school office at the same address so the date and time of receipt can be accurately recorded by the designated office personnel.
- Open House(s) will be held.
- Appointments for in person and virtual meetings for potential applicants unable to attend the open house(s) will be arranged and held.
- The annual Hobgood Academy Seafood Festival fundraiser will be held. Marketing materials and applications will be available.
- Community outreach and marketing efforts will continue.

#### April 2018 (Final approval, Student Enrollment, and Planning Period)

- After open enrollment closes, official confirmation of the public lottery date and time will be issued. Notice of the public lottery will be posted in the same manner as the notice of open enrollment.
- Lottery volunteers will receive confirmation and details for the public lottery.
- The public lottery may be held this month if time permits based on the last date of the open enrollment.
- Community outreach and marketing efforts will continue.
- After open enrollment closes, the website will be updated to say that the open enrollment period is closed but applications will be accepted for any open seats available after the lottery or placed on the resulting wait list.
- Planning for potential summer enrichment classes, associated marketing materials and High School resume/application building opportunities.

#### May 2018 (Final approval, Student Enrollment, and Planning Period)

- The public lottery will be held if not held in April.
- Update with pictures of the first public lottery on website and social media.
- Results of the public lottery will be communicated to applicants via USPS or email, along with welcome packages with instructions for the enrollment process for accepted students and wait list information for those on the wait list.
- Lottery results will be reported to the board for initial discussion regarding marketing strategy.
- Any remaining open seats will be identified and targeted marketing aimed at filling these seats will begin.
- Distribute marketing materials via website, USPS, email and social media for summer enrichment classes and High School resume/application building opportunities. (creating family engagement)

#### June 2018 (Final approval, Student Enrollment, and Planning Period)

- Targeted marketing efforts aimed at filling any open seats will continue.
- Enrollment information will be reported to the board to discuss enrollment and results of open seat target marketing results.
- Summer 2018 Family Outreach will be sent to enrolled students via website, USPS, email and social media with information about strategies to stay healthy during the summer, summer academic slide prevention, and a listing of upcoming activities. (building engagement and excitement for new school year)

#### July 2018 (Final approval, Student Enrollment, and Planning Period)

- Hobgood Fourth of July Celebration - Hobgood Academy will have a booth with marketing materials including application information run by students, staff, families, and board members.
- Preparation of back to school information packets including supply lists, pre orders for school merchandise, upcoming back to school supplies distribution events, high school events (i.e. ACT/SAT registration dates and links), 2018-2019 school calendar, family volunteer opportunities, and current student handbook.
- Targeted marketing efforts aimed at filling any open seats will continue.
- Activities update via website and social media.

#### August 2018 (First 20 days of school)

- Scotland Neck Crepe Myrtle Festival - Hobgood Academy will have a booth with marketing materials including application information run by students, staff, families, and board members.
- Distribute back to school information packets.
- Back to school open house and official ribbon cutting for Hobgood Academy Charter School.
- Targeted marketing efforts aimed at filling any open seats will continue.
- Activities update via website and social media.
- During the first week of school, periodic board updates with the number of students to monitor enrollment vs. attendance.

#### September 2018 (First 20 days of school)

- Revision of marketing materials to include Ribbon cutting pictures and first day of school coverage.
- Activities update via website and social media.
- Preparation of updated presentation with school opening information and upcoming open enrollment period for the 2019-2020 school year.
- Thank you letters with pictures of school opening sent to supporters.

- Prepare Fall 2018 Family Outreach. Include: ribbon cutting and back to school pictures, upcoming events, family volunteering opportunities, thank you for support, information about next open enrollment period, high school events (SAT/ACT dates and links), class activities

#### October 2018 (First Semester of School)

- Beginning of the month – Distribute Fall 2018 Family Outreach materials
- Beginning of the month – report to the board the ADM used for funding purposes.
- Hobgood Cotton Festival – 2<sup>nd</sup> Saturday in October
- Hobgood Academy Charter School Fall Festival
- Activities update via website and social media.
- Begin community outreach with updated presentation– focus on thanking supporters, showing opening of school, reiterate mission and goals.
- Revisit marketing strategy with board in regards to Open Enrollment for 2019-2020 school year.
- Start preparing materials for returning student forms.

#### November 2018 (First Semester of School)

- Activities update via website and social media.
- Enter float in local holiday parades. (PHA assistance)
- Continue community outreach with updated presentation– focus on thanking supporters, showing opening of school, reiterate mission and goals, upcoming events.
- Prepare Open enrollment notices for the 2019-2020 school year as per board approved marketing plan.
- Begin planning for Open House(s) in January 2019.
- Prepare materials for returning student forms.
- Prepare Winter 2018 Family Outreach. Include: Fall Festival and Cotton Festival pictures, upcoming events, family volunteering opportunities, thank you for support, mention returning school forms and importance for returning before deadline, information about next open enrollment period, high school events (SAT/ACT dates and links), class activities

#### December 2018 (First Semester of School)

- At the beginning of the month, Distribute Winter 2018 Family Outreach.
- At the beginning of the month, distribute returning student forms with January 2, 2020 deadline.
- By the middle of the month, distribute open enrollment notices and applications for the 2019-2020 school year via board approved marketing plan.
- Activities update via website and social media.
- Potential volunteers for the public lottery will be identified and approached.
- Begin compiling results of returning student forms.

#### January 2019 (Open Enrollment/Enrollment Period for 2018-2019)

- Activities update via website and social media.
- January 3 to January 7 – Finish compiling results of returning student forms. Determine open seats for the 2019-2020 school year.
- Open Enrollment begins January 8.
- Open Enrollment Open House(s)

- Appointments for in person and virtual meetings for potential applicants unable to attend the open house(s) will be arranged and held.
- Confirm volunteers for lottery and procure lottery materials.

#### February 2019 (Open Enrollment/Enrollment Period for 2018-2019)

- Activities update via website and social media.
- Continue community outreach.
- Open Enrollment ends.
- Look at updating branded school merchandise.
- Prepare Spring 2019 Family Outreach. Include: Parade and holiday pictures, upcoming events, family volunteering opportunities, thank you for support, mention upcoming lottery and enrollment process, high school events (SAT/ACT dates and links), class activities

#### March 2019 (Open Enrollment/Enrollment Period for 2018-2019)

- Beginning of the month, distribute Spring 2019 Family Outreach.
- Activities update via website and social media.
- Continue community outreach.
- Public Lottery
- Results of the public lottery will be communicated to applicants via USPS or email, along with welcome packages with instructions for the enrollment process for accepted students and wait list information for those on the wait list.

#### April 2019 (finalizing plans for year two)

- Activities update via website and social media.
- Continue community outreach and update presentation with application and lottery results, upcoming events.
- Planning for potential summer enrichment classes, associated marketing materials and High School resume/application building opportunities.
- Plan for Summer 2019 Family Outreach.
- Any remaining open seats will be identified and targeted marketing aimed at filling these seats will begin.
- Approve and order updated school branded merchandise.

#### May 2019 (Finalizing plans for year 2)

- Activities update via website and social media.
- Continued targeted marketing efforts aimed at filling open seats.
- Distribute Summer 2019 Family Outreach.
- Prepare enrollment data and lottery results for presentation to the board.

#### June 2019 (Finalizing plans for year 2)

- Activities update via website and social media.
- Present enrollment data, lottery results, and grade promotion results to board for review of marketing plan and enrollment-admissions policy.
- Targeted marketing efforts aimed at filling any open seats will continue.

## July 2019 (Finalizing plans for year 2)

- Activities update via website and social media.
- Targeted marketing efforts aimed at filling any open seats will continue.
- Hobgood Fourth of July Celebration – booth with marketing materials
- Preparation of back to school information packets including supply lists, pre orders for school merchandise, upcoming back to school supplies distribution events, high school events (i.e. ACT/SAT registration dates and links), 2018-2019 school calendar, family volunteer opportunities, and current student handbook.

Marketing actions will follow the same type of timeline for years 3-5, but specific activities may be modified in response to performance reviews during years 1-2. The marketing action plan is expected to be a dynamic document that will change as circumstances change and new opportunities arise.

**Appendix P:**

**Charter School Required Signature Certification**

**Note:** Outlined below is a list of areas that must be certified by the proposed Board of Directors. Any forms Not Applicable to the proposed charter school indicate below with N/A and provide a brief explanation for providing such response.

Serving on a public charter school board is a position of public trust and board members of a North Carolina public charter school; you are responsible for ensuring the quality of the school's entire program, competent stewardship of public funds, the school's fulfillment of its public obligations, all terms of its charter, and understanding/overseeing all third party contracts with individuals or companies.

- ❖ The selected Board Attorney that he/she has reviewed with the full Board of Directors, listed within the application, all the governance documents and liabilities associated with being on the Board of a Non Profit Corporation.

- Name of the Selected Board Attorney: James C. Marrow
- Date of Review: 9/11/17 @ 7pm
- Signature of Board Members Present (Add Signature Lines as Needed):
  - [Signature]
  - Juliana W. Haw
  - Dorothy R. Armstrong
  - Rossand L. Dalbey
  - J. Scott King
  - Phil H. May
  - Nicole Flanagan
  - \_\_\_\_\_
  - \_\_\_\_\_

- ❖ The selected Board Auditor that he/she has reviewed with the full Board of Directors, listed within the application, all the items required for the annual audit and 990 preparations.

- Name of the Selected Board Auditor: Andrew Harris CPA PLLC
- Date of Review: 9/11/2017 @ 6:30 PM
- Signature of Board Members Present (Add Signature Lines as Needed):
  - Nicole Flanagan
  - Juliana W. Haw
  - Rossand L. Dalbey
  - Dorothy R. Armstrong
  - Phil H. May
  - J. Scott King
  - Bryan L. King

❖ If contracting with a CMO/EMO, that the selected management company has reviewed with the full Board of Directors, listed within the application, all the items required and the associated management contract and operations.

- Name of the Contact for Selected EMO/CMO: \_\_\_\_\_
- Date of Review: \_\_\_\_\_
- Signature of Board Members Present (Add Signature Lines as Needed):
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
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❖ If contracting with a financial management service provider that the selected financial service provider has reviewed with the full Board of Directors, listed within the application, all the financial processes and services provided.

- Name of the Contact: \_\_\_\_\_
- Name of the Selected Financial Service Provider: \_\_\_\_\_
- Date of Review: \_\_\_\_\_
- Signature of Board Members Present (Add Signature Lines as Needed):
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  - \_\_\_\_\_
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  - \_\_\_\_\_

❖ If the proposed Board of Directors, listed within the application, is contracting with a service provider to operate PowerSchool that the service provider has reviewed all of the financial processes and services provided.

- Name of the Contact: \_\_\_\_\_
- Name of the Selected PowerSchool Service Provider: \_\_\_\_\_
- Date of Review: \_\_\_\_\_
- Signature of Board Members Present (Add Signature Lines as Needed):
  - \_\_\_\_\_
  - \_\_\_\_\_
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**Certification**

I, J. Scott Kiser, as Board Chair, certify that each Board Member has reviewed and participated in the selection of the individuals and vendors attached to this document as evidenced by the full Board of Director signatures outlined above. The information I am providing to the North Carolina State Board of Education as Holgood Academy Charter School is true and correct in every respect.

J. Scott Kiser  
Signature

Sept. 19, 2017  
Date