			** PUBLIC DISCLOSURE COPY *	*				
	0	00	Return of Organization Exempt From	Income Tax	OMB No. 1545-0047			
Fo	mΥ	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)	2021			
-		<i></i> 	Do not enter social security numbers on this form as it ma	y be made public.	Open to Public			
Inte	rnal Rev	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the late	est information.	Inspection			
Α	For th	e 2021 calend	ar year, or tax year beginning $JUL 1$, 2021 and ending	<u>JUN 30, 2022</u>				
B Check if applicable: C Name of organization D Employer identification								
	Addr							
L	chan	ge PURP	OSE PREPARATORY ACADEMY, INC.		_			
L	Nam Chan	ge Doing b	usiness as	46-0693776	, 			
	returi	n Number	and street (or P.O. box if mail is not delivered to street address) Room/su					
		n/ 220	VENTURE CIRCLE	615-724-07	7,881,900.			
_	termin- ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$							
	returi Appli	n NASH		H(a) Is this a group return				
L	tion pend		nd address of principal officer: LAGRA NEWMAN	for subordinates?				
-	_			H(b) Are all subordinates includ				
		kempt status:		527 If "No," attach a list				
			PURPOSEPREP.ORG X Corporation Trust Association Other L Y	H(c) Group exemption n				
	art I			ear of formation: 2012 M S	tate of legal domicile: 1 IN			
•	T		e the organization's mission or most significant activities: THROUGH		TTT.TTM			
a	1		ALITY INSTRUCTION, AND POSITIVE CHARAC					
an an	2		$x \models \square$ if the organization discontinued its operations or disposed of m					
/err	3				. 14			
Governance	4		ting members of the governing body (Part VI, line 1a) lependent voting members of the governing body (Part VI, line 1b)		14			
			of individuals employed in calendar year 2021 (Part V, line 2a)		0			
ă.	6		of volunteers (estimate if necessary)		0			
Activities &	7 a		d business revenue from Part VIII, column (C), line 12		0.			
Ā	b		business taxable income from Form 990-T, Part I, line 11		0.			
			, , ,	Prior Year	Current Year			
	8	Contributions	and grants (Part VIII, line 1h)	6,195,450.	7,866,904.			
Revenue	9		ce revenue (Part VIII, line 2g)	0.	0.			
eve	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)	5,380.	6,757.			
α	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,141.	8,239.			
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,201,971.	7,881,900.			
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.			
	14	Benefits paid	to or for members (Part IX, column (A), line 4)	0.	0.			
v d	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	2,879,464.	3,117,240.			
Fxnenses	16 a	Professional f	undraising fees (Part IX, column (A), line 11e) $20,788$.	0.	0.			
, and a	b			1 018 805				
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,317,705.	2,599,922.			
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,197,169.	5,717,162.			
	19	Revenue less	expenses. Subtract line 18 from line 12	2,004,802.	2,164,738.			
Net Assets or				Beginning of Current Year	End of Year			
sset	20	Total assets (8,996,709.	10,740,534.			
etA	21		(Part X, line 26)	5,103,591.	4,682,678.			
	<u> 22</u> art II		fund balances. Subtract line 21 from line 20	3,893,118.	6,057,856.			
		-	I declare that I have examined this return, including accompanying schedules and stat	amonto and to the best of my lin				
			. Declaration of preparer (other than officer) is based on all information of which prepa		owieuye allu bellel, it is			
<u>a ut</u>	,			מיסה המס מוזץ אווטשופטטטר.				

Sign		Signature of	f officer				Date	
Here		LAGRA	NEWMAN,	FOUNDER				
		Type or prin	t name and title					
	Prin	nt/Type prepar	er's name		Preparer's signature	Date	Check	PTIN
Paid	RO	DNEY C	BROWER			05/12		₽00168898
Preparer Firm's name CROSSLIN, PLLC					Firm's EIN 🕨 27	-5360847		
Use Only	Firn	n's address 🕨	3803 BEI	OFORD AVE	NUE, SUITE 103			
NASHVILLE, TN 37215							Phone no. (615) 320-5500
May the IF	RS di	iscuss this re	eturn with the pre	eparer shown abo	ve? See instructions			X Yes No
132001 12-09	9-21	LHA For	Paperwork Re	duction Act Notic	e, see the separate instructions.			Form 990 (2021)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

		16-0693776 Page 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u>X</u>
1	Briefly describe the organization's mission: THROUGH RIGOROUS CURRICULUM, HIGH-QUALITY INSTRUCTION, ANI CHARACTER DEVELOPMENT, PURPOSE PREPARATORY ACADEMY CHARTER	
	ENSURES THAT ALL KINDERGARTEN THROUGH GRADE FOUR STUDENTS	
	ACADEMIC SKILLS, KNOWLEDGE, AND ETHICAL FOUNDATION TO BE S	
		ET ON THE
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 me Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	revenue, if any, for each program service reported.	
4a		,
	PURPOSE PREP PROVIDES AN ACADEMICALLY CHALLENGING, DISCIPI	
	JOYFUL ELEMENTARY SCHOOL TO CHILDREN OF NASHVILLE. WITH AN	
	FOCUS ON THE ACQUISITION OF ESSENTIAL LITERACY SKILLS, PUR	
	PROVIDES TARGETED AND RIGOROUS INSTRUCTION IN EACH CORE SU	
	THE ACADEMIC NEEDS OF EVERY SCHOLAR. PURPOSE PREP HOLDS SC	
	ACCOUNTABLE FOR DEMONSTRATING EXCELLENT BEHAVIOR BY TEACH	
	CHARACTER SKILLS NECESSARY FOR THEIR SUCCESS, SPECIFICALLY	THE SCHOOL'S
	<u>RISE WITH PURPOSE VALUES - PURPOSE, RESPECT, INTEGRITY,</u>	
	SELF-DETERMINATION, AND EXCELLENCE.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$;)
4c	Code:) (Expenses \$ including grants of \$) (Revenue \$	
		,,
44	Other program services (Describe on Schodulo O)	
4d		١
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 3,412,531.	
-+0		F 990 (2024)

Form	990	(2021)
	330	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	v
-	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
L	Schedule D, Parts XI and XII	12a	Δ	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	106		x
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	Х	
13 14a		14a	- 23	x
	Did the organization maintain an office, employees, or agents outside of the United States?	140		- 23
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	110		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		X
20a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		X

Form	990	(2021)
	330	

 Form 990 (2021)
 PURPOSE
 PREPARATORY
 ACADEMY,
 INC.

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

			Yes	No		
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on					
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current					
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, " complete					
	Schedule J	23		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	24a		X		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b				
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease					
	any tax-exempt bonds?	24c				
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d				
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		х		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I					
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			77		
~~	Schedule L, Part I	25b		X		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current					
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			х		
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u></u>		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,					
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		х		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21				
20	instructions for applicable filing thresholds, conditions, and exceptions):					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>					
u	"Yes," complete Schedule L, Part IV	28a		х		
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х		
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If					
	"Yes," complete Schedule L, Part IV	28c		Х		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation					
	contributions? If "Yes," complete Schedule M	30		X		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete					
	Schedule N, Part II	32		X		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations					
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v		
	Part V, line 1	34		X X		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a				
D	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 paction 512(b)(12)2 (c) was a second to 0 (c) of the D. D. (c) (c) (c) a second to 0 (c)	35b				
36	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	330				
00	If "Yes," complete Schedule R, Part V, line 2	36		х		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?					
	Note: All Form 990 filers are required to complete Schedule O	38	Х			
Par						
	Check if Schedule O contains a response or note to any line in this Part V					
			Yes	No		
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1aEnter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b	-				
b						

(gambling) winnings to prize winners?

1c

Form 990 (2021)		PREPARATORY		
Part V Statem	ents Regarding Ot	her IRS Filings and	d Tax Complia	ance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	0		
э а		9a		
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	0.0		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	4.6		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	16		x
	excess parachute payment(s) during the year?	15		- 23
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.	10		
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes " complete Form 6069			

Form 990 (2021)
Part VI	Go

PURPOSE PREPARATORY ACADEMY, INC.

46-0693776 Page **6**

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

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule 0	-		110 1	copon	50
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1 a	14			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with a	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3	L	X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	s filed?	4	ļ	X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5	L	X
6	Did the organization have members or stockholders?			6	L	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			
	more members of the governing body?			7a	L	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockho	ders, or			
	persons other than the governing body?			7b	L	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by the	following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
0	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	<u> </u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	Code.)			T
10-	Did the eventiantian have lead abortons by a stillister (10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?			10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such c			104		
44-			o filing the form?	10b	х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo Describe on Schedule O the process, if any, used by the organization to review this Form 990.	ly Deloi		<u>11a</u>		
b 120	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12a	X	-
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i>			120		-
С		,		12c		x
13	on Schedule O how this was done Did the organization have a written whistleblower policy?			13	х	
14	Did the organization have a written whistleblower policy?			14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approv	al hy in	tenendent	14		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a		x
b	Other officers or key employees of the organization			15b		x
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			10.0		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	ith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	-				
	exempt status with respect to such arrangements?			16b	l	
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990	T (section 501(c)(3)s	only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			-		
	Own website Another's website X Upon request Other (explain	in on Sc	hedule ()			

she mopeotion.	indicate new yea made these	available. Oneok an that ap	יעיקי
Own website	Another's website	X Upon request	

Own website	Another's website	X Upon request	Other (explain on Schedule O)	
Describe on Schedule O	whether (and if so, how) the	organization made its go	overning documents, conflict of interest policy,	and financial
statements available to t	he public during the tax yea	r.		

			_
EDTEC, INC.	- (615)763-5950		
,	· · · · · · · ·	ossesses the organization's books and records	

19

PURPOSE PREPARATORY ACADEMY, INC.

Part VII	Compensation of Officers,	, Directors, Trustees,	, Key Employees,	Highest C	Compensated
	Employees, and Independe	ent Contractors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one) than (ane	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	id a d	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		66	suadu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con	_	1033-1120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) LAGRA NEWMAN	40.00	_	_							
HEAD OF SCHOOL		1				x		136,132.	0.	3,595.
(2) CHARLANDRA WATSON	1.00									
CHAIR		Х		Х				0.	0.	0.
(3) PERRY GOOCH	1.00									
DIRECTOR		Х						0.	0.	0.
(4) SALLY NORTON	1.00									
DIRECTOR		Х						0.	0.	0.
(5) MATT HANCOCK	1.00									
DIRECTOR		Х						0.	0.	0.
(6) DR. JERRI HAYNES	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(7) LARA HENLEY	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(8) KATHY NELSON	1.00								0	
DIRECTOR (9) ROHIT PADMANABHAN	1.00	Х						0.	0.	0.
(9) ROHIT PADMANABHAN DIRECTOR	1.00	x						0.	0.	0.
(10) DOMONIQUE TOWNSEND	1.00	^						0.	0.	<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
(11) AMY BROWN	1.00	^						0.	0.	0.
SECRETARY	1.00	x		x				0.	0.	0.
(12) DALE MITCHELL	1.00									<u>0.</u>
TREASURER	1.00	х		x				0.	0.	0.
(13) RYANN CASEY	1.00									
VICE CHAIR		x		x				0.	0.	0.
		1								
		 								

	PREPARAT	l O F	RΥ	AC	'AD	EM	У,	INC.	46-00	693'	776	Pa	age 8
Part VII Section A. Officers, Directors, Tru	istees, Key Em	ploy	ees,	anc	d Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)							(D)	(E)			(F)	
Name and title	Average	(do		Pos heck		l than c	one	Reportable	Reportable		Es	timate	d
	hours per	box	, unle	ss per	rson i	s both r/trust	n an	compensation	compensatio		an	nount	of
	week					1711 US		- from	from related			other	
	(list any hours for	Individual trustee or director						the	organization (W-2/1099-MIS			pensat om the	
	related	e or d	tee			sated		organization (W-2/1099-MISC/	1099-NEC)			anizati	
	organizations	ruste	Institutional trustee		ee	m pe n		1099-NEC)	1033-NEO)		•	d relate	
	below	dual t	utiona	-	nploy	st col	er	,				nizatio	
	line)	Indivi	Instit	Officer	Key employee	Highest compensated employee	Former				Ŭ		
		1											
		1											
		-											
		-											
		-											
1b Subtotal	•							136,132.		0.		3,59	95.
c Total from continuation sheets to Part								0.		0.			0.
d Total (add lines 1b and 1c)								136,132.		0.		3,59	95.
2 Total number of individuals (including but	not limited to th	iose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	e			
compensation from the organization													1
										ı		Yes	No
3 Did the organization list any former office			-	•			•						
line 1a? If "Yes," complete Schedule J for											3		X
4 For any individual listed on line 1a, is the													
and related organizations greater than \$1											4		X
5 Did any person listed on line 1a receive o											_		v
rendered to the organization? <i>If</i> "Yes," cc Section B. Independent Contractors	mplete Schedul	e J f	or sı	ich i	oers	on .			<u></u>		5		Х
1 Complete this table for your five highest of	omponsated in	lono	ndo	ot or	ontre	octor	re th	ant received more than 4	100 000 of com	oncat	ion fro	m	
the organization. Report compensation for										Jensai		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(A)		care	nuii	ig w	iui c			(B)	car.		(C	:)	
Name and busines	ss address	N	ONE	3				Description of s	ervices	С		nsatior	n
							_						
	Constant in the state												
2 Total number of independent contractors \$100,000 of compensation from the orga		ot IIr	niteo	to to	thos (τed	above) who received me	ore than				

	n 990 (PARATORY A	CADEMY, INC	с.	46-0693	776 Page 9
Pa	rt VII	I Statement of Re	venue					
		Check if Schedule O	contains a respor	nse or note to any lin	e in this Part VIII			
					(A)	(B)	(C)	(D) Revenue excluded
					Total revenue	Related or exempt function revenue	Unrelated business revenue	
								sections 512 - 514
ts S	1 a	Federated campaigns	1a					
an	b		1b					
Contributions, Gifts, Grants and Other Similar Amounts	с	Fundraising events						
ifts ır A	d	Related organizations						
i, G nila	e	Government grants (contr		7,603,216.				
Sir	f	All other contributions, gifts,						
utio	•	similar amounts not included		263,688.				
trib Otl	g	Noncash contributions included in						
)on	9 b	Total. Add lines 1a-1f			7,866,904.			
0 6		Total. Aud lines la II		Business Code	7,000,004.			
	•							
rice	2 a							
erv	b							
n S 'eni	С							
Jrar Rev	d							
Program Service Revenue	е							
д.	f	All other program service						
	g	Total. Add lines 2a-2f						
	3	Investment income (includ						
		other similar amounts)			6,757.			6,757.
	4	Income from investment of	-	-				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents	6a					
	b	Less: rental expenses	6b					
	с	Rental income or (loss)	6c					
	d	Net rental income or (loss		🕨				
	7 a	Gross amount from sales of	(i) Securiti	es (ii) Other				
		assets other than inventory	7a					
	b	Less: cost or other basis						
e		and sales expenses	7b					
svenue	с	Gain or (loss)	7c					
	d	Net gain or (loss)						
Other Ro		Gross income from fundraisi						
oth		including \$						
		contributions reported on						
		Part IV, line 18		8a				
	b	Less: direct expenses		8b				
		Net income or (loss) from						
		Gross income from gamin						
		Part IV, line 19		9a				
	h	Less: direct expenses		9b				
		Net income or (loss) from		••				
		Gross sales of inventory, I						
		and allowances		10a				
	h	Less: cost of goods sold		10b				
		Net income or (loss) from		· · · ·				
_			Sales of inventor	Business Code				
sn	11 ~	MISCELLANEOUS	5	611110	8,239.	8,239.		
Miscellaneous Revenue	l l a b				5,255.			
illar ven	и 2							
Sce	ט וה							
Σ	u c	All other revenue			8,239.			
	<u>е</u> 12	Total revenue. See instruction			7,881,900.		0.	6,757.
	14	I JULAI I GVEILUE. JEE IIISU UCUI	UII3	7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 0,400.		

Check here

if following SOP 98-2 (ASC 958-720)

٦

Γ

Form 990 (2021)

	Check if Schedule O contains a respon			(0)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	140,721.		140,721.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,430,742.	1,635,413.	795,329.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	12,384.	9,288.	3,096.	
9	Other employee benefits	343,428.	257,571.	85,857.	
10	Payroll taxes	189,965.	142,474.	47,491.	
11	Fees for services (nonemployees):	•		,	
	Management	757,868.	319,155.	438,713.	
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
Э	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	117,548.		117,548.	
14	Information technology				
1 4 15	Royalties				
15 16		271,888.	89,254.	182,634.	
10 17	Occupancy	298,213.	298,213.	102,0340	
	Travel Payments of travel or entertainment expenses	250,215.	250,215.		
8	,				
	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings	129,526.		129,526.	
20	Interest	127,520.		127,5200	
21	Payments to affiliates Depreciation, depletion, and amortization	100,570.	85,485.	15,085.	
22	. [49,245.	05,405.	49,245.	
23	Insurance	49,443.		49,443.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	200 064	200 064		
	FOOD SERVICES	300,064.	300,064.	270 500	
b	OTHER EXPENSES	282,766.	4,168.	278,598.	
С	INSTRUCTIONAL EXPENSES	147,290.	147,290.		
d	STAFF DEVELOPMENT	111,336.	111,336.		00 700
	All other expenses	33,608.	12,820.	2 2 2 2 4 2	20,788
25	Total functional expenses. Add lines 1 through 24e	5,717,162.	3,412,531.	2,283,843.	20,788
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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

Form 990 (2021)

PURPOSE PREPARATORY	Z ACADEMY,	INC
---------------------	------------	-----

•

46-0693776 Page 11

		Check if Schedule O contains a response or not	e to any l	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			3,142,643.	1	3,088,579.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			507,646.	4	2,449,534.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif	ied perso	ons (as defined			
		under section 4958(f)(1)), and persons described	in sectio	on 4958(c)(3)(B)		6	
Ś	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use				8	
As	9	Description and the formed of the second			474,933.	9	714,150.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		4,838,504.			
	b	Less: accumulated depreciation	10b	1,190,856.	3,691,952.	10c	3,647,648.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			1,179,535.	15	840,623.
	16	Total assets. Add lines 1 through 15 (must equa	al line 33)	8,996,709.	16	10,740,534.
	17	Accounts payable and accrued expenses	168,887.	17	301,605.		
	18	Grants payable		L	330,000.	18	280,000.
	19	Deferred revenue			1,310,181.	19	935,331.
	20	Tax-exempt bond liabilities		L		20	
	21	Escrow or custodial account liability. Complete F	Part IV of	Schedule D		21	
Se	22	Loans and other payables to any current or form	er office	r, director,			
Liabilities		trustee, key employee, creator or founder, subst	antial co	ntributor, or 35%			
iab		controlled entity or family member of any of thes	e persor	ns		22	
	23	Secured mortgages and notes payable to unrela			3,294,523.	23	3,165,742.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24). (Complete Part X			
		of Schedule D				25	4 600 670
	26	Total liabilities. Add lines 17 through 25			5,103,591.	26	4,682,678.
s		Organizations that follow FASB ASC 958, che	ck here				
ice.		and complete lines 27, 28, 32, and 33.					
alar	27			······		27	
Ä	28					28	
ŭ		Organizations that do not follow FASB ASC 98	58, chec	khere 🕨 👗			
Net Assets or Fund Balances		and complete lines 29 through 33.			^		^
ts c	29	Capital stock or trust principal, or current funds			0.	29	0.
sse	30	Paid-in or capital surplus, or land, building, or eq			0.	30	0.
žА	31	Retained earnings, endowment, accumulated inc			3,893,118.	31	6,057,856.
Ne	32				3,893,118.	32	6,057,856.
	33	Total liabilities and net assets/fund balances			8,996,709.	33	10,740,534.

Form 990 (2021)

Form 990 (
Part X	Bala	ance	Sheet

Form	1990 (2021) PURPOSE PREPARATORY ACADEMY, INC.	46-06	93776	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,881		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,717	<u>,1</u>	<u>52.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	2,164		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,893	, 11	18.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	6,057	, 8!	56.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b		<u> </u>
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2021
Open to Public Inspection

Nam	e of t	he organization							identification number	
_				ATORY ACADEMY					6-0693776	
Pa	τı	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.		
The o	organi	ization is not a private found	lation because it is: (I	For lines 1 through 12, cl	heck only	one box.)				
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).			
2	Х	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)					
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).			
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,	
		city, and state:								
5		An organization operated for	or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in	
		section 170(b)(1)(A)(iv). (0	Complete Part II.)							
6		A federal, state, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7		An organization that norma	-					e general r	oublic described in	
		section 170(b)(1)(A)(vi). (C	•		5			5		
8		A community trust describe		1)(A)(vi). (Complete Par	EIL)					
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 of a normand-grant conege of agriculture (see instructions). Enter the name, only, and state of the conege of university:								
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns membersh	in fees and	d aross receipts from	
10		activities related to its exen	•				-	•	•	
									-	
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
11		An organization organized a		volv to tost for public sat	aty Soo	soction 50	O(a)(A)			
12		An organization organized a		•	•			rny out the	nurnoses of one or	
12		more publicly supported or		•	•			•	• •	
		lines 12a through 12d that	-							
~		Type I. A supporting orga	• •					-	aivina	
а			-	-	• • • •	-				
		the supported organization			majority c	n the direc			ipporting	
		organization. You must o	-		:			e (e) less leses		
b		Type II. A supporting org	-				-		-	
		control or management o			ame perso	ns that col	ntroi or manaç	je the supp	orted	
		organization(s). You mus								
С		J Type III functionally inte	• • • •					ly integrate	a with,	
		its supported organizatio		-						
d		Type III non-functionally						-		
		that is not functionally int			•		-	an attentiv	/eness	
		requirement (see instruct								
е		Check this box if the orga					Type I, Type I	II, Type III		
		functionally integrated, or		nally integrated supporting	ng organiz	ation.			[]	
f		er the number of supported of	•							
g		vide the following information i) Name of supported	n about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of	monetany	(vi) Amount of other	
	,	organization		(described on lines 1-10	in your governi	ng document?	support (see in	-	support (see instructions)	
				above (see instructions))	Yes	No				
Tota	I									

Schedule	A (Form 990)	2021 (
Part II	Suppor	t Scł

PURPOSE PREPARATORY ACADEMY, INC.

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support			-			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2021 (I		•			14	%
	Public support percentage from 2020					15	%
16 a	33 1/3% support test - 2021. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2020. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	ere. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatic	on qualifies as a pu	blicly supported o	organization		►
b	10% -facts-and-circumstances test	- 2020. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, che	ck this box and s	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	/ supported organia	zation	▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17l	b, check this box a	nd see instructions	s ▶

Schedule A (Form 990) 2021

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do no	t					
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit t	0					
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, an	id					
3 received from disqualified persor	าร					
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from business	es					
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated busines activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12						
14 First 5 years. If the Form 990 is fo	r the organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizatic	on,
check this box and stop here						
Section C. Computation of Pu	blic Support Per	rcentage				
15 Public support percentage for 202	1 (line 8, column (f), c	divided by line 13, o	column (f))		15	%
16 Public support percentage from 20					16	%
Section D. Computation of Inv	estment Incom	e Percentage				
17 Investment income percentage for	2021 (line 10c, colu	mn (f), divided by li	ne 13, column (f))		17	%
18 Investment income percentage fro					18	%
19a 33 1/3% support tests - 2021. If	the organization did r	not check the box	on line 14, and line	e 15 is more than a	33 1/3%, and line 17	7 is not
more than 33 1/3%, check this boy	and stop here. The	e organization quali	fies as a publicly s	supported organization	ation	
b 33 1/3% support tests - 2020. If	the organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	nd
line 18 is not more than 33 1/3%, o	check this box and s t	top here. The orga	nization qualifies a	as a publicly supp	orted organization	
20 Private foundation. If the organiza	ation did not check a	box on line 14 19	a or 19b check th	his box and see in	structions	

Schedule A (Form 990) 2021

(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

			PREPARATORY			46-0693776	Page 3
Part III	Support Schedule for	r Organizatio	ons Described in S	ection 509(a)	(2)		

qualify under the tests listed below, please complete Part II.)

Section A. Public Support

132024 01-04-21

PURPOSE PREPARATORY ACADEMY, INC.

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

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

Section A. All Supporting Organizations

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

Schedule A (Form 990) 2021

Yes

No

Sche	dule A	(Form 990) 2021	PURPOSE	PREPARATORY	ACADEMY,	INC.	46-069377	6 Pa	age 5
Par	rt IV	Supporting Organiza	ations _{(contin}	ued)					
								Yes	No
11	Has t	he organization accepted a g	gift or contributio	on from any of the follow	ving persons?				
а	A per	son who directly or indirectly	/ controls, either	alone or together with	persons described	on lines 11b and			
	11c b	elow, the governing body of	a supported org	anization?			11a		
b	A fam	nily member of a person desc	cribed on line 11	a above?			11b		
с	A 35%	% controlled entity of a perso	n described on	line 11a or 11b above?	If "Yes" to line 11a	a, 11b, or 11c, provide			
		in Part VI.				-	11c		L
Sec	tion I	B. Type I Supporting C	Organization	S					
								Vas	No

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

Section C. Type II Supporting Organizations

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 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).

Section D.	All Typ	e III Sup	porting	Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- The organization satisfied the Activities Test. *Complete* **line 2** *below.* а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

c 🗌	The organization supported a governmental entity	Describe in Part VI how	you supported a governmental entity	(see instruction <u>s).</u>
-----	--	-------------------------	-------------------------------------	-----------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

2a

2b

3a

Yes No

No

Yes

1

	dule A (Form 990) 2021 PURPOSE PREPARATORY AC.			46-0693776 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualify	ng trust on	Nov. 20, 1970 (<i>explain i</i>	n Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	- 1
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
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	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting or	ganization (see

instructions).

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

PURPOSE	PREPARATORY	ACADEMY,	INC.

46-0693776 Page 7

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations (continu	ied)		
Secti	ction D - Distributions Current Year					
1	Amounts paid to supported organizations to accomplish exe		1			
2	Amounts paid to perform activity that directly furthers exemp					
	organizations, in excess of income from activity		2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - prior	ovide details in Part VI)		5		
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.	.		8		
9	Distributable amount for 2021 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
	·	(i)	(ii)		(iii)	
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2021	IS	Distributable Amount for 2021	
_1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
<u>a</u>	From 2016					
b	From 2017					
C	From 2018					
d	From 2019					
e	From 2020					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2021 distributable amount					
i	Carryover from 2016 not applied (see instructions)					
_ <u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2021 distributable amount					
c	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
	Excess from 2017					
	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
е	Excess from 2021					

Schedule A (Form 990) 2021

						16 0600000
Schedule A	(Form 990) 2021	PURPOSE	PREPARATORY	ACADEMY,	INC.	46-0693776 Page 8
Part VI	Supplemental Inform	nation. Provid	e the explanations requ	uired by Part II, line	e 10; Part II, line 17a or	17b; Part III, line 12;
	Part IV, Section A, lines 1,	2, 30, 30, 40, 40	, 5a, 6, 9a, 9b, 9c, 11a	, 11b, and 11c; Pa	IT IV, SECTION B, lines 1	and 2; Part IV, Section C, , Section B, line 1e; Part V,
	Section D, lines 5, 6, and	R and Part V Se	ction F lines 2 5 and	6 Also complete t	his part for any addition	al information
	(See instructions.)	o, and i are i, oo			no part for any addition	
	· · ·					

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2021

Employer identification number

	PURPOSE PREPARATORY ACADEMY, INC.	46-0693776
Organization type (ch		
Filers of:	Section:	
Form 990 or 990-EZ X 501(c)(3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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.

J 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 (entering "N/A" in column (b) instead of the contributor name and address), 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. Don't 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 \dots \blacktriangleright \$

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

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

Name of organization

123452 11-11-21

PURPOSE PREPARATORY ACADEMY, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person Payroll 25,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 2 X Person Payroll 30,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 165,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Person X Payroll 2,479,955. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 5,062,261. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. X 6 Person Payroll 61,000. Noncash \$ (Complete Part II for noncash contributions.)

Employer identification number

46-0693776

Name of organization

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		 \$			
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
Part I					
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			

123453 11-11-21

Page **3**

Employer identification number

46-0693776

Schedule B (Form 990) (2021)			Page 4	
Name of orga				Employer identification number	
PIIRPOST	E PREPARATORY ACADEMY,	INC.		46-0693776	
Part III	Exclusively religious, charitable, etc., contributi	ons to organizations described through (e) and the following li charitable, etc., contributions of \$1,0	ne entry For organi	7), (8), or (10) that total more than \$1,000 for the year	
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
<u>Part I</u> - 					
		(e) Transfer o	of gift		
-	Transferee's name, address, ar	nd ZIP + 4	Relati	onship of transferor to transferee	
-			I		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift				
-	Transferee's name, address, ar	nd ZIP + 4	Relati	onship of transferor to transferee	
-					
(a) No. from Part I -	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		(e) Transfer o	of gift		
-	Transferee's name, address, and ZIP + 4		Relati	onship of transferor to transferee	
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
-					
		(e) Transfer o	of gift		
-	Transferee's name, address, ar	nd ZIP + 4	Relati	onship of transferor to transferee	
-					

SCHEDULE [)
------------	---

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

PURPOSE PREPARATORY ACADEMY, INC.

Employer identification number 46-0693776

Pa	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin-		or Accounts. Complete if the		
		(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 v		d funds		
5	are the organization's property, subject to the organization's	-			
6	Did the organization inform all grantees, donors, and donor a				
U	for charitable purposes and not for the benefit of the donor of				
			ľ m m		
Pa			art IV line 7		
1	Purpose(s) of conservation easements held by the organization				
•	Preservation of land for public use (for example, recreat		a historically important land area		
	Protection of natural habitat		a certified historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied 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		
а	Total number of conservation easements				
b					
c	Number of conservation easements on a certified historic stru				
	Number of conservation easements included in (c) acquired a				
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, rele				
•	year				
4	Number of states where property subject to conservation eas	sement is located			
5	Does the organization have a written policy regarding the per				
•	violations, and enforcement of the conservation easements it		Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecting,				
-	►	5	5,		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	on easements during the year		
	► \$	5	5 ,		
8	Does each conservation easement reported on line 2(d) above	e 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				
	balance sheet, and include, if applicable, the text of the footn	-			
	organization's accounting for conservation easements.				
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	er Similar Assets.		
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and	d balance sheet works		
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in furt	herance of public		
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.				
b	b If the organization elected, as permitted under FASB 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		• • •		
	···· · · · · · · · · · · · · · · · · ·		N A		
2	If the organization received or held works of art, historical trea				
	the following amounts required to be reported under FASB A		-		
а	Revenue included on Form 990, Part VIII, line 1	-	• • •		
b	Assets included in Form 990, Part X				

Schedule D (Form 990) 2021

	dule D (Form 990) 2021 PURPOSE	PREPARATO	RY A	CADEMY	, INC.			46-06	93776	Pa	ge 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Other	Simila	r Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	ollowing that	t make sig	gnificant ι	use of its			
	collection items (check all that apply):										
а	Public exhibition	c			hange progra						
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	-		•	-			se in Part	XIII.		
5	During the year, did the organization solicit of		,		,				7		
De	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered	"Yes" on	Form 990	, Part IV,	ine 9, or		
4-	reported an amount on Form 990, Pa		· · · · · ·								
а	Is the organization an agent, trustee, custodi								Vee	X	Na
L	on Form 990, Part X?							∟	Yes	Δ	NO
b	If "Yes," explain the arrangement in Part XIII	and complete the lo	nowing t	able.					Amount		
~	Reginning balance						1c		7 4110 4110		
с С	Beginning balance Additions during the year										
ц В	Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par							0.				
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four	years b	ack
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1o	g, column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С		<u>%</u>									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	t are held ar	nd administer	red for the	e organiza	ation	г		
	by:									Yes	No
	(i) Unrelated organizations								3a(i)		
_	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
Par	t VI Land, Buildings, and Equipm		wment f	unas.							
1 41	Complete if the organization answere) Part IV	/ line 11a S	ee Form 990	Part X	line 10				
	Description of property	(a) Cost or c			or other		cumulate	d l	(d) Book	valuo	
	Description of property	basis (investr		. ,	(other)		preciation	,u	(u) BOOM	value	
19	Land	· · · · ·			0,000.				860	,00	0 -
	Buildings				2,066.	-	397,9	58.	2,754		
	Leasehold improvements				8,416.		518,41		_,	,	0.
	Equipment				7,051.		63,5		33	,54	
	Other				0,971.		10,9			,	0.
	. Add lines 1a through 1e. (Column (d) must e		X. colun						3,647	,64	8.
				,							

Schedule D (Form 990) 2021

	PARATORY ACAD	EMY, INC.	46-0693776 Page 3
Part VII Investments - Other Securities.	an Form 000 Port N/ line	11b Cas Form 000 Part V line 1	0
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	(b) Book value		2. st or end-of-year market value
			st of end-of-year market value
(1) Financial derivatives(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 1	3.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cos	st or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 1	
	Description		(b) Book value
(1) NET PENSION ASSET			692,207.
(2) TCRS STABILIZATION RESERVE	TRUST		92,379.
(3) OTHER CURRENT ASSETS			56,037.
<u>(4)</u>			
(5)			
(6)			
(7)(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		840,623.
Part X Other Liabilities.	10.)		
Complete if the organization answered "Yes" of	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)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		►

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

	edule D (Form 990) 2021 PURPOSE PREPARATORY ACAD			0693776 Page 4				
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.								
1	Total revenue, gains, and other support per audited financial statements		1	7,881,900.				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments 2a							
b	Donated services and use of facilities 2b							
С	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIII.)	2d						
е	Add lines 2a through 2d			0.				
3	Subtract line 2e from line 1		7,881,900.					
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIII.)	4b						
С	Add lines 4a and 4b	4c	0.					
		5	7,881,900.					
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			7,001,900.				
5 Ра	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State	ements With Expen		<u>, , , , , , , , , , , , , , , , , , , </u>				
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	ements With Expen		1.				
5 Ра 1	rt XII Reconciliation of Expenses per Audited Financial State	ements With Expen	ses per Return	5,717,162.				
_	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	ements With Expen	ses per Return	1.				
1	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	ements With Expen	ses per Return	1.				
1 2	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Perments With Expen 12a. 2a	ses per Return	1.				
1 2	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2a 2a 2b	ses per Return	1.				
1 2	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2a	ses per Return	1.				
1 2 a b c	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 12a. 2a 2b 2c 2d	ses per Return	n. <u>5,717,162.</u> 0.				
1 2 a b c	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 12a. 2b 2c 2d	ses per Return	n. 5,717,162.				
1 2 b c d e	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 12a. 2b 2c 2d	ses per Return	n. <u>5,717,162.</u> 0.				
1 2 b c d e 3	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 12a. 2b 2c 2d	ses per Return	n. <u>5,717,162.</u> 0.				
1 2 3 4	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d	ses per Return	n. <u>5,717,162.</u> 0.				
1 2 3 4 3 4	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 12a. 2b 2b 2c 2d 2d	ses per Return	n. <u>5,717,162.</u> 0. <u>5,717,162.</u> 0.				
1 2 d e 3 4 b c 5	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 12a. 2b 2c 2d 2d	ses per Return	n. 5,717,162. 0. 5,717,162.				

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.

SCHEDULE E		Schools	1	OMB No.	1545-004	47	
(Form 990)		Complete if the organization answered "Yes" on Form 990,		20	21		
		Part IV, line 13, or Form 990-EZ, Part VI, line 48.			2021		
Department of the Treasury Internal Revenue Service		Attach to Form 990 or Form 990-EZ.			Open to Public nspection		
		Employer ic	-		mber		
		PURPOSE PREPARATORY ACADEMY, INC.		-0693			
Par	tl						
					YES	NO	
1	-	tion have a racially nondiscriminatory policy toward students by statement in its charter,					
_		erning instrument, or in a resolution of its governing body?		1	X		
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarship						
3		ion publicized its racially nondiscriminatory policy on its primary publicly accessible Internet	scriolarships	? 2	X		
Ŭ		mes during its taxable year in a manner reasonably expected to be noticed by visitors to the					
		bugh newspaper or broadcast media during the period of solicitation for students, or during the	ne				
	registration period	l if it has no solicitation program, in a way that makes the policy known to all parts of the gen	eral				
		es? If "Yes," please describe. If "No," please explain. If you need more space, use Part II		3	Х		
		REPARATORY UTILIZES THE PUBLIC LOTTERY SYSTEM		_			
		DING MARKETING EFFORTS THROUGH THE SCHOOL DIST URES OUR RACIALLY NONDISCRIMINATORY POLICIES F(-			
		ION AND ENROLLMENT ARE PUBLICIZED THROUGHOUT TH		-			
	CITY/DIST		<u></u>	-			
4		tion maintain the following?		-			
					х		
		ting that scholarships and other financial assistance are awarded on a racially nondiscrimina	tory basis?	4b		X	
с	Copies of all catal	ogues, brochures, announcements, and other written communications to the public dealing					
		ssions, programs, and scholarships?			Х		
d		rial used by the organization or on its behalf to solicit contributions?		4d	X		
		No" to any of the above, please explain. If you need more space, use Part II. IAL ASSISTANCE OR SCHOLARSHIPS AWARDED. PURPOSI	7				
		RY ACADEMY IS A PUBLIC CHARTER SCHOOL WITH NO	<u> </u>	-			
	-	EQUIREMENT.		-			
		- K •		-			
5	Does the organiza	tion discriminate by race in any way with respect to:		_			
а	Students' rights o	r privileges?		. 5a		X	
b	Admissions policie	es?		. <u>5</u> b		X	
С	Employment of fa	culty or administrative staff?		5 c		X	
		ther financial assistance?				X X	
		es?				X	
		?				X	
		· Ilar activities?				X	
		Yes" to any of the above, please explain. If you need more space, use Part II.					
				_			
				_			
				-			
~	Dese the second			-	v		
		tion receive any financial aid or assistance from a governmental agency?			X	x	
U		ion's right to such aid ever been revoked or suspended? Yes" on either line 6a or line 6b, explain on Part II.				- 23	
7		tion certify that it has complied with the applicable requirements of sections 4.01 through					
-				7	х		
LHA		eduction Act Notice, see the Instructions for Form 990 or 990-EZ.		dule E (Fo	rm 990) 2021	

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

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE SCHOOL IS A PUBLIC, TUITION-FREE CHARTER SCHOOL AND RECEIVES FUNDS PER

PUPIL FROM THE STATE OF TENNESSEE.

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

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

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

Employer identification number

46-0693776

OMB No. 1545-0047

PURPOSE PREPARATORY ACADEMY, INC.

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

PURPOSE PREPARATORY ACADEMY CHARTER SCHOOL ENSURES THAT ALL

KNODERGARTEN THROUGH GRADE FOUR STUDENTS ACHIEVE THE ACADEMIC SKILLS,

KNOWLEDGE, AND ETHICAL FOUNDATION TO BE SET ON THE PATH TO COLLEGE.

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

PATH TO COLLEGE.

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

FORM 990 IS PREPARED AND REVIEWED BY PURPOSE PREPARATORY ACADEMY'S

BACK-OFFICE FINANCIAL PROVIDER. IT IS THEN GIVEN TO PURPOSE PREPARATORY'S

EXECUTIVE DIRECTOR AND THE FINANCE COMMITTEE FOR REVIEW AND APPROVAL. ALL

OTHER BOARD MEMBERS MAY OBTAIN A COPY FOR REVIEW UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

PURPOSE PREPARATORY ACADEMY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST OF THE DIRECTOR

OF FINANCE, NOTED ON THE STATE'S WEBSITE, AND ARE PROVIDED TO STAFF.

SPECIFIC GOVERNANCE DOCUMENTS MAY NOT BE AVAILABLE TO THE GENERAL PUBLIC

AND ARE REVIEWED ON AN AS NEEDED BASIS.