

2006

Open to Public  
InspectionForm **990-EZ****Short Form  
Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury  
Internal Revenue ServiceA For the 2006 calendar year, or tax year beginning January 1, 2006, and ending December 31, 2006

B Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

5851

182

030

07

122

L

200612 03130000 29 1B  
 RAISING HOPE (DBA LEAD Academy)  
 JEREMY D KANE  
 3202 IDAHO AVE  
 NASHVILLE TN 37209-3307

D Employer identification number

20-2526508

E Telephone number

(615) 498-2966

F Group Exemption  
Number ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach  
 a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: ☒ Cash ☐ Accrual  
Other (specify) ▶I Website: ▶ www.leadacademy.orgJ Organization type (check only one) — ☒ 501(c) ( 3 ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527H Check ☐ if the organization  
is not required to attach  
Schedule B (Form 990, 990-EZ, or 990-PF)K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 47 of the instructions.)**

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21			
Revenue	1	Contributions, gifts, grants, and similar amounts received														52,420															
	2	Program service revenue including government fees and contracts																													
	3	Membership dues and assessments																													
	4	Investment income																													
	5a	Gross amount from sale of assets other than inventory																													
	5b	Less: cost or other basis and sales expenses																													
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule).																													
	6	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>																													
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)																													
	6b	Less: direct expenses other than fundraising expenses																													
Expenses	6c	Net income or (loss) from special events and activities (line 6a less line 6b)																													
	7a	Gross sales of inventory, less returns and allowances																													
	7b	Less: cost of goods sold																													
	7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)																													
	8	Other revenue (describe ▶ _____)																													
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8).														52,420															
	10	Grants and similar amounts paid (attach schedule)																													
	11	Benefits paid to or for members																													
	12	Salaries, other compensation, and employee benefits																													
	13	Professional fees and other payments to independent contractors																													
Net Assets	14	Occupancy, rent, utilities, and maintenance																													
	15	Printing, publications, postage, and shipping														8,424.60															
	16	Other expenses (describe ▶ _____)																													
	17	Total expenses (add lines 10 through 16)														8,424.60															
	18	Excess or (deficit) for the year (line 9 less line 17)																													
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																													
	20	Other changes in net assets or fund balances (attach explanation)																													
	21	Net assets or fund balances at end of year (combine lines 18 through 20)														43,995.40															

**Part II Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.**

(See page 51 of the instructions.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	0	52,420
23	Land and buildings	0	0
24	Other assets (describe ▶ _____)	0	0
25	Total assets	0	52,420
26	Total liabilities (describe ▶ _____)	0	8,424.60
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	0	43,995.40

**Part III Statement of Program Service Accomplishments** (See page 51 of the instructions.)**Expenses**

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

What is the organization's primary exempt purpose? Establish and run a charter school  
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.28 Applied for and received public charter school approval. First year (2007-2008) school will operate for 200 fifth and sixth graders from impoverished neighborhoods of Nashville, TN  
(Grants \$ ) If this amount includes foreign grants, check here ☐ 28a29  
(Grants \$ ) If this amount includes foreign grants, check here ☐ 29a30  
(Grants \$ ) If this amount includes foreign grants, check here ☐ 30a31 Other program services (attach schedule) ☐  
(Grants \$ ) If this amount includes foreign grants, check here ☐ 31a32 Total program service expenses (add lines 28a through 31a) ☐ 32**Part IV List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. See page 52 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<u>Please See Attachment for a list of all non-compensated officers</u>		0	0	0

**Part V Other Information** (Note the statement requirement in General Instruction V.)

Yes No

33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. <input type="checkbox"/> 37a 0			
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		✓
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	38b		
39	501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9	39a		
b	Gross receipts, included on line 9, for public use of club facilities	39b		

**Part V Other Information** (Note the statement requirement in General Instruction V.) (Continued)

**40a** 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  
 section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0

**b** 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation . . .

**c** Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ▶

**d** Enter amount of tax on line 40c reimbursed by the organization . . . ▶

**e** All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? . . .

	Yes	No
40b		<input checked="" type="checkbox"/>
40c		
40d		
40e		

**41** List the states with which a copy of this return is filed. ▶ Tennessee

**42a** The books are in care of ▶ Jeremy Kane Telephone no. ▶ (615) 498-2911  
 Located at ▶ 5202 Idaho Ave., Nashville, TN ZIP + 4 ▶ 37209

**b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .

If "Yes," enter the name of the foreign country: ▶

See the instructions for exceptions and filing requirements for Form TD F 90-22.1.

**c** At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . .

If "Yes," enter the name of the foreign country: ▶

	Yes	No
42b		<input checked="" type="checkbox"/>
42c		<input checked="" type="checkbox"/>

**43** Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . . . ▶ ☐  
 and enter the amount of tax-exempt interest received or accrued during the tax year . . . ▶ 43

Please  
Sign  
Here

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

Signature of officer  
Jeremy D. Kane

Date  
4/13/07

Type or print name and title.  
JEREMY D. KANE, FOUNDER AND SCHOOL DIRECTOR

Paid  
Preparer's  
Use Only

Preparer's  
signature

Date

Check if  
self-  
employed ▶ ☐

Preparer's SSN or PTIN (See Gen. Inst.)

Firm's name (or yours  
if self-employed),  
address, and ZIP + 4

EIN

Phone no. ▶ ( )