Form	

Preparer

Use Only

Firm's name

Firm's address

0047

Open	to	Public
		tion

For	m		Linder secti	ion 501(c), 527, oi	- 4947(a)(1) of	the Internal Re		de (excent blac	k luna	OMB No. 1545-0047
		of the Treasury		be	enefit trust or	private founda	tion)		-	Open to Public
		nue Service		zation may have to	o use a copy of			reporting requi	rements.	Inspection
			ar year, or tax yea	ar beginning		and	ending	D Employor	idoptific	cation number
B Check if applicable: C Name of organization D Employ								D Employer	Identific	ation number
	Addres change	e								
	Name change Initial	e Doing B	usiness As				1			
	return Termin		and street (or P.O.	box if mail is not de	livered to street a	lddress)	Room/suite	E Telephone	e number	
	ated Amend return	ded City or t	own, state or cour	$atry and 7IP \pm 1$				G Gross receipt	s \$	
	Applica tion	а-	Swift, state of cour	ing, and zir + 4				H(a) Is this a		turn
	pendin	F Name a	nd address of prin	cipal officer:				for affilia		Yes No
								H(b) Are all af		
	<u>Fax-exe</u> Nebsit	empt status:	501(c)(3)	501(c) ( )	(insert no.)	4947(a)(1)	or 52	/ If "No," H(c) Group e		list. (see instructions)
		organization:	Corporation	Trust As	ssociation	Other	I Yea	r of formation:		State of legal domicile:
			·							
ce	1	Briefly describ	e the organization	's mission or mos	t significant act	ivities:				
Governance										+ -
over		Check this bo		organization disco ne governing body						sets.
ھ ق				nembers of the go						
les				loyed in calendar						
Activities				mate if necessary)						
AC				e from Part VIII, co						
	b	Net unrelated	business taxable	income from Form	990-T, line 34	• • • • • • • •	<u>••••</u>	Prior Year		Current Year
Ð	8									Current real
Revenue	9									
Rev	10									
	11						-			
	12 13									
	14									
ses	15									
ens	16a						_			
Expen	b									
	17 18									
	19									
Net Assets or Fund Balances							в	eginning of Curre	ent Year	End of Year
Asset	20									
Vet A	21									
<u> </u>	-1 22						1			
Und	er pena	lties of perjury,	I declare that I have e	examined this return	, including accom	panying schedul	es and stater	ments, and to the	best of my	v knowledge and belief, it is
true	, correc	t, and complete	Declaration of prepa	arer (other than offic	er) is based on al	l information of w	hich prepare	er has any knowle	dge.	
_		Signature	e of officer					Date		
Sig		Signature						Dale		
Her	е	Type or p	print name and title							
		Print/Type pre			Preparer's sign	ature		Date	Check	PTIN
Paid	d								if self-employe	d

Yes

Firm's EIN

Phone no.

Form	990 (2011) <b>I DEA PUB</b>	LIC SCHOOLS		74-2948339 Page 2
	t III Statement of Program Serv			
1	Check if Schedule O contains a resp Briefly describe the organization's mission		• • • • • • • • • • • • • • • • • •	•••••
I	I DEA PUBLI C SCHOOLS P	<b>REPARES STUDENTS</b>		
	SUCCESS IN COLLEGE AN			
	TO STUDENTS IN GRADE	K (KINDERGARTEN)	THROUGH 12 (TWEL)	/E).
2	Did the organization undertake any signific	ant program services during the	vear which were not listed on	
2	the prior Form 990 or 990-EZ? $\sim \sim \sim \sim \sim$			Yes X No
	If "Yes," describe these new services on S			
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 Schee			
4	Describe the organization's program service Section 501(c)(3) and 501(c)(4) organization	•	5 . 5	5
	others, the total expenses, and revenue, if			or grants and anocations to
4a	(Code:) (Expenses \$ 71, 3	<b>41, 702.</b> including grants of \$	) (Reve	
	Ì DEA PUBLÌ C SCHOOLS I			
	CHARTER SCHOOLS SERVI THROUGHOUT THE RIO GR			A IS COMMITTED TO
	"COLLEGE FOR ALL CHIL			
	COLLEGE OR UNIVERSITY			
	SCHOOL EXCEEDED GOALS			
	THE STATE TESTING INS			OR THE SECOND
	YEAR IN A ROW, IDEA P DISTRICT BY THE TEXAS		S BEEN RATED AN "H	EXEMPLARY" PECIFIC NEEDS OF
	DISTRICT BI THE TEAAS	EDUCATION AGENC	I. IN ADDITION, SE	PECIFIC NEEDS OF
4b	(Code:) (Expenses \$	including grants of \$	) (Reve	enue \$ )
4c	(Code:) (Expenses \$	including grants of \$	) (Reve	enue \$ )
4d	Other program services (Describe in Schee	dule O.)		
<u> </u>		ncluding grants of \$	) (Revenue \$	)
4e	Total program service expenses J			Farm 000 (2011)

**IDEA PUBLIC SCHOOLS** Form 990 (2011) I DEA PUBLI C Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; 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 temporarily restricted endowments, permanent endowments, or 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	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110 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 Part X, line 16? If "Yes," complete Schedule D, Part IX			x
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X $\sim \sim \sim \sim$	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional _ ~ ~	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Χ	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? 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 assistance to individuals			
	located outside the United States? 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	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	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? •••••••••	20b		

Form 990 (2011)

Note.

Form	990 (2011) (continued)	
21	Did the organization report more than \$5,000 of grants and oth United States on Part IX, column (A), line 1? If "Yes," complete \$	
22	Did the organization report more than \$5,000 of grants and oth column (A), line 2? If "Yes," complete Schedule I, Parts I and III	er assistance to individuals in the United States on Part IX,
23	Did the organization answer "Yes" to Part VII, Section A, line 3, and former officers, directors, trustees, key employees, and hig Schedule J	hest compensated employees? If "Yes," complete
24a	Did the organization have a tax-exempt bond issue with an outs last day of the year, that was issued after December 31, 2002? Schedule K. If "No", go to line 25	If "Yes," answer lines 24b through 24d and complete
	Did the organization invest any proceeds of tax-exempt bonds Did the organization maintain an escrow account other than a r any tax-exempt bonds?	efunding escrow at any time during the year to defease
	Did the organization act as an "on behalf of" issuer for bonds o Section 501(c)(3) and 501(c)(4) organizations. Did the organiz disqualified person during the year? If "Yes," complete Schedul	ation engage in an excess benefit transaction with a
b	Is the organization aware that it engaged in an excess benefit to that the transaction has not been reported on any of the organi Schedule L, Part I	ransaction with a disqualified person in a prior year, and zation's prior Forms 990 or 990-EZ? If "Yes," complete
26		
07		If "Yes," complete Schedule L, Part II
27		
28	If "Yes," complete Schedule L, Part III	
		f "Yes," complete Schedule L, Part IV
a b	· · · · · · · · · · · · · · · · · · ·	If "Yes," complete Schedule L, Part IV
c c		
C	If "Yes," complete	Schedule L, Part IV
29		If "Yes," complete Schedule M
30		
	If "Yes," complete Schedule M	
31	If "Yes," complete Schedule N, Part I	
32	Schedule N, Part II	If "Yes," complete
33	If "Vac " complete School	ula P. Dart I
24	If "Yes," complete Sched	
34	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	
35a		
b		
	If "Yes," complete Schedule R, Part V, line 2	2
36	Section 501(c)(3) organizations. If "Yes," complete Schedule R, Part V, line 2	
37		If "Yes," complete Schedule R, Part VI
38		

No

Yes

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a 28b

<u>28c</u> 29

30

31

32

33

34 35a

35b

36

37

38

Form	<u>1990 (2011)</u> I DEA PUBLIC SCHOOLS 74- 2948	339	Р	ade 5
	t V Statements Regarding Other IRS Filings and Tax Compliance			0
	Check if Schedule O contains a response to any question in this Part V		• •	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable ~~~~~~ 1a 294		100	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable ~~~~~~~~ 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners? • • • • • • • • • • • • • • • • • • •	1c		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
20	filed for the calendar year ending with or within the year covered by this return $\sim \sim \sim$			
h		2b	Χ	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to $e^{-file}$ (see instructions)	20		
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
40	financial account in a foreign country (such as a bank account, securities account, or other financial account)?~~~~~~~~~~~	4a		x
h	If "Yes," enter the name of the foreign country: J	40		
b	<b>5 5 -</b>			
Гa	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	5.0		x
	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? $\sim \sim \sim$	5b		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			x
1.	any contributions that were not tax deductible? ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<u>6a</u>		
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).	7.		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
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?	7.		
ام		7c		
	If "Yes," indicate the number of Forms 8282 filed during the year ~~~~~~~ Zd	7.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ~~~~~~	7e		
I	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 7b		
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 and section 509(a)(3) supporting organizations. Did the supporting			
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0.		
a	Did the organization make any taxable distributions under section 4966?~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	9a		
b 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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:			
a	Gross income from members or shareholders ~~~~~~~~ 11a			
b				
10-	amounts due or received from them.) 11b	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year •••••			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
а		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 ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	1.4		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		
n	IL YAS THAS IT THE A FORM / / I TO REPORT THESE DOVIMENTS? IT INC. DIVING ON CAUGUIDI IN CONCUME V A A A A A A A A A A	i i/in l		

**IDEA PUBLIC SCHOOLS** 

# Form 990 (2011)

74-2948339

Page 5

	To each the response to lines 2 through 75 below, and for a 140 th	respons
-	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	

			Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year ~~~~ 1a				
	If there are material differences in voting rights among members of the governing body, or if the governing				
,	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent ~~~~ [1b]	-			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?	2			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person? ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	3			
4			4564245	<u>un star</u> a	ionta
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			
6	Did the organization have members or stockholders?	6			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_			
	more members of the governing body?	<u>7a</u>			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or				
6	persons other than the governing body?	7b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			a l e	
a	T374 Tm (~,60 634.5070Jte514.74 ove (persons other than the gover208.68 406.50 Tm (10) Tj1 4 454.4delegate control over		gemer	it duties	s cu
b		8b			
9	If "Yes," provide the names and addresses in Schedule O				
	(This Section B requests information about policies not required by the Internal Revenue Code.)	9			
	(This Section B requests information about policies not required by the internal revenue Code.)				
10-		10-	Yes	INO	
	Did the organization halocrovnt ptolderbmpo elders, ay olilegsets?	10a			
a	If "Yes, (Did the organization haor writtut policis, as, prre e its governiid ten avi duti4 4suher t ptolderay olilegs,ts?) Tj1 0 0 1 48		2.50 1	s, aom	po e
110		10b			
11a		<u>11a</u>			
b 120	Did the organization haaaor writtly doculers elipteraulopay?eagetr.N9.w9Pp8./iPe.?3	120			
iza b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<u>12a</u> 12b			
c D	Did the organizatiregulararis, ate sistlpoarimonits, a, aes inceent cliernangoverof tut poy?age If "Yes," describe				
C	in Schedule O how this was done	12c			
13	Did the organization haaaor writtw4 ttleble powut poy?ts?	13			
14		14			
15		14			
15					
а		15a			
b		15a 15b			
D		150			
16a					
100		16a			
b		104			
D					
		16b			
17					
18					
-					
19					
20			_		

		-		
—		-		
—		-		
		-		
		1		
	—			
	I			
		_		
		4		
		_		
		-		
		-		
		-		
	I			

(include section 401(k) and section 403(b) employer contributions)			
Total functional expenses.			
ו טומו ועווכנוטוומו לגעלווטלט.			
Check here if following SOP 98-2 (ASC 958-720)			
Check here if following SOP 98-2 (ASC 958-720)	1		L

		(A)		(B)
	1		1	
	2		2	
	3		3	
	4		4	
	5			
			5	
	6			
s			6	
Assets	7		7	
As	8		8	
	9		9	
	10a			
	Ι.	<u>10a</u>	1.0	
	b		10c	
	11		11 12	
	12		12	
	13 14		13	
	14		14	
	16	Total assets.	16	
	17		17	
	18		18	
	19		19	
	20		20	
es	21		21	
Liabilities	22			
Liat				
_			22	
	23		23	
	24		24	
	25			
			25	
	26	Total liabilities.	26	
		Organizations that follow SE2D 0 1 49.c Tm (25) PsInh.48 re B0.35 w 0.0 g 358.20 669.62 2I d3		
	27			
	28			
	29			
	30			
	31			
	32			
	33			
	34	I		

1	
2	2
3	3
4	4
5	5
6	6

	Yes	No
1		
2a		
ヮ		

							OMB No. 1545-0047
(Form 9	90 or 990-EZ)	P90-EZ) Complete if the organization is a section 501(c)(3) organization or a section					
		Con					
Department Internal Reve	of the Treasury enue Service		4947(a)(1) Attach to Form 990 or F	nonexempt cha		ons	Open to Public Inspection
Name of	the organizati	on	Attach to Form 770 of F	onn 770-LZ.			ployer identification number
1					section 170(b)(1)(A)(i	).	
2		sectio	n 170(b)(1)(A)(ii).			<i>.</i>	
3				se	ection 170(b)(1)(A)(iii).		
4					section 170	0(b)(1)(A)(iii).	
5							
	section 170	(b)(1)(A)(iv).					
6					section 170(b)(1)(A)(v).		
7	section 170(	$h(1)(\Lambda)(y_i)$					
8	3601011100	5)(1)(A)(VI).	section 170(b)(1)(A)(vi)	l.			
9							
	section	509(a)(2).					
10					section 509(a)(	4).	
11					se	ction 509(a)(	3).
	а	k	)	с			d.iv). a)(2).

_	

(i)	(ii)	(iii)	(iv) (i)	(v)	(vi)		(vii)
			(1)	 (i)	 (i)	_	
		(see instructions)					

Subtract line 5 from line 4.			

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

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.") $\sim$ ~	L					
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 $\sim \sim \sim \sim \sim$						
4 Tax revenues levied for the organ-						
receipts fs under section 6leunder se	ction 6leunder st	(132eiTi1 s-) Ti1 0	0 1 45.00 563.46 T	2.der st (1w0 1 45	.00 70.50 Tm (33-	~) on exp2 6sh2utr
·····						,
5						
5						
6 Total.						
7a						
, u						
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						
8 Public support (Subtract line 7c from line 6)						
		•		•		·
Calendar year (or fiscal year beginning in)	(a)	(b)	(c)	(d)	(e)	(f)
9						
10a						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
C						
11						
12						
13 Total support (Add lines 9, 10c, 11, and 12.)						
						<u> </u>
14 First five years.						
stop here						
15					15	
16					16	
10						
17 20	)11				17	
	2010				18	
	2010					
19a 33 1/3% support tests - 2011.	stop horo					
h 22 1/20/ cupport tooto 2010	stop here.					
b 33 1/3% support tests - 2010.		ton horo				
20 Private foundation	2	stop here.				

Employer identification number

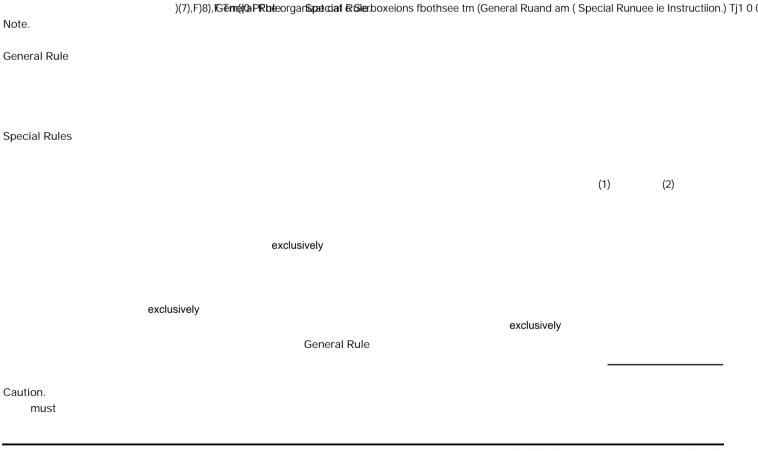
# Name of the organization

#### Organization type

Filers of:

Section:

not



For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
—   —			

Schedule B (	(Form 990,	990-EZ,	or 990-PF)	) (	2011)	1
--------------	------------	---------	------------	-----	-------	---

Name of organization

Employer identification number

74-2948339

Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	THE CARVER ACADEMY         217 ROBINSON PLACE	\$2, 865, 000.	Person Payroll Noncash <b>X</b> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Page 2

Employer identification number

### IDEA PUBLIC SCHOOLS

74-2948339

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	GREATER TEXAS FOUNDATION 6100 FOUNDATION PLACE DR BRYAN, TX 77807	- \$125, 000. 	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	GEORGE W. BRACKENRI DGE FOUNDATI ON	_	Person X
	119 TAYLOR ST.	<u>\$105, 000.</u>	Payroll Noncash
	SAN ANTONIO, TX 78205	_	(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	CARNEGIE CORPORATION OF NEW YORK		v
		-	Person <b>A</b> Payroll
	437 MADI SON AVE FL 26	- \$ <u>88,000.</u>	Noncash (Complete Part II if there
	NEW YORK, NY 10022	-	is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			v
16	MAHLE FAMILY FOUNDATION		Person X
16	MAHLE FAMILY FOUNDATION 4608 PLEASANT AVENUE S	-   <sub>\$</sub> 40, 000.	Person <b>A</b> Payroll Noncash
16		- \$\$40,000. -	Payroll
(a) No.	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b)	- \$ 40, 000. - (c) Total contributions	Payroll Noncash (Complete Part II if there
(a) No.	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4	- (c)	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution
(a)	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4 GEN YOUTH FOUNDATION	- (c) Total contributions	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll
(a) No.	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4	- (c)	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person <b>X</b>
(a) No.	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4 GEN YOUTH FOUNDATION	- (c) Total contributions	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person <b>X</b> Payroll Noncash
(a) No.	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4 GEN YOUTH FOUNDATION 10255 WEST HIGGINS ROAD, SUITE 900	- (c) Total contributions	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there
(a) No. <b>17</b> (a)	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4 GEN YOUTH FOUNDATION 10255 WEST HIGGINS ROAD, SUITE 900 ROSEMONT, IL 60018 (b)	- (c) Total contributions - \$\$	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution
(a) No. <b>17</b> (a) No.	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4 GEN YOUTH FOUNDATION 10255 WEST HIGGINS ROAD, SUITE 900 ROSEMONT, IL 60018 (b) Name, address, and ZIP + 4 MI KE RHODES	<pre>(c) Total contributions (c) Total contributions (c) (c) Total contributions (c) Total contributions (c) Total contributions</pre>	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Person X Payroll
(a) No. <b>17</b> (a) No.	4608 PLEASANT AVENUE S MINNEAPOLIS, MN 55419 (b) Name, address, and ZIP + 4 GEN YOUTH FOUNDATION 10255 WEST HIGGINS ROAD, SUITE 900 ROSEMONT, IL 60018 (b) Name, address, and ZIP + 4	- (c) Total contributions - \$\$	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

, ,			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

#### Ty 358.2058.n.) (see instructions). Use duplicate copies of Part I if additional space is needed.

Employer identification number

Schedule B	(Form 990,	990-EZ,	or 990-PF	) (2011)	)
------------	------------	---------	-----------	----------	---

Name of organization

# IDEA PUBLIC SCHOOLS

Employer identification number

74-2948339

Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	PETER HAYES	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

### IDEA PUBLIC SCHOOLS

Employer identification number

74-2948339

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	ALONZO CANTU P. O. BOX 2673 MCALLEN, TX 78502-2673	\$5,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32	DOCTORS HOSPITAL AT RENAISSANCE5501 S MCCOLL RDEDINBURG, TX 78539-9152	\$ <b>5, 000.</b> _	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33	H- E- B DI STRI CT OFFI CE 2502 CORNERSTONE BLVD EDI NBURG, TX 78539-8461	\$5, 000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
34	LONE STAR NATIONAL BANK 520 E NOLANA AVE MCALLEN, TX 78504	\$ <u>5, 000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35	PETER JENNINGS FOUNDATION 875 3RD AVE NEW YORK, NY 10022-6225	\$5, 000.	Person <b>X</b> Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36	RIGNEY CONSTRUCTION & DER. LLC 413 DELIA AVE ALAMO, TX 78516-3204	\$5,000.	Person <b>X</b> Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Employer	identification	number

(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Noncash
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Noncash
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Noncash
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Noncasha)
	—	
	(b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4	Name, address, and ZIP + 4     Total contributions       (b)     (c)       Name, address, and ZIP + 4     Total contributions       (b)     (c)       Name, address, and ZIP + 4     Total contributions       (b)     (c)       Name, address, and ZIP + 4     Total contributions

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)
Name of organization

Part II

Page 3

Employer identification number

74-2948339

#### **IDEA PUBLIC SCHOOLS**

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
	AND BUILDING		
		<u> </u>	02/23/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
19 <b>FURN</b>	I TURE		
		\$13, 000.	01/18/12
(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
		s	

(Form	000
(Form	9901

Department of the Treasury Internal Revenue Service

year | \_

# Supplemental Financial Statements

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

OMB No. 1545-0047
0011
ZUII
Open to Public
Inspection

Interna	Revenue Service Attach to Forn	<u>n 990.     See ser</u>	parate instructions.		Inspection
Nam	e of the organization I DEA PUBLIC SCHOOL	LS		Emp	loyer identification number 74-2948339
Pai	t I Organizations Maintaining Donor Advise	ed Funds or (	Other Similar Funds or A	lccou	nts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir	ne 6.			
		(a) Dono	r advised funds	(b) Fund	ds and other accounts
1	Total number at end of year ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
2	Aggregate contributions to (during year) ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
3	Aggregate grants from (during year) ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
4	Aggregate value at end of year ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
5	Did the organization inform all donors and donor advisors in	n writing that the a	ssets held in donor advised fur	nds	
	are the organization's property, subject to the organization's	s exclusive legal c	ontrol? ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	~ ~ ~ ~	~~~ Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing	that grant funds can be used	only	
	for charitable purposes and not for the benefit of the donor	or donor advisor,	or for any other purpose confe	ring	
	impermissible private benefit? •••••••••••	•••••	• • • • • • • • • • • • • • • •		••• Yes No
Pai	t II Conservation Easements. Complete if the or	rganization answe	red "Yes" to Form 990, Part IV,	line 7.	
1	Purpose(s) of conservation easements held by the organiza	tion (check all tha	t apply).		
	Preservation of land for public use (e.g., recreation or	education)	Preservation of an historical	ly impo	rtant land area
	Protection of natural habitat		Preservation of a certified h	istoric s	structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qual	lified conservatior	contribution in the form of a co	onserva	ition easement on the last
	day of the tax year.				
					Held at the End of the Tax Year
а	Total number of conservation easements ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			2a	
b	Total acreage restricted by conservation easements $\sim \sim \sim$			2b	
С	Number of conservation easements on a certified historic st			2c	
d	Number of conservation easements included in (c) acquired				
	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, re	eleased, extinguis	hed, or terminated by the organ	nization	during the tax

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

4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?	Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year   \$		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)? ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Yes	No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance	sheet, and	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's account	inting for	

conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

	(i) Revenues included in Form 990, Part VIII, line 1 ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	(ii) Assets included in Form 990, Part X ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
а	Revenues included in Form 990, Part VIII, line 1 ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

Part III       Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)         3       Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):         a       Public exhibition       d       Loan or exchange programs         b       Scholary research       e       Other
(check all that apply):       a       Public exhibition       d       Loan or exchange programs         b       Scholarly research       e       Other
a       Public exhibition       d       Loan or exchange programs         b       Scholarly research       e       Other         c       Preservation for future generations         4       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.         5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets         to be solid to raise funds rather than to be maintained as part of the organization's collection? ••••••••••• Yes       No         Part IV       Escrow and Custodial Arrangements. Complete if the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? = = = = = = = = = = = = = = = = = =
b       Scholarly research       e       Other         c       Preservation for future generations         4       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.         5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets       to be sold to rake funds, rather than to be maintained as part of the organization's collection? •••••••••• Yes       No         Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21.       Yes       No         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
c       Preservation for future generations         4       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.         5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets         10       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.     During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets     to be sold to raise funds rather than to be maintained as part of the organization's collection?     Part IV ESCrOW and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or     reported an amount on Form 990, Part X, line 21.     Is the organization agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 990, Part X?     Excrow and Custodial Arrangement in Part XIV and complete the following table:         C Beginning balance         C Beginning balance         C Beginning balance         C Ending balance         C Beginning balance         C Ending balance         C Ending balance         C Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         (a) Current Yes         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back         (f) Three years back         (f) Current year         (h) Prior year         (c) Two years back         (d) Three years back         (e) Four years back         (f) Three years back         (h) Prior year         (h) Prior year         (
5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ••••••••••••••••••••••••••••••••••••
to be sold to raise funds rather than to be maintained as part of the organization's collection?       Yes       No.         Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.       Ia is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?       Yes       No         b       If "Yes," explain the arrangement in Part XIV and complete the following table:       Amount       Ia       Ia       Amount       Ia       Ia       Amount       Ia
Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?       Yes       No         b       If "Yes," explain the arrangement in Part XIV and complete the following table:       Amount       1c       1d
reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?       Yes       No         b       If "Yes," explain the arrangement in Part XIV and complete the following table:       Amount       Ic         c       Beginning balance       Amount       Ic       Id       Id         d       Additions during the year       Ind       Id       Id<
on Form 990, Part X?       Yes       No         b       If "Yes," explain the arrangement in Part XIV and complete the following table:       Amount         c       Beginning balance       1c       1d         d       Additions during the year       1d       1d       1d         e       Distributions during the year       1f       1d       1d       1d         2a       Did the organization include an amount on Form 990, Part X, line 21?       Yes       No       No         b       If "Yes," explain the arrangement in Part XIV.       Inclustration answered "Yes" to Form 990, Part IV, line 10.       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a       Beginning of year balance
b       If "Yes," explain the arrangement in Part XIV and complete the following table:         c       Beginning balance         d       Additions during the year         e       Distributions during the year         f       Ending balance         f       Ending balance         g       Did the organization include an amount on Form 990, Part X, line 21?         Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         1a       Beginning of year balance         c       Net investment earnings, gains, and losses         d       Grants or scholarships         e       Other expenditures for facilities         and programs
c       Beginning balance       Amount         d       Additions during the year       1c         e       Distributions during the year       1d         f       Ending balance       1e         f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21?
c       Beginning balance       1c       1d         d       Additions during the year       1d       1e         e       Distributions during the year       1f       1e         f       Ending balance       1f       1f         2a       Did the organization include an amount on Form 990, Part X, line 21?
d Additions during the year       1d         e Distributions during the year       1e         f Ending balance       1f         2a Did the organization include an amount on Form 990, Part X, line 21?       Yes         Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         (a) Current year       (b) Prior year         (c) Two years back       (e) Four years back         (d) Three years back       (e) Four years back         (a) Current year       (b) Prior year         (c) Two years back       (c) Two years back         (d) Three years back       (e) Four years back         (e) Four years back       (e) Four years back         (f) Grants or scholarships
e       Distributions during the year       1e         f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21?       Yes         2a       Did the organization include an amount on Form 990, Part X, line 21?       Yes         Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.       (a) Current year         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a       Beginning of year balance
f       Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21?       Yes       Yes       No         b       If "Yes." explain the arrangement in Part XIV.       Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.       Image: Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         c       Net investment earnings, gains, and losses       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         d       Grants or scholarships       (c) Two years back       (d) Three years back       (e) Four years       (f) Three years         e       Other expenditures for facilities       (f) Three years         f       Administrative expenses       (f) Three years       (
b If "Yes." explain the arrangement in Part XIV.          Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance
Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance
1a Beginning of year balance
1a Beginning of year balance
b       Contributions ~~~~~~~       Image: Contributions ~~~~~       Image: Contributions ~~~~~         c       Net investment earnings, gains, and losses       Image: Contributions ~~~       Image: Contributions ~~         d       Grants or scholarships ~~~~~       Image: Contributions ~~       Image: Contributions ~       Image: Contributions ~         e       Other expenditures for facilities and programs ~~~~~       Image: Contributions ~       Image: Contributions ~       Image: Contributions ~         f       Administrative expenses ~~~~~       Image: Contributions ~       Image: Contributions ~       Image: Contributions ~
c Net investment earnings, gains, and losses
d Grants or scholarships
e Other expenditures for facilities       and programs
and programs
f Administrative expenses ~~~~~~
g End of year balance ~~~~~~~
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment  %
b Permanent endowment  %
c Temporarily restricted endowment  %
The percentages in lines 2a, 2b, and 2c should equal 100%.
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization
by: Yes No
(i) unrelated organizations ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
(ii) related organizations 3a(ii)
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ~~~~~~~~~~~~~~~ 3b
Describe in Part XIV the intended uses of the organization's endowment funds.     Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.
Description of property(a) Cost or other(b) Cost or other(c) Accumulated(d) Book valuebasis (investment)basis (other)depreciation
1a Land ~~~~~         10, 433, 420.         10, 433, 420.
b Buildings       33, 502, 580.       3, 523, 111.       34, 433, 403.         c Leasehold improvements       2, 632, 602.       638, 495.       1, 994, 107.
d Equipment       2222222222         1, 707, 229.       620, 382.         1, 086, 847.
e Other       34, 322, 312.       2, 951, 337.       31, 370, 975.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)       129318818.

Schedule D (Form 990) 2011

Schedule D	(Form 990) 2011
Dert VII	Invication

## I DEA PUBLI C SCHOOLS

Part VII Investments - Other Securities. Se	e Form 990, Part X, li	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1) Financial derivatives ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
(2) Closely-held equity interests ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
(3) Other				
(A)				
(B)				
(C)				
(D)				
( <u>E</u> )				
(F)				
(G)				
(H)				
(I)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. s	ee Form 990, Part X, I	line 13.		
(a) Description of investment type	(b) Book value	Co	c) Method of valua) st or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line				
	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10) Total, (Column (b) must equal Form 990, Part X, col (B) lin	ne 15)			
Part X Other Liabilities. See Form 990, Part X,		•••••	•••••	
1 (a) Description of liability		(b) Book value		
(1) Federal income taxes (2) CAPI TAL LEASES PAYABLE		1, 047, 794.		
(3) OTHER LIABILITIES		71, 744.		
(4)		,		
(5) (6)				
(7)				
(8)				
(9)				
· · · ·				
(10)				
(11) <u>Total.</u> (Column (b) must equal Form 990, Part X, col (B) lin	ne 25.)	1, 119, 538.		
Total. (Column (b) must equal Form 990, Part X, col (B) lin FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to FIN 48 (ASC 740).	o the organization's financial	statements that reports the organ	zation's liability for uncerta	in tax positions under

1			1	
2			2	
3			3	
4			4	
5			5	
6			6	
7			7	
8			8	
9			9	
10			10	
1				1
2				
а			2a	
b			2b	_
С			2c	
d			2d	_
е	2a 2d			2e
3	2e 1			3
4		1	1 1	
а			4a	_
b			4b	_
С	4a 4b			4c
5	3 4c.			5
1				1
2			1 1	
а			2a	
b			2b	
с			2c	
d			2d	
е	2a 2d			2e
3	2e 1	4		3
4		1		
а			<u>4a</u>	
b			4b	
С	4a 4b			4c
5	3 4c.			5

Schedule D (Form 990) 2011         I DEA         PUBLIC         SCHOOLS           Part XIV         Supplemental Information (continued)	74-2948339 Page 5
DIRECT EXPENSES ON THE FINANCIALS THAT ARE INCLUDED IN	
FUNDRAI SI NG REVENUE	62, 717.
LOSS ON DI SPOSAL	1, 317.
TOTAL TO SCHEDULE D, PART XIII, LINE 2D	64, 034.

	OMB No. 1545-004	OMB No. 1545-0047		
Department of the Treasury				
Department of the Treasury Internal Revenue Service				
	_			
	_			
	<u> </u>			
	I I			


(Farm 000 or 000 F7)						-	OMB No. 1545-0047
epartment of the Treasury or if t	f the organization answered "Yes' he organization entered more that Attach to Form 990 or Form 990-F	n \$15,	000 or	n Form 990-EZ, line	6a.		Open To Public nspection
ame of the organization						nployer ide	entification number
required to complete this par	Complete if the organization answe	ered "\	/es" to	Form 990, Part IV, I	line 17. F	orm 990-E2	Z filers are not
<ol> <li>Indicate whether the organization rais         <ul> <li>Mail solicitations</li> <li>Internet and email solicitations</li> <li>Internet and email solicitations</li> <li>Phone solicitations</li> <li>In-person solicitations</li> </ul> </li> <li>2 a Did the organization have a written or key employees listed in Form 990, P</li> <li>b If "Yes," list the ten highest paid ind</li> </ol>	sed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p	tion of tion of fundra (inclue profess	non-go govern aising o ding of ional f	overnment grants nment grants events ficers, directors, tru: undraising services?	stees or	Yes	
compensated at least \$5,000 by the			_		· · · · · ·		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or cor contrib	ustody trol of	(iv) Gross receipts from activity	to (or re func	ount paid tained by) traiser in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
		<u> </u>					
otal ••••••••••••••••••••••••••••••••••••	Tm (List all stat non-govette this1 0	••• Idph 7	0.4••	•••••"f611B	10012	7.00e th1 (	l (i)) Tj5a0e8.60 574.50

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

Schedule G (Form 990 or 990-EZ) 2011

	(a)	(b)	(c)	(d) (a) (c)
1				
2				
3				
4				
5				
6				
7				
8 9				
9 10 11	L	1	I	
	(a)	(b) Pull tabs/instar bingo/progressive bi	nt ingoEZ) 20111 509.40424	(d) 4 67832.60 1(4a),50 Tm (1 37.3(2c)166
1				
2				
3				
4				
5				
6	Yes No	Yes No	_ Yes No	-
7				
8				
				Yes No
 a				Yes No

Schedule G (Form 990 or 990-FZ) 2011 I DEA PUBLIC SCHOOLS	74-2948339	Page 3
<ul> <li>Does the organization operate gaming activities with nonmembers?</li></ul>		X <sub>No</sub>
<ul> <li>to administer charitable gaming? ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</li></ul>	~~~~ Yes	X <sub>No</sub>
a The organization's facility	~~~~ <u>13a</u>	%
b An outside facility		<b>00</b> %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	irds:	
Name   WYATT TRUSCHEIT		
Address   505 ANGELITA DR., SUITE 9 - WESLACO, TX 78596		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? $\sim$	~~~~ Yes	X <sub>No</sub>
<ul> <li>b If "Yes," enter the amount of gaming revenue received by the organization   \$ and the am of gaming revenue retained by the third party   \$</li> <li>c If "Yes," enter name and address of the third party:</li> </ul>	ount	
Name		
Address		
16 Gaming manager information:		
Name		
Gaming manager compensation   \$		
Description of services provided		
Director/officer Employee Independent contractor		
<ul><li>Mandatory distributions:</li><li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to</li></ul>		v
retain the state gaming license?		X No
organization's own exempt activities during the tax year   \$ Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, co lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional in		
SCHEDULE G, PART III, LINE 9B	Tormation (see instruct	<u>ions).</u>
NOT LICENSED TO OPERATE EXPLANATION		
THE ORGANIZATION OBTAINED CLEARANCE FROM THE CAMERON COUNTY	, TX	
DISTRICT ATTORNEY'S OFFICE TO OPERATE THE EVENT WITHOUT A G	AMI NG	
LICENSE. (ORGANIZATION OPERATES SOME OF ITS SCHOOLS IN CAME	RON COUNTY).	
NO CASH PRIZE WAS AWARDED TO ANY INDIVIDUAL DONOR/PARTICIPA	NT, WHO EACH	ł
DONATED \$100 TO PLAY, GROSS CASH GAMING REVENUE ("POKER WIN	NINGS") OF	
THE DONOR/PARTICIPANTS INURED ONLY TO THE BENEFIT OF THE OR NONCASH PRIZES WERE DONATED BY SPONSORS AND AWARDED TO APROX		
NONCASH I KIZES WERE DUNATED DI SPUNSURS AND AWARDED TU APRU	AIMAILLI /	

Part IV Supplemental Information (continued)

### TOP- WI NNI NG "TEXAS HOLD' EM" PARTI CI PANTS. OTHER DONATED PRIZES WERE

#### GIVEN TO PARTICIPANTS BASED ON A RANDOM DRAWING.

SCHEDULE I									OMB No. 1	545-0047
(Form 990)				Other Assistance s, and Individuals	-				20	11
Department of the Treasury		Compl	ete if the organizatio			rt IV, line 21 or 22.			Open to	
Internal Revenue Service				Attach to For	m 990.				Inspec	
Name of the organizati	ion IDEA PUBL	IC SCHOOL	S					Employer	identificatio 74-294	n number <b>18339</b>
Part I General Ir	nformation on Grants a	nd Assistance								
	zation maintain records									
	award the grants or assis					~~~~~~~	~~~~~~~	~~~~	X Yes	L No
	IV the organization's pro									
	d Other Assistance to								5	
•	hat received more than : ddress of organization	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(q) Description of		Purpose of g	
. ,	vernment	(b) EIN	if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance		or assistance	
	AN- ALAMO INDEP CT - 601 E. KELLY 7		501(C)(1)	581,861.	0.	FMV		IMPROV	/EMENTS	
	per of section 501(c)(3) a	-	-					· ~ ~ ~		<u> </u>
<u>3</u> Enter total numb	per of other organization	s listed in the line	1 table ••••••	• • • • • • • • •	• • • • • • • • •	• • • • • • • • • • •	• • • • • • • • • • •	•••		0.

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

		2

#### Note.

	(B)			(C)	(D)	(E)	(F)
(A)	(i)	(ii)	(iii)				
0.9							
(i) _1 (ii)							
(ii)							
_2 (i)							
(i)							
(ii)							
(i)							
_4 (ii)							
_5 (i)							
6							
7							
_ 8							
9							
10							
.12							
_13							
_14							
_15							
_16							

2

Department of the Treasury Internal Revenue Service	Attach to Form 990.				eparate ins	structions.				Ins	pectio	n	
Name of the organization								Emp	loyer	identii	ficatio	n num	ıber
Part I Bond Issues		-		-									
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	d (e) Iss	sue price	(f) Descript	tion of purpose	(g) De	efeased		behalf suer	(i) Po finan	
								Yes	No	Yes		Yes	Ŭ
А				_									
_B													
C													
D													
Part II Proceeds													
			/	4		В	С				D		
1 Amount of bonds retired • • • • •		• • • • • • • • •	•										
2 Amount of bonds legally defeased			•										
3 Total proceeds of issue • • • • •			•										
4 Gross proceeds in reserve funds •			•										
5 Capitalized interest from proceeds			•										
6 Proceeds in refunding escrows •			•										
7 Issuance costs from proceeds • •			•										
8 Credit enhancement from proceeds	• • • • • • • • • • • • • • •	• • • • • • • • • •	•										
9 Working capital expenditures from p	roceeds •••••••		•										
10 Capital expenditures from proceeds	• • • • • • • • • • • • • •		•										
11 Other spent proceeds • • • • • •	• • • • • • • • • • • • • • • •		•										
12 Other unspent proceeds • • • • •			•										
13 Year of substantial completion • •	• • • • • • • • • • • • • • • •	• • • • • • • • •	•										
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a c	current refunding issue? ••		•										
15 Were the bonds issued as part of an	advance refunding issue?												
<u>16 Has1 0 0 1 426.60 516.90 Tm (  ) Tji</u>	uTj1 0 0 1 52.2eequad1 275.4	0 144.90 820.00	0• • • • • Has	10014••	• • •								
17 Does the organization maintain adequate books a	and records to support the final allocation	on of proceeds?											
Part III Private Business Use													
1			<i>F</i>	}		В	Ç				P		
			Yes	No	Yes	No	Yes	No		Yes		No	

# Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

OMB No. 1545-0047

Open to Public

2

132121 01-23-12

SCHEDULE K	OMB No. 1545-00	0047
Department of the Treasury Internal Revenue Service		

		-			
	1				
Does the organization maintain adequate books and records to support the final allocation of proceeds?					
	-			•	

CHEDULE K										<u></u> 0N	<u>//B No. ´</u>	1545-0047	7
orm 990) partment of the Treasury emal Revenue Service	Complete if the orga e Attach to Form 990.	explanations, and	ed "Yes" to Form any additional i	nformation i	n Part VI.					Ope Insp	n to F ectio	Public n	
ame of the organization								Emp	loyer i			n numb	er
art I Bond Issues									(	the X Or de	dia K		<u> </u>
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #48	re <b>(640)</b> .35 w 0.0 g	30.60(8)10	0 1 pr4 252	2.2.3(2)468.90 1	m (Issueruer E	IN) I(g)D40	10845e <u>2</u> 15	ofissu) ofissu		(0)01	o0 re E
				_				Yes	No	Yes	No	Yes I	<u>vo</u>
			ļ								$\rightarrow$	$\rightarrow$	
											$\rightarrow$		—
)													
art II Proceeds													
			<i>H</i>	A		В	C		+		D		
									_				
2					+								
3													
)													
													_
3					<u> </u>								
			Yes	No	Yes	No	Yes	No	_	Yes	—	No	
ł				<b> </b>	───						—		
					<u> </u>				_		+		
											+		
Does the organization maintain adequate bo	ooks and records to support the final allocatio	n of proceeds?		·									—
art III Private Business Use					<del></del>								
				<u> </u>		B			_		<u>P</u>		
			Yes	No	Yes	No	Yes	No		Yes	+	No	
			<u> </u>		┼────						+		—
2													

				F	

SCHEDULE K (Form 990) Department of the Treasury Internal Revenue Service	Complete if the	explanations	, and any	Yes" to Form y additional i	nformation i	, line 24a. P n Part VI. eparate insti		ptions,			Ор		<u>1545-0</u> Public	
						·			Emp	loyer				ıber
Part I Bond Issues (a)	(b)	(c)	((	d)	(e)		(f)		(g)		(h)		(i)	
									Yes	No	Yes	No	Yes	No
_A														<u> </u>
_B														
_C														<u> </u>
D Part II Proceeds														
				/	4		В	С				D		
2										-				
4										-				
6										-				
8										-				
10										-				
12										-				
				Yes	No					-				
										-				
17 Does the organization maintain adequate	e books and records to support the final all	ocation of proceeds?												
132121														

SCHEDULE K (Form 990) Department of the Treasury Internal Revenue Service	Complete if the	explanations	, and any	/ additional in	formation ir	line 24a. Pr Part VI. parate instr		ptions,			Op	o <u>MB No.</u> en to l pectic	Public	
		90.				parate itisti	ucitoris.		Emp	loyer i				ıber
Part I Bond Issues (a)	(b)	(c)	(0	(৮	(e)		(f)		(g)		(h)		(i)	
									Yes	No	Yes	No	Yes	No
_ A														
В														
<u> </u>														
D Part II Proceeds								1						
_1				A			В	С				D		
Does the organization maintain adequate b	books and records to support the final all	ocation of proceeds?												
132121														

					-	

SCHEDULE K
(Form 990)
Department of the Treasury Internal Revenue Service
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

See separate instructions.

2011

OMB No. 1545-0047

Open to Public Inspection

#### Name of the organization

**IDEA PUBLIC SCHOOLS** 

Employer identification number 74-2948339

Attach to Form 990.

Part I Bond Issues				_									
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	e price	(f) Descripti	on of purpose	(g) De	feased	(h) On	behalf		
										of is	suer	finan	cing
								Yes	No	Yes	No	Yes	No
IDEA PUBLIC SCHOOLS (SER							TI ON/DEBT						l
_A <b>2011</b> )	74- 2948339	187145BC0	11/17/11	14,1	30,000.	SERVI CE			X	X			X
													Í
<u></u> B													
													l
<u>C</u>													<b> </b>
													l
													L
Part II Proceeds													
			A			В	С				D		
1 Amount of bonds retired • • • • • • • •	• • • • • • • • • •		•										
2 Amount of bonds legally defeased • • • • •	• • • • • • • • • •		•										
3 Total proceeds of issue • • • • • • • • •	• • • • • • • • • •		. 14, 13										
4 Gross proceeds in reserve funds • • • • •	• • • • • • • • • • •		. 1, 89	9, 820.									
5 Capitalized interest from proceeds • • • •	• • • • • • • • • • •		•										
6 Proceeds in refunding escrows • • • • •	• • • • • • • • • • •		•										
7 Issuance costs from proceeds • • • • • •	• • • • • • • • • • •		. 714	4, 073.									
8 Credit enhancement from proceeds • • • •	• • • • • • • • • • •		•										
9 Working capital expenditures from proceeds	• • • • • • • • • • •		•										
10 Capital expenditures from proceeds • • • •			. 8, 01	0, 230.									
11 Other spent proceeds • • • • • • • • • •			•										
<u>12 Other unspent proceeds</u> • • • • • • • • •				5, 877.									
13 Year of substantial completion • • • • • •			. 20	012									
·			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a current re	funding issue? • •		•	X									
15 Were the bonds issued as part of an advance	refunding issue? •		•	X									
16 Has the final allocation of proceeds been mad	le? •••••••		•	X									
17 Does the organization maintain adequate books and records	to support the final allocatio	n of proceeds? • • •	. X										
Part III Private Business Use													
1 Was the organization a partner in a partnershi	p, or a member of an	LLC,	А			В	С				D		
which owned property financed by tax-exemp	-		• Yes	No	Yes	No	Yes	No		Yes		No	
				X									
2 Are there any lease arrangements that may re	sult in private busine	ss use of		x					+		+		

#### ENTI TY 1

## Schedule K (Form 990) 2011 IDEA PUBLIC SCHOOLSaGIC)?

Page	2

Part III Private Business Use (Continued)									
	A		E	3		Ç	[	)	
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No	
business use of bond-financed property? • • • • • • • • • • • • • • • • • • •									
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside									
counsel to review any management or service contracts relating to the financed property?									
c Are there any research agreements that may result in private business use of bond-financed property?									
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside									
counsel to review any research agreements relating to the financed property? • • • •									
4 Enter the percentage of financed property used in a private business use by									
entities other than a section 501(c)(3) organization or a state or local government ••		%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of									
unrelated trade or business activity carried on by your organization, another									
section 501(c)(3) organization. or a state or local government ••••••••••••		%		%		%		%	
6 Total of lines 4 and 5 • • • • • • • • • • • • • • • • • •		%		%		%		%	
7 Has the organization adopted management practices and procedures to ensure the									
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • •									
Part IV Arbitrage									
_	A	\	E	3		ç	[	)	
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	No	Yes	No	Yes	No	
Arbitrage Rebate, been filed with respect to the bond issue? 0.0.1.173:40.60	). 90 Tr	<u>ı (Comp</u>	re 0	<u>657.0</u>	<u>re90</u>	Tm (Com	<u>p re 0</u>	1 657.	o the
2 Is the bond issue a variable rate issue? • • • • • • • • • • • • • • • • • • •									
3a Has the organization or the governmental issuer entered into a qualified									
hedge with respect to the bond issue? •••••••••••••••••••••									
b Name of provider • • • • • • • • • • • • • • • • • • •									
c Term of hedge ••••••••••••••••••••••••••••						1			
d Was the hedge superintergrated? ••••••••••••••••••••••									
e Was the hedge terminated? •••••••••••••••••••••••••••									
4a Were gross proceeds invested in a guaranteed investment contract (GIC)? •••••									
b Name of provider • • • • • • • • • • • • • • • • • • •									
cTerm of GIC				1					
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
5 Were any gross proceeds invested beyond an available temporary period? • • • • •									
6 Did the bond issue qualify for an exception to rebate? • • • • • • • • • • • • • • • • • • •									
Part V Procedures To Undertake Corrective Action									

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement

program if self-remediation is not available under applicable regulations

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

Yes

No

No

X

Χ

%

%

%

D

Yes

Х

Yes

X

D

No

Χ

Χ

Χ

Χ X

X <sub>No</sub>

chedule K (Form 990) 2011 I DEA PUBLIC SCHOOLS			/4-2	948339		
Part III Private Business Use (Continued)		<u> </u>	R			
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No
business use of bond-financed property? ••••••••••••••		X		X		No X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside						
counsel to review any management or service contracts relating to the financed property?						
c Are there any research agreements that may result in private business use of bond-financed property?		X		Х		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside						
counsel to review any research agreements relating to the financed property? • • • •						
4 Enter the percentage of financed property used in a private business use by						
entities other than a section 501(c)(3) organization or a state or local government ••		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of						
unrelated trade or business activity carried on by your organization, another						
section 501(c)(3) organization, or a state or local government • • • • • • • • • • • • •		%		%		%
6 Total of lines 4 and 5 • • • • • • • • • • • • • • • • • •		%		%		%
7 Has the organization adopted management practices and procedures to ensure the		/ / /				
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • •	Х		X		X	
Part IV Arbitrage						
Part IV Arbitrage		^	B		C	
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	No	Yes	No
Arbitrage Rebate, been filed with respect to the bond issue?	X		X	INU	X	
2 Is the bond issue a variable rate issue?		x		X		X
3a Has the organization or the governmental issuer entered into a qualified						
hedge with respect to the bond issue?		x		X		Х
b Name of provider • • • • • • • • • • • • • • • • • • •						
c Term of hedge						
5		1 1				
d Was the hedge superintergrated?						
e Was the hedge terminated?		X		X		X
4a Were gross proceeds invested in a guaranteed investment contract (GIC)? •••••		· ·-				
b Name of provider • • • • • • • • • • • • • • • • • • •						
c Term of GIC • • • • • • • • • • • • • • • • • • •		1				
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X		X		X
<ul> <li>5 Were any gross proceeds invested beyond an available temporary period? • • • • •</li> <li>6 Did the bond issue qualify for an exception to rebate? • • • • • • • • • • • • • • • • • • •</li></ul>				<u> </u>		X
						•

Part V Procedures To Undertake Corrective Action
Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement
program if self-remediation is not available under applicable regulations

#### ENTITY 3

## Schedule K (Form 990) 2011 I DEA PUBLIC SCHOOLSaGIC)?

Page	2

Part III Private Business Use (Continued)								Ŭ	
	A		E	3		Ç		)	
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No	
business use of bond-financed property? • • • • • • • • • • • • • • • • • • •									
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside									
counsel to review any management or service contracts relating to the financed property?									
C Are there any research agreements that may result in private business use of bond-financed property?									
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside									
counsel to review any research agreements relating to the financed property? • • • •									
4 Enter the percentage of financed property used in a private business use by									
entities other than a section 501(c)(3) organization or a state or local government ••		%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of									
unrelated trade or business activity carried on by your organization, another									
section 501(c)(3) organization. or a state or local government ••••••••••••		%		%		%		%	
6 Total of lines 4 and 5 • • • • • • • • • • • • • • • • • •		%		%		%		%	
7 Has the organization adopted management practices and procedures to ensure the									
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • • •									
Part IV Arbitrage									
-	A		E	3		Ç T	[	)	
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	No	Yes	No	Yes	No	
Arbitrage Rebate, been filed with respect to the bond issue? <b>9.9.1.173,49.6</b>	). 90 Th		re 0	657.0	<u>re90</u>	Tm (Com	<u>p re O</u>	<u>1 657.</u> (	) the
2 Is the bond issue a variable rate issue? • • • • • • • • • • • • • • • • • • •									
3a Has the organization or the governmental issuer entered into a qualified									
hedge with respect to the bond issue? ••••••••••••••••••••									
b Name of provider									
<u>c</u> Term of hedge •••••••••••••••••••••••••••••••••••									
d Was the hedge superintergrated?									
e Was the hedge terminated?									
e       Was the hedge terminated?         4a       Were gross proceeds invested in a guaranteed investment contract (GIC)?									
e       Was the hedge terminated?         4a       Were gross proceeds invested in a guaranteed investment contract (GIC)?         b       Name of provider									
e       Was the hedge terminated?         4a       Were gross proceeds invested in a guaranteed investment contract (GIC)?         b       Name of provider         c       Term of GIC									
e Was the hedge terminated?     4a Were gross proceeds invested in a guaranteed investment contract (GIC)?     b Name of provider     C Term of GIC     d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
e       Was the hedge terminated?         4a       Were gross proceeds invested in a guaranteed investment contract (GIC)?         b       Name of provider         c       Term of GIC         d       Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?         5       Were any gross proceeds invested beyond an available temporary period?									
e Was the hedge terminated?     4a Were gross proceeds invested in a guaranteed investment contract (GIC)?     b Name of provider     C Term of GIC     d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
e       Was the hedge terminated?         4a       Were gross proceeds invested in a guaranteed investment contract (GIC)?         b       Name of provider         c       Term of GIC         d       Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?         5       Were any gross proceeds invested beyond an available temporary period?									

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement

program if self-remediation is not available under applicable regulations

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

No X

Χ

%

%

%

D

Yes

Х

Yes

Χ

D

No

X

Χ

X

Х X

Schedule K (Form 990) 2011 I DEA PUBLIC SCHOOLS			74-2	2948339			
Part III Private Business Use (Continued)							_
	/	A	E		C	í – – – – – – – – – – – – – – – – – – –	⊢
3a Are there any management or service contracts that may result in private	Yes	No X	Yes	No X	Yes	No X	⊢
business use of bond-financed property? ••••••••••••••••••••••••••••••••••				<u> </u>			┝
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside							
counsel to review any management or service contracts relating to the financed property?		x		X		X	⊢
C Are there any research agreements that may result in private business use of bond-financed property?		<u> </u>		<u> </u>		X	┝
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside							
counsel to review any research agreements relating to the financed property? • • • •							┡
4 Enter the percentage of financed property used in a private business use by							
entities other than a section 501(c)(3) organization or a state or local government ••		%		%		%	⊢
5 Enter the percentage of financed property used in a private business use as a result of							
unrelated trade or business activity carried on by your organization, another							
section 501(c)(3) organization, or a state or local government • • • • • • • • • • • • •		%		%		%	
6 Total of lines 4 and 5 • • • • • • • • • • • • • • • • • •		%		%		%	
7 Has the organization adopted management practices and procedures to ensure the							
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • • •	X		X		X		
							—
Part IV Arbitrage							
		Ą	E	3	C	`	L
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	No	Yes	No	
Arbitrage Rebate, been filed with respect to the bond issue? •••••••••••••	X		X		X		L
2 Is the bond issue a variable rate issue? • • • • • • • • • • • • • • • • • • •		X		X		X	
3a Has the organization or the governmental issuer entered into a qualified							
hedge with respect to the bond issue? •••••••••••••••••		X		X		X	
b Name of provider • • • • • • • • • • • • • • • • • • •							
c Term of hedae ••••••••••••••••••••••••••••							
d Was the hedge superintergrated?							
e Was the hedge terminated?							Γ
4a Were gross proceeds invested in a guaranteed investment contract (GIC)? •••••		X		X		X	
b Name of provider • • • • • • • • • • • • • • • • • • •							Γ
							Γ
							Γ
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?							
<ul> <li>d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?</li> <li>5 Were any gross proceeds invested beyond an available temporary period? •••••</li> </ul>		X		X		X	Γ

Part V Procedures To Undertake Corrective Action Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement X<sub>NO</sub> Yes

Part VI Supplemental Information. Complete this part to provide additional information for responses to guestions on Schedule K.

No X

Χ

%

<u>%</u> %

D

Yes

Х

Yes

X

D

No

Χ

X

Χ

X X

5

Schedule K (Form 990) 2011 IDEA PUBLIC SCHOOLS			74-2	2948339		NTI TY
Part III Private Business Use (Continued)						
		Ą	E	3	(	)
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No
business use of bond-financed property? • • • • • • • • • • • • • • • • • • •		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside						
counsel to review any management or service contracts relating to the financed property	?					
c Are there any research agreements that may result in private business use of bond-financed property	?	X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside						
counsel to review any research agreements relating to the financed property? • • • •						
4 Enter the percentage of financed property used in a private business use by						
entities other than a section 501(c)(3) organization or a state or local government ••		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of						
unrelated trade or business activity carried on by your organization, another						
section 501(c)(3) organization, or a state or local government ••••••••		%		%		%
<u>6 Total of lines 4 and 5 • • • • • • • • • • • • • • • • • • </u>		%		%		%
7 Has the organization adopted management practices and procedures to ensure the						
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • •	X		X		X	
Part IV Arbitrage						
		Ą	[	3	(	<u>}</u>
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	No	Yes	No
Arbitrage Rebate, been filed with respect to the bond issue? ••••••••••••••	X		X		X	
2 Is the bond issue a variable rate issue? • • • • • • • • • • • • • • • • • • •		X		X		X
3a Has the organization or the governmental issuer entered into a qualified						
hedge with respect to the bond issue? ••••••••••••••••••••••••		X		X		X
b Name of provider • • • • • • • • • • • • • • • • • • •						
<u>c</u> Term of hedge •••••••••••••••••••••••••••••••••••						
d Was the hedge superintergrated?						
e Was the hedge terminated?						
4a Were gross proceeds invested in a guaranteed investment contract (GIC)? •••••		X		X		X
b Name of provider • • • • • • • • • • • • • • • • • • •						
cTerm of GIC • • • • • • • • • • • • • • • •						
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?						
5 Were any gross proceeds invested beyond an available temporary period? • • • • •		X		X		X
6 Did the bond issue qualify for an exception to rebate? • • • • • • • • • • • • • • • • • • •		X		X		X
· · · · · · · · · · · · · · · · · · ·						
Part V Procedures To Undertake Corrective Action						

No X

Χ

%

% %

No

X

Χ

Χ

Χ X

X NO

hedule K (Form 990) 2011 I DEA PUBLIC SCHOOLS			74-2	2948339				
art III Private Business Use (Continued)								
		A	E	3	(	2		D
a Are there any management or service contracts that may result in private	Yes	No X	Yes	No X	Yes	No	Yes	
business use of bond-financed property? • • • • • • • • • • • • • • • • • • •		X		X		X		
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?	?							
c Are there any research agreements that may result in private business use of bond-financed property?	?	X		X		X		
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
counsel to review any research agreements relating to the financed property? • • • •								
Enter the percentage of financed property used in a private business use by								
entities other than a section 501(c)(3) organization or a state or local government ••		%		%		%		
Enter the percentage of financed property used in a private business use as a result of								
unrelated trade or business activity carried on by your organization, another								
section 501(c)(3) organization, or a state or local government •••••••••		%		%		%		
		%		%		%		
Has the organization adopted management practices and procedures to ensure the								
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • •	X		Х		X		X	
art IV Arbitrage								
		Ą	E	3	(	2	I	<u>D</u>
Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	No	Yes	No	Yes	
Arbitrage Rebate, been filed with respect to the bond issue? •••••••••••••	X		X		X		X	
Is the bond issue a variable rate issue? • • • • • • • • • • • • • • • • • • •		X		X		X		
a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue? ••••••••••••••••••••••		X		X		X		
b Name of provider • • • • • • • • • • • • • • • • • • •								
c Term of hedge ••••••••••••••••••••••••••••								
d Was the hedge superintergrated? ••••••••••••••••••••••								
e Was the hedge terminated? •••••••••••••••••••••••								
a Were gross proceeds invested in a guaranteed investment contract (GIC)? •••••		X		X		X		
b Name of provider • • • • • • • • • • • • • • • • • • •								
c Term of GIC •••••••••••••••••••••••••••								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
		X		X X		X X		
Were any gross proceeds invested beyond an available temporary period? •••••		X						

program if self-remediation is not available under applicable regulations

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

Yes

No X

Χ

%

% %

D

Yes

Х

Yes

X

D

No

Χ

Χ

Χ

X X

7

IDEA PUBLIC SCHOOLS			74 9	2948339	Eľ	NTI TY
Chedule K (Form 990) 2011 IDEA PUBLIC SCHOOLS Part III Private Business Use (Continued)			74-7	2946339		
Part III Private Business Use (Continued)		^	F	,	(	<u></u>
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	Í
business use of bond-financed property? • • • • • • • • • • • • • • • • • • •	Tes	X	Tes	X	Tes	No X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside						
counsel to review any management or service contracts relating to the financed property?		X		X		X
c Are there any research agreements that may result in private business use of bond-financed property?		<u>A</u>		Λ		<u>A</u>
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside						
counsel to review any research agreements relating to the financed property? • • • •						
4 Enter the percentage of financed property used in a private business use by						
entities other than a section 501(c)(3) organization or a state or local government ••		%		%		
5 Enter the percentage of financed property used in a private business use as a result of						
unrelated trade or business activity carried on by your organization, another						
section 501(c)(3) organization, or a state or local government ••••••••••••		%		%		
6 Total of lines 4 and 5 • • • • • • • • • • • • • • • • • •		%		%		
7 Has the organization adopted management practices and procedures to ensure the						
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • • • • • • • •	X		X		X	
	X		X		X	
	X		X		X	
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • • • • • • • •		<u></u>	<b>X</b>	3	<b>X</b>	2
post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • • • • • • • •		A	E	3 No		C No
post-issuance compliance of its tax-exempt bond liabilities?         Part IV       Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of		No		No	(	Í
post-issuance compliance of its tax-exempt bond liabilities?         Part IV         Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		r i	E		( Yes	Í
post-issuance compliance of its tax-exempt bond liabilities?         Part IV         Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?		No	E	No	( Yes	No
post-issuance compliance of its tax-exempt bond liabilities?         Part IV         Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?         3a       Has the organization or the governmental issuer entered into a qualified		No	E	No	( Yes	No
<ul> <li>post-issuance compliance of its tax-exempt bond liabilities? • • • • • • • • • • • • • • • • • • •</li></ul>		No X	E	No X	( Yes	No X
post-issuance compliance of its tax-exempt bond liabilities?         Part IV       Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?         3a       Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?         b       Name of provider		No X	E	No X	( Yes	No X
post-issuance compliance of its tax-exempt bond liabilities?         Part IV       Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?         3a       Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?         b       Name of provider		No X	E	No X	( Yes	No X
post-issuance compliance of its tax-exempt bond liabilities?         Part IV         Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?         3a       Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?         b       Name of provider         c       Term of hedge         d       Was the hedge superintergrated?		No X	E	No X	( Yes	No X
post-issuance compliance of its tax-exempt bond liabilities?         Part IV         Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?         3a       Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?         b       Name of provider         c       Term of hedge         d       Was the hedge superintergrated?		No X X	E	No X X	( Yes	No X X
post-issuance compliance of its tax-exempt bond liabilities?         Part IV         Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?         3a       Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?         b       Name of provider         c       Term of hedge         d       Was the hedge superintergrated?         e       Was the hedge terminated?         4a       Were gross proceeds invested in a guaranteed investment contract (GIC)?		No X	E	No X	( Yes	No X
post-issuance compliance of its tax-exempt bond liabilities?         Part IV         Arbitrage         1       Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?         2       Is the bond issue a variable rate issue?         3a       Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?         b       Name of provider         c       Term of hedge         d       Was the hedge superintergrated?         e       Was the hedge terminated?         4       Were gross proceeds invested in a guaranteed investment contract (GIC)?		No X X	E	No X X	( Yes	No X X
<ul> <li>post-issuance compliance of its tax-exempt bond liabilities?</li> <li>Part IV Arbitrage</li> <li>1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?</li> <li>2 Is the bond issue a variable rate issue?</li> <li>2 Is the bond issue a variable rate issue?</li> <li>3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?</li> <li>b Name of provider</li> <li>c Term of hedge</li> <li>d Was the hedge superintergrated?</li> <li>e Was the hedge terminated?</li> <li>b Name of provider</li> <li>c Term of GIC</li> </ul>		No X X	E	No X X	( Yes	No X X
<ul> <li>post-issuance compliance of its tax-exempt bond liabilities?</li> <li>Part IV Arbitrage</li> <li>1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?</li> <li>2 Is the bond issue a variable rate issue?</li> <li>2 Is the bond issue a variable rate issue?</li> <li>3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?</li> <li>b Name of provider</li> <li>c Term of hedge</li> <li>d Was the hedge superintergrated?</li> <li>e Was the hedge terminated?</li> <li>b Name of provider</li> <li>c Term of GIC</li> <li>d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?</li> </ul>		No X X X	E	No X X X	( Yes	No X X X
<ul> <li>post-issuance compliance of its tax-exempt bond liabilities?</li> <li>Part IV Arbitrage</li> <li>1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?</li> <li>2 Is the bond issue a variable rate issue?</li> <li>2 Is the bond issue a variable rate issue?</li> <li>3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?</li> <li>b Name of provider</li> <li>c Term of hedge</li> <li>d Was the hedge superintergrated?</li> <li>e Was the hedge terminated?</li> <li>b Name of provider</li> <li>c Term of GIC</li> </ul>		No X X	E	No X X	( Yes	No X X

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closin	ng agreeme	ent
	Yes	X <sub>No</sub>

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

		A		B		Ç		0
a	Yes	No	Yes	No	Yes	No	Yes	No
)								
2								
1								
				1		1		I
rt IV Arbitrage		I	 		- -			
		А		В		С		D
	Yes	No	Yes	No	Yes	No	Yes	No
a								
0				•		•		,
2				1				T
1								<u> </u>
2								├───
3								<u> </u>
2								
2			1		1			<u> </u>
								<u> </u>
			1	<u> </u>	1	1		<u> </u>

Part VI Sup (2) Ti1 0 0 1 3emental Informa 34.19.88 516.90 T6421-23-12Ti1 0 0chtakle K (Form 990)Ti11 Tf1 0 701 746.04 540.90 T15.48 53(No) 1 0 (Continued) Tf1 0 711 746.04 540.90 T1 8 80.45

(Form 990 or 990-EZ)	Com
````	"Yes" on Form 990
Department of the Treasury	or For
Internal Revenue Service	Attach to Form 99
Name of the organization	1

I

#### nplete if the organization answered , Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, rm 990-EZ, Part V, line 38a or 40b.

0 or Form 990-EZ. | See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization	n
--------------------------	---

Employer	identification	number

Complete if the organ	vization answ		section 501(c				-	-		/ lino 40	lh		
1 (a) Name of disc				11.99	<u>70, Fal</u>	<u>, in</u>	(b) Desc			<u>v, iine 40</u>	<u>.</u>		ected?
							. ,					Yes	No
2 Enter the amount of tax impo section 4958 ~~~~~~										\$			
3 Enter the amount of tax,634.r	easuryEnter	the ~	~ ~ ~ ~ ~										
(a)	(b)		(c)				(d)	(e)		(f)		(g)	
								Yes	No	Yes	No	Yes	No
Total													
Total													
(a)			(b)							(c)			
									_				
									_				
		$\rightarrow$							+				
									+				
		$\rightarrow$							+				

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

Schedule L (Form 990 or 990-EZ) 2011

Part IV   Business Transactions Involving Interested Person	IS.
-------------------------------------------------------------	-----

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?
SYLVAN LEARNING	FORMER DI RECTOR	252, 968.	ACADEMIC CO	Yes No

## Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

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

#### (A) NAME OF PERSON: SYLVAN LEARNING

#### (D) DESCRIPTION OF TRANSACTION: ACADEMIC COUNSELING

OMB No. 1545-0047

#### Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

I DEA PUBLIC SCHOOLS

Employer identification number 74-2948339

OMB No. 1545-0047

Open to Public

Inspection

1

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

CITIZENSHIP BY PROVIDING EDUCATIONAL SERVICES TO STUDENTS IN GRADE K

(KINDERGARTEN) THROUGH 12 (TWELVE).

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE WILL REVIEW THE FORM 990 PRIOR TO FILING. POINTS RAISED BY THIS REVIEW ARE RESOLVED BETWEEN KEY FINANCIAL PERSONNEL, OTHER MANAGEMENT PERSONNEL (IF NEEDED) AND THE ORGNAIZATION'S OUTSIDE TAX PREPARER BEFORE FILING. IN ADDITION THE 990 WILL BE EMAILED TO THE FULL BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: IDEA PUBLIC SCHOOL REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFICLT OF INTEREST POLICY BY HAVING ALL PERSONNEL SIGN AN ANNUAL TEA GOVERNANCE REPORTING FORM. ADDITIONALY, THE BOARD IS REQUIRED TO COMPLETE CONFLICT OF INTEREST DISCLOSURE FORMS.

SECTION B, LINE 15: COMPENSATION PROCESS FOR TOP FORM 990. PART VI. OFFICIAL: FOR CEO COMPENSATION, THE BOARD OF DIRECTORS CONTRACTED AN INDEPENDENT EXPERT TO CONDUCT A SURVEY OF CEO'S IN SIMILAR SIZED NON-PROFIT ORGNAIZATIONS IN THE SAME INDUSTRY, BASED ON THE ANALYSIS, THE BOARD OF DIRECTORS APPROVED A SALARY AT A LEVEL WITHIN NON-PROFIT INDUSTRY NORMS. FOR OTHER EXECUTIVES, SALARY WAS SET USING A SIMILAR PROCESS OF INDUSTRY BENCHMARKING BASED ON DATA AGGREGATED BY A FIRM THAT SPECIALIZED IN NON-PROFIT COMPENSATION REPORTS. IN ADDITON, THE ANNUAL TASB REPORT ON SALARIES IN TEXAS PUBLIC SCHOOLS WAS UTILIZED TO CHECK EXTERNAL

#### COMPARABLES.

Name of the organization I DEA PUBLIC SCHOOLS



Employer identification number

#### FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATIONS FINACIAL

#### STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

#### PRIOR PERIOD ADJUSTMENTS:

FORM 990, PART XII, LINE 2C EXPLANATION

### THE FINANCE COMMITTEE ASSUMES RESPONSIBLITY FOR OVERSIGHT OF THE AUDIT

## OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT.

## Page 2

4, 248, 052.

74-2948339

SCHEDULE R	
(Form 990)	

## Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

#### I DEA PUBLIC SCHOOLS

Employer identification number 74-2948339

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

			-		
(a)	(b)	(C)	(d)	(e)	(f)
Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
IDEA SCHOOLS - DONNA LLC - 46-0663509					
505 ANGELITA DR. SUITE 9	NEW MARKET TAX CREDIT				
WESLACO, TX 78596	PROJECT	TEXAS	0.	0.	IDEA PUBLIC SCHOOLS
	]				
	1				
	]				
	1				

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	conti	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No

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

## Schedule R (Form 990) 2011 I DEA PUBLIC SCHOOLS

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

(a)	(b)	(C)	(d)		(e)	(f)	(g)		h)		(i)	(		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related) excluded f	nant income , unrelated, rom tax under s 512-514)	Share of total income	Share of end-of-year assets	ate allo	portion- cations?	Code amoun 20 of S	V-UBI It in box Ichedule rm 1065)	Gene mana part	ner?	Percenta ownersh
		country)		Sections	5 512-514)			Yes	No	K-1 (F0	111 1005)	Yes	NO	
	_													
	-													
	_													
	-													
	-													
	_													
	-													
	-													
	_													
	-													
IV Identification of Related O	rganizations Taxable a	as a Corpo	pration or Trust (Co	mplete if t	he organizat	ion answered "Yes'	' to Form 990, P	art IV, I	line 34	because	e it had o	ne or	more	e relate
organizations treated as a c	rganizations Taxable a orporation or trust durin	as a Corpo	year.)	mplete if t	-		1	art IV, I					more	
IV Identification of Related O organizations treated as a c (a) Name, address, and of related organizati	orporation or trust durir	as a Corpo ng the tax y	pration or Trust (Co year.) (b) Primary activ	- 	he organizat (C) Legal domicile (state or foreign country)	ion answered "Yes' (d) Direct controlling entity	' to Form 990, P (e) Type of entity (C corp, S cor or trust)		line 34 (f) hare o incol	f total	e it had o (g Shar end-o ass	j) e of f-vea	F	e relate (h) Percenta owners
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent
organizations treated as a c (a) Name, address, and	orporation or trust durir	as a Corpo	year.) (b)	- 	(C) Legal domicile (state or foreign	(d) Direct controlling	(e)		(f) hare o	f total	(g Shar end-o	j) e of f-vea	F	(h) Percent

Part VI Unrelated Organizations Taxable as a Partnership r2f 264.58 Tm (Part VI)6.9l0Nr Tji65)r T 264.58 Tm (Part VI)6.9l0NYes.

(a)	(b)	(C)	(d) Predominant income	(e) Are a partners	) all S sec.	(f)	(g)	(h Dispr tior	ר) opor- uate	(i) Code V-UBI	(j) Gener manae	) al or	(k)
			Predominant income (related, unrelated, excluded from tax under section 512-514)	orgs Yes	No			allocations? Yes No		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partn Yes	ner?	
											$\vdash$	_	
	-												
	-										$\left  - \right $		
											$\vdash$		
											$\square$		
				$\dashv$									

Page 4

Part VII Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule R (see instructions).