

**INTERNATIONAL EDUCATION AND COMMUNITY INITIATIVES  
D/B/A ONE BRIGHT RAY, INCORPORATED  
Minutes of a Meeting  
Of the Board of Directors  
Held May 22, 2019**

A meeting of the Board of Directors (the “Board”) of International Education and Community Initiatives, d/b/a One Bright Ray, Incorporated, a Pennsylvania non-profit corporation (“OBR”), was held at the offices of Community Academy of Philadelphia, located at 1100 E. Erie Avenue, Philadelphia, PA 19124, on Wednesday, May 22, 2019. The following Board members were present at the meeting, constituting a quorum: Alberta P. O’Brien, EdD; Aykema Mabery-Austin; Yolanda M. Negrón; and Cassandra McLaughlin. Also present at the meeting were Marcus A. Delgado, Chief Executive Officer and Secretary; Joycet Velasquez, Chief Academic Officer; Anna Duvivier, Chief Operating Officer; Frances Velazquez, Director of Financial Services (who joined by conference call); Valecia Johnson, Director of College Partnership; Michael Whisman, accountant with Charter Choices, Inc.; and Maria Granholm, Esq., of Duane Morris LLP. Board member Joseph H. G. Proietta, M.Ed was absent from the meeting.

Dr. O’Brien served as Chair of the meeting and, having met a quorum, called the meeting to order at 2:01 p.m.

As the first order of business, Dr. O’Brien called for a review of the minutes from the meeting of the Board held on April 10, 2019. The Board reviewed the minutes and, upon a motion that was duly made and seconded, the minutes of the Board from the meeting held on April 10, 2019 were unanimously approved. The Board ordered that the minutes be placed in OBR’s minute book.

Second, Dr. O’Brien requested a financial update. Mr. Whisman reviewed with the Board the attached Financial Statements for the ten (10)-month period ended April 30, 2019. First, Mr. Whisman reviewed with the Board OBR’s budget-to-actual performance for the period. Mr. Whisman reviewed with the Board the budget performance of OBR Non-Profit, noting that OBR Non-Profit had a net loss of \$134,078 for the ten (10)-month period, as compared to the budgeted net income of \$185,703 for the same period, resulting in an unfavorable variance of \$319,781. Mr. Whisman explained that the unfavorable variance resulted from, among other things, year-to-date rental income being less than budgeted due to timing of payments under a new rent schedule, and amortization and interest expenses being higher than budgeted. Mr. Whisman next reviewed the budget-to-actual performance of OBR CHS, noting that OBR CHS had a net loss of \$68,856 for the ten (10)-month period, as compared to a budgeted net loss of \$221,299 for the same period, resulting in a favorable variance of \$152,443. Mr. Whisman explained that the favorable variance primarily related to higher than budgeted revenues due to enrollment. Mr. Whisman also noted that the Harcum Program had an unfavorable variance of \$70,052 (as compared to budget), primarily related to lower than anticipated enrollment and timing of payments. Mr. Whisman advised that, as a result, OBR had a total net loss of \$248,567 for the ten (10)-month period, as compared to a budgeted net loss of \$11,177 for the same period, resulting in an overall unfavorable variance of \$237,390. The

Board discussed the key variances from the budget and overall financial outlook for the fiscal year.

Next, Mr. Whisman reviewed with the Board OBR's Balance Sheet at April 30, 2019, compared to June 30, 2018 (the end of the OBR's prior fiscal year). Mr. Whisman reported that OBR's cash decreased from \$1,165,005 at June 30, 2018 to \$423,293 at April 30, 2019 and that OBR's receivables increased from \$1,221,629 at June 30, 2018 to \$1,516,321 at April 30, 2018. Mr. Whisman noted that the primary reasons for the decrease in cash and increase in receivables was an increase in payables by the School District of Philadelphia (the "School District"), which related to delayed payment by the School District, and awaiting reimbursements on capital project expenses. Ms. Velazquez noted that the School District continues to be about two (2) months behind in its payments.

The Board then continued their discussions from the last Board meeting regarding OBR obtaining a line of credit to create financial flexibility and bridge any gap due to the delayed timing of the School District's payments. The Board queried whether there were any concerns that OBR would not meet its debt covenants and Mr. Whisman responded that the debt covenants were not at issue because, for purposes of calculating compliance with such covenants, OBR gets to add back its non-cash expenses. The Board discussed at length OBR's cash flows and the benefits of having a line of credit available as needed. Mr. Whisman presented the attached resolutions and commercial Loan Application Disclosure information regarding the proposed line of credit with PNC Bank for the Board's review and approval. After further discussion, upon a motion duly made and seconded, the Board unanimously approved the proposed line of credit, up to a maximum amount of \$500,000, and unanimously adopted the attached resolutions related thereto.

Third, Mrs. Mabery-Austin reviewed with the Board the attached salary scale for professional educators and salary ranges for administrators, in each case for the 2019-2020 school year. Mrs. Mabery-Austin noted that the salary scale and salary ranges are consistent with those previously approved, but applicable for the coming school year. The Board discussed the salary scale/ranges and how they compared to the School District, the benefits offered by OBR, including tuition reimbursement and additional funds provided for certain certifications. Mr. Delgado noted that OBR generally gives teachers three (3) years to obtain certain certifications, but if the teachers do not take appropriate steps for obtaining such certifications, OBR may opt not to renew contracts for such teachers. The Board discussed the certification process as well as the support provided to teachers who are asked to obtain certifications. The Board also discussed the average salaries of teachers across OBR, including average tenure. The Board further reviewed and discussed the salary range for administrators for 2019-2020, including asking questions regarding current positions and salaries. Mrs. Mabery-Austin noted that the 2019-2020 salary scale and salary ranges are reflected in the proposed 2019-2020 annual budget (the "Proposed Budget").

Fourth, Mr. Delgado presented the Proposed Budget to the Board, which was included in the Financial Statements packet. Mr. Delgado explained that the Proposed Budget includes a budget for each of the OBR programs, each in a separate column, as well as a column with the total budget across all three (3) programs. Mr. Delgado noted that total School District revenues were budgeted at \$10,450,000 based upon a per pupil rate of \$11,000 for day students and

\$5,500 for night students, assuming 875 day students and 150 night students. Mr. Delgado next reviewed with the Board various differences between OBR's current 2018-2019 budget and the Proposed Budget, including changes in salaries (partially due to changes in positions and contracting versus employing), employee benefits, books and periodicals, computer and various other expenses. The Board discussed at length the services OBR is planning to outsource to contractors, in particular, data processing. Mr. Delgado then directed the Board to the last page of the Proposed Budget, which projects an overall 2019-2020 year-end deficit of \$45,564, but with a \$391,539 year-end surplus budgeted for OBR Non-Profit. Ms. Johnson reviewed with the Board the budget for the Harcum Program, explaining that budgeted revenues were based upon 110 students for the fall session, some of which would be part time. She also provided an update regarding the grant received this year from Harcum College for salaries and other expenses, and confirmed that such grant would be provided again for the next school year. Ms. Johnson also noted that additional funds are expected from iLead, which will help with the Harcum Program meet the projected year-end surplus. Mr. Delgado answered various questions from the Board regarding the Proposed Budget. Thereafter, upon a motion duly made and seconded, the Board unanimously approved the Proposed Budget, including the salary scales/ranges reflected therein, subject to further Board approval of any material changes.

Fifth, Mr. Delgado reviewed with the Board the **attached** 2017 Form 990 for OBR, a copy of which was previously provided to Board members. After a brief discussion regarding the Form 990, including the impact of new tax laws on the School's Form 990, upon a motion duly made and seconded, the Board unanimously approved the Form 990, and the filing of the Form 990.

Sixth, Mr. Delgado provided updates regarding OBR's capital projects. Mr. Delgado indicated that OBR plans to proceed with OBR's largest capital projects – the roofs at the Simpson and Fairhill campuses, as well as the Simpson campus parking lot. Ms. Duvivier reviewed with the Board the **attached** RFP for removal and replacement of roof, and provided an overview of OBR's request for proposal process, who submitted bids and how OBR makes a decision with respect to bids. The Board asked questions regarding such capital projects, discussed OBR's request for proposal process and agreed that OBR should proceed with such projects.

Seventh, Mrs. Velasquez reviewed with the Board the **attached** 2019-2020 Academic Calendar. Mrs. Velasquez noted that the calendar reflects 181 instructional days and 229 teacher days, which is compliant with applicable instructional requirements. Following a brief discussion regarding the 2019-2020 Academic Calendar, including differences from the 2018-2019 Academic Calendar, upon a motion duly made and seconded, the 2019-2020 Academic Calendar was unanimously approved by roll call vote as follows:

1. For: Dr. O'Brien, Ms. Duvivier, Mrs. Mabery-Austin, Ms. Negrón and Ms. McLaughlin.
2. Against: None.
3. Abstain: None.

4. Absent: Mr. Proietta

Eighth, the Board reviewed and discussed the attached Board Member List, which sets forth OBR management's thoughts on Board composition and what backgrounds/experience would be useful to have on the Board. The Board also reviewed a resume for Board nominee Lauren Nelson, who previously worked for OBR. Mr. Delgado proposed having her join the Board meeting at the beginning of the next school year. After discussion regarding Ms. Nelson joining as a Board member, upon a motion duly made and seconded, the Board unanimously approved sending an offer letter to Ms. Nelson to join the Board, beginning with the 2019-2020 school year. Mr. Delgado noted that, in anticipation of expanding the Board, Board meetings for the 2019-2020 school year have been scheduled for 4:00 p.m., as noted in the attached 2019-2020 Board Meeting Schedule.

Ninth, Dr. O'Brien asked Mrs. Velasquez to provide any additional campus updates. First, Mrs. Velasquez provided an update regarding a short Middle States visit to OBR's Strawberry Mansion campus that occurred on April 29. Mrs. Velasquez noted that the visit went well, and that it was suggested that, given OBR's multiple campuses, in the future, OBR seek accreditation at a school level rather than at a campus level. Mrs. Velasquez explained the different types of accreditations and how a school level accreditation could be beneficial for OBR. Next, Mrs. Velasquez reported that OBR's graduation ceremonies are scheduled for June for night students and August for day students. Mrs. Velasquez also reported that the School District has been very supportive with respect to the graduation ceremonies, providing various resources, including interpreters, space, etc., at no additional cost. Mrs. Velasquez next noted that OBR students presented at the ASPEN National Conferences last month in Philadelphia and that over half of the students who interned through such program obtained jobs out of such internship.

Tenth, Ms. Johnson provided the Board with an update on the Harcum Program. Ms. Johnson reported that graduation and an awards ceremony are scheduled for today, with 29 graduates and over 40 students being honored at the awards ceremony. Ms. Johnson noted that recruitment for next year is in full swing, and that the program has met over 50% of its application goal of 70 applications. Ms. Johnson reported that the Harcum Program hired an additional person to assist with recruiting, scheduling and other administrative needs. Finally, Ms. Johnson noted that the Harcum Program would be offering a summer brush-up course in July at OBR for incoming students.

Eleventh, Dr. O'Brien asked if there was any new business to come before the Board. There being no further new business to come before the Board, Dr. O'Brien reminded the Board that the next Board meeting is scheduled for Wednesday, October 23, 2019 at 4:00 p.m.

Thereafter, upon a motion duly made, seconded and unanimously approved, the meeting was adjourned at 3:16 p.m.

**Board**  
 One Bright Ray, Inc.  
 1142 E. Erie Ave.  
 Philadelphia, PA 19124



**Board Meeting**  
**May 22, 2018 at 2:00 p.m.**

Name	Signature
Joseph H. G. Proietta	
Alberta O'Brien	<i>A. O'Brien</i>
Yolanda Negron	<i>Y. Negron</i>
Aykema Mabery-Austin	<i>A. Mabery-Austin</i>
Cassandra McLaughlin	<i>Cassandra McLaughlin</i>
Maria Granholm	<i>Maria Granholm</i>
Michael Whisman	<i>M. Whisman</i>
Joe Martin	ABSENT
Marcus A. Delgado	<i>M. Delgado</i>
Frances Velazquez	<i>Frances Velazquez</i>
Joycet Velasquez	<i>Joycet Velasquez</i>
Anna Duvivier	<i>Anna Duvivier</i>
Valecia Johnson	<i>Valecia Johnson</i>
Guest Name:	

**IECI**

**Financial Statements and FY2020 Draft Budget**

**April 30, 2019**

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April 2019

Members of the Board of Trustees  
IECI

This Summary and Management Report presents information we believe is important to you as members of the school board. We encourage you to review the sections of this report, and we would be pleased to furnish additional information as requested.

# 1. Budget to Actual for the ten months ending April 30, 2019

## BUDGET-TO-ACTUAL SUMMARY - OBR

April 30, 2019

	Actual	Budget	Variance - favorable (unfavorable)
<b><i>OBR non-profit</i></b>			
Revenue	948,733	955,760	(7,027)
Expense	1,082,811	770,057	(312,754)
Change in net assets	(134,078)	185,703	(319,781)
<b><i>OBR CHS</i></b>			
Revenue	7,739,245	7,661,388	77,857
Expense	7,808,102	7,882,687	74,585
Change in net assets	(68,856)	(221,299)	152,443
<b><i>Harcum Program</i></b>			
Revenue	119,241	166,697	(47,456)
Expense	164,874	142,278	(22,596)
Change in net assets	(45,633)	24,419	(70,052)
<b><i>TOTAL</i></b>			
Revenue	8,807,219	8,783,845	23,374
Expense	9,055,786	8,795,022	(260,764)
Change in net assets	(248,567)	(11,177)	(237,390)

- Key variances include:

### OBR non-profit:

- YTD rental income less than budgeted primarily due to the timing of payments. Payments were made in December to agree with new rent schedule.
- Amortization expense is higher than budget. Unamortized costs associated with the Citizens loan were fully amortized with the refinance.



- Projected interest expenses are higher than budget due to the new allocation of debt service payments.

OBR CHS:

- Higher than budget revenues due to enrollment.

**2. Balance Sheet**

Balance Sheet Analysis	June 30, 2017	June 30, 2018	April 30, 2018
Cash and Equivalents	695,827	1,165,005	423,293
Receivables	1,155,973	1,221,629	1,516,321
Prepaid Expenses	17,170	43,494	5,877
Accrued Expenses	64,324	77,806	550,021
Net Income (Loss)	830,243	413,421	(248,567)

- Cash position decreased over the fiscal year to date from \$1,165,005 at June 30, 2018 to \$423,293 at April, 2019. The primary reason for this decrease is the increase in district receivables and awaiting reimbursements on capital project expenses. We received payment for March in early May.
- Total receivables increased from \$1,221,629 at June 30, 2018 to \$1,516,321 at April 30, 2019

**IECI**  
**Statements of Financial Position**  
**As of April 30, 2019**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL	6/30/18 Audited
<b>ASSETS</b>					
<b>Current Assets</b>					
Cash and Cash Equivalents	111,572	291,849	19,873	423,293	1,165,005
District Receivables	0	1,516,321	0	1,516,321	1,102,780
Federal Receivables	0	0	0	0	12,389
Other Receivables	0	0	0	0	106,460
Prepaid Expenses	0	5,877	0	5,877	43,494
<b>Total Current Assets</b>	<b>111,572</b>	<b>1,814,047</b>	<b>19,873</b>	<b>1,945,491</b>	<b>2,430,129</b>
<b>Fixed Assets</b>					
Land	650,000	0	0	650,000	650,000
Buildings	15,856,946	0	0	15,856,946	15,856,946
Leasehold Improvements	325,339	986,096	0	1,311,435	986,096
Furniture, Fixtures & Equipment	0	948,756	0	948,756	948,756
Vehicles	0	86,884	0	86,884	86,884
Other Fixed Asset	0	45,886	0	45,886	45,886
<b>Fixed Assets Total</b>	<b>16,832,285</b>	<b>2,067,622</b>	<b>0</b>	<b>18,899,907</b>	<b>18,574,568</b>
Accumulated Depreciation	-7,662,386	-996,755	0	-8,659,141	-8,659,141
Closing Costs	683,023	0	0	683,023	0
<b>Total Fixed Assets</b>	<b>9,852,922</b>	<b>1,070,868</b>	<b>0</b>	<b>10,923,789</b>	<b>9,915,427</b>
<b>Other Assets</b>					
Deferred Costs - Net	393,013	0	0	393,013	661,321
<b>Assets Related to 2018 Financing</b>					
Project Fund	3,816,919	0	0	3,816,919	0
Repair & Replacement Accounts	250,000	0	0	250,000	0
Debt Service Reserve Fund	1,195,824	0	0	1,195,824	0
Revenue Fund	621,439	0	0	621,439	0
<b>Total Assets Related to Financing</b>	<b>5,884,183</b>	<b>0</b>	<b>0</b>	<b>5,884,183</b>	<b>0</b>
<b>TOTAL ASSETS</b>	<b>16,241,689</b>	<b>2,884,915</b>	<b>19,873</b>	<b>19,146,477</b>	<b>13,006,877</b>
<b>LIABILITIES &amp; EQUITY</b>					
<b>Liabilities</b>					
<b>Current Liabilities</b>					
Accounts Payable	0	28,211	0	28,211	118,269
Accrued Expenses	525,822	24,199	0	550,021	77,806
Intercompany Balances	0	0	0	0	0
Deferred Revenues	0	307,125	0	307,125	0
<b>Total Current Liabilities</b>	<b>525,822</b>	<b>359,535</b>	<b>0</b>	<b>885,357</b>	<b>196,075</b>
<b>Long Term Liabilities</b>					
Bonds Payable (Series 2018 A&B)	19,065,000	0	0	19,065,000	12,680,000
Issuance Cost Discount	-686,115	0	0	-686,115	0
Notes Payable	0	48,372	0	48,372	48,372
<b>Total Long Term Liabilities</b>	<b>18,378,885</b>	<b>48,372</b>	<b>0</b>	<b>18,427,257</b>	<b>12,728,372</b>
<b>Total Liabilities</b>	<b>18,904,707</b>	<b>407,906</b>	<b>0</b>	<b>19,312,614</b>	<b>12,924,446</b>
<b>Equity</b>					
3010 - Unrestricted Net Assets	-2,526,505	2,496,887	112,049	82,430	-330,991
Net Income	-136,512	-19,879	-92,176	-248,567	413,421
<b>Total Equity</b>	<b>-2,663,018</b>	<b>2,477,008</b>	<b>19,873</b>	<b>-166,137</b>	<b>82,430</b>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>16,241,689</b>	<b>2,884,915</b>	<b>19,873</b>	<b>19,146,477</b>	<b>13,006,877</b>
<b>Cash on Hand</b>				<b>16</b>	<b>43</b>
<b>Current Ratio</b>				<b>2</b>	<b>12</b>

**IECI**  
**Statements of Activities**  
**As of April 30, 2019**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
Income				
5000 · Program Revenues	-	-	-	-
5121 · School District Revenue	-	7,581,000	-	7,581,000
5122 · Start-Up & Implementation Grant	-	-	-	-
5200 · Non-Governmental Contracts/Fees	-	-	-	-
5211 · Harcum College	-	-	-	-
5212 · Education Plus - Harcum @ OBR	-	-	-	-
5200 · Non-Governmental Contracts/Fees - Other	-	-	-	-
5250 · Harcum Revenue	-	-	-	-
5251 · Cohort Support	-	-	33,077	33,077
5252 · Jumpstart	-	-	-	-
5253 · Tuition	-	-	86,164	86,164
5254 · Building Capacity	-	-	-	-
5255 · Program Expenses	-	-	-	-
5250 · Harcum Revenue - Other	-	-	-	-
5300 · Rental Income	-	-	-	-
5311 · CAP - 1100 E. Erie	162,864	-	-	162,864
5312 · CAP - Modular	-	-	-	-
5321 · OBRCHS - Intercompany	-	-	-	-
5300 · Rental Income - Other	739,928	-	-	739,928
5500 · Contributions & Support	-	-	-	-
5520 · Donated Use of Facilities	-	-	-	-
5500 · Contributions & Support - Other	-	3,350	-	3,350
Total 5500 · Contributions & Support	-	-	-	-
5600 · Revenue from Federal Grants	-	-	-	-
5610 · Food Program Revenue (NSLP)	-	80,953	-	80,953
5600 · Revenue from Federal Grants - Other	-	-	-	-
5000 · Program Revenues - Other	-	-	-	-
<b>Total 5000 · Program Revenues</b>	<b>902,792</b>	<b>7,665,303</b>	<b>119,241</b>	<b>8,687,337</b>
5900 · Intercompany Fees	-	-	-	-
5911 · OBR Management Fee - OBRCHS	-	-	-	-
5912 · OBR Management Fee - BCHS	-	-	-	-
5913 · OBR Management Fee - Harcum	-	-	-	-
5900 · Intercompany Fees - Other	-	-	-	-
Total 5900 · Intercompany Fees	-	-	-	-
6000 · General Revenues	-	-	-	-
6200 · Student Revenues	-	-	-	-
6203 · School store	-	32,318	-	32,318
6204 · Prom	-	6,375	-	6,375
6205 · Graduation	-	23,362	-	23,362
6206 · Summer Cafe	-	-	-	-
6291 · Student fundraising	-	-	-	-
6299 · Miscellaneous Student Revenues	-	-	-	-
6200 · Student Revenues - Other	-	-	-	-
6300 · Other Revenues	-	-	-	-
6301 · Daycare Fees	-	3,127	-	3,127
6371 · Golf Fundraising Revenue	-	-	-	-
6372 · Fairhill Fundraising Revenue	-	1,919	-	1,919
6373 · Simpson Fundraising Revenue	-	1,409	-	1,409
6374 · Elmwood Fundraising Revenue	-	1,330	-	1,330
6375 · Other Fundraising Revenue	-	-	-	-
6371 · Mansion Day Fundraising Revenue	-	2,199	-	2,199
6391 · Refund of Prior Yr Expenditure	-	-	-	-
6399 · Miscellaneous other revenue	-	1,393	-	1,393

**IECI**  
**Statements of Activities**  
**As of April 30, 2019**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
6300 · Other Revenues - Other	-	-	-	-
9000 · Project Fund Proceeds	-	-	-	-
<b>Total 6300 · Other Revenues</b>	-	-	-	-
<b>6000 · General Revenues - Other</b>	-	-	-	-
<b>Total 6000 · General Revenues</b>	-	<b>73,433</b>	-	<b>73,433</b>
<b>Total Income</b>	<b>902,792</b>	<b>7,739,245</b>	<b>119,241</b>	<b>8,761,279</b>
Expense	-	-	-	-
0000 · Suspense - CC	-	-	-	-
7100 · Salaries	-	-	-	-
7111 · OBR Administration	-	305,073	74,178	379,251
7112 · School Administration	-	908,484	-	908,484
7120 · Instructional salaries	-	2,086,190	13,132	2,099,321
7150 · Non-instructional staff	-	1,604,698	39,629	1,644,327
7100 · Salaries - Other	-	-	-	-
<b>Total 7100 · Salaries</b>	-	<b>4,904,444</b>	<b>126,938</b>	<b>5,031,382</b>
7200 · Benefits	-	-	-	-
7211 · Health Insurance	-	615,493	10,526	626,019
7212 · Dental Insurance	-	45,981	1,038	47,019
7213 · Life & Disability Insurance	-	2,511	60	2,570
7220 · Social Security & Medicare	-	373,461	9,631	383,091
7240 · Tuition Reimbursement	-	8,654	-	8,654
7250 · Unemployment Compensation	-	71,196	2,394	73,590
7290 · Retirement Contributions	-	134,340	121	134,462
7200 · Benefits - Other	-	-	-	-
<b>Total 7200 · Benefits</b>	-	<b>1,251,636</b>	<b>23,769</b>	<b>1,275,405</b>
7300 · Professional Fees	-	-	-	-
7311 · OBR Management Fee	-	-	-	-
7312 · School District Service Fees	-	165,400	-	165,400
7321 · Psychological Services	-	-	-	-
7329 · Contracted Educational Services	-	-	2,650	2,650
7331 · Accounting	-	34,768	-	34,768
7332 · Auditing	-	20,000	-	20,000
7333 · Legal fees	-	16,538	-	16,538
7334 · Payroll fees	-	11,778	-	11,778
7340 · Technical Support Services	-	-	-	-
7341 · Website Design	-	2,314	-	2,314
7342 · Computer Repair Services	-	-	-	-
7340 · Technical Support Services - Other	-	55,674	-	55,674
<b>Total 7300 · Professional Fees</b>	-	<b>306,472</b>	<b>2,650</b>	<b>309,122</b>
7400 · Rent & Occupancy	-	-	-	-
7410 · Cleaning	-	-	-	-
7411 · Trash Removal	-	19,864	-	19,864
7412 · Snow Removal	-	8,075	-	8,075
7410 · Cleaning - Other	-	17,887	-	17,887
7420 · Utilities	-	-	-	-
7422 · Gas & Electric	-	30,511	-	30,511
7423 · Oil	-	4,350	-	4,350
7424 · Water	-	12,407	-	12,407
7420 · Utilities - Other	-	-	-	-
7430 · Maintenance	-	-	-	-
7431 · Building Supplies	-	37,784	-	37,784
7432 · Repairs & Renovations	-	6,297	-	6,297
7433 · Equipment Repairs	-	1,231	-	1,231
7435 · Heating & Air	-	24,252	-	24,252

**IECI**  
**Statements of Activities**  
**As of April 30, 2019**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
7436 · Extermination	-	4,616	-	4,616
7437 · Security	-	1,393	-	1,393
7439 · Licenses & Permits	-	4,860	-	4,860
7430 · Maintenance - Other	-	-	-	-
7440 · Rental Expense	-	-	-	-
7441 · Rent - Fairhill & Simpson	-	131,983	-	131,983
7442 · Rent - Elmwood	-	68,524	-	68,524
7443 · Rent - Modular	-	-	-	-
7444 · Mansion Rent	-	77,099	-	77,099
7445 · Donated Use of Building	-	-	-	-
7447 · Equipment Rental	-	-	-	-
7448 · Copier Lease	-	47,570	-	47,570
7440 · Rental Expense - Other	-	-	-	-
7490 · Auto	-	-	-	-
7491 · Auto Maintenance	-	190	-	190
7492 · Vehicle Lease	-	-	-	-
7493 · Parking	-	30	-	30
7490 · Auto - Other	-	-	-	-
<b>Total 7400 · Rent &amp; Occupancy</b>	-	<b>498,922</b>	-	<b>498,922</b>
7500 · Other Services	-	-	-	-
7520 · Insurance	-	-	-	-
7522 · Auto Insurance	-	7,278	-	7,278
7523 · Property - Commercial Package	-	15,306	-	15,306
7524 · Student Accident	-	838	-	838
7525 · Directors & Officers	-	8,838	-	8,838
7527 · General Liability	-	33,092	-	33,092
7528 · Umbrella	-	11,137	-	11,137
7529 · Workers Compensation	-	26,869	-	26,869
7520 · Insurance - Other	-	-	-	-
7530 · Communications	-	-	-	-
7531 · Internet & Landline	-	31,491	-	31,491
7532 · Cell Phones	-	2,532	1,533	4,065
7539 · Postage & Delivery	-	2,500	55	2,555
7530 · Communications - Other	-	6,292	-	6,292
7540 · Advertising	-	6,328	-	6,328
7550 · Printing & Reproduction	-	17,236	-	17,236
7570 · Food Service	-	-	-	-
7571 · Food Program Supplies	-	2,526	-	2,526
7570 · Food Service - Other	-	137,594	-	137,594
7580 · Travel	-	-	-	-
7581 · Mileage Reimbursement	-	1,297	-	1,297
7580 · Travel - Other	-	2,627	-	2,627
7500 · Other Services - Other	-	-	-	-
<b>Total 7500 · Other Services</b>	-	<b>313,780</b>	<b>1,588</b>	<b>315,368</b>
7600 · Supplies	-	-	-	-
7610 · Instructional Supplies	-	89,263	-	89,263
7611 · Office Supplies	-	22,983	68	23,051
7612 · Gifts	-	100	-	100
7613 · Binders	-	-	-	-
7614 · Student Uniforms	-	22,211	-	22,211
7615 · School Store Supplies	-	28,670	-	28,670
7616 · Cafe	-	-	-	-
7617 · Employee Uniforms	-	1,205	-	1,205
7630 · Food	-	13,455	202	13,657

**IECI**  
**Statements of Activities**  
**As of April 30, 2019**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
7640 · Books & Periodicals	-	669	-	669
7650 · Technology	-	-	-	-
7651 · Computers	-	147,298	3,513	150,811
7652 · Technology Software	-	21,391	-	21,391
7653 · Tech Support Services	-	-	-	-
7654 · Tech Supplies	-	14,215	-	14,215
7650 · Technology - Other	-	-	-	-
7600 · Supplies - Other	-	-	-	-
<b>Total 7600 · Supplies</b>	-	<b>361,461</b>	<b>3,783</b>	<b>365,244</b>
7700 · Property & Equipment	-	-	-	-
7751 · Equipment	-	15,779	-	15,779
7752 · Furniture	-	35,116	-	35,116
7700 · Property & Equipment - Other	-	-	-	-
<b>Total 7700 · Property &amp; Equipment</b>	-	<b>50,895</b>	-	<b>50,895</b>
7800 · Other Operating Expenses	-	-	-	-
7810 · Dues & Subscriptions	-	1,301	-	1,301
7811 · Bank Service Charges	116	417	-	533
7812 · Credit Card Fees	-	-	-	-
7813 · Employment Clearances	-	130	-	130
7891 · Contributions	-	-	-	-
7898 · Reconciliation Discrepancies	-	-	-	-
7899 · Miscellaneous	-	-	-	-
7800 · Other Operating Expenses - Other	-	-	-	-
<b>Total 7800 · Other Operating Expenses</b>	<b>116</b>	<b>1,849</b>	-	<b>1,965</b>
7900 · Program Expenses	-	-	-	-
7910 · Student Activities	-	-	-	-
7911 · Prom	-	2,000	-	2,000
7912 · Graduation	-	33,950	-	33,950
7913 · Honors Luncheon	-	74	-	74
7914 · Holidays	-	3,845	98	3,944
7915 · Student Government	-	-	-	-
7916 · Student Incentives & Events	-	8,876	5,722	14,598
7917 · Module & School Trips	-	9,418	325	9,743
7918 · Module Supplies	-	7,552	-	7,552
7910 · Student Activities - Other	-	1,006	-	1,006
7930 · Instructional Programs	-	-	-	-
7933 · Student Assessment	-	17,964	-	17,964
7940 · Special Education	-	-	-	-
7949 · Other Instructional Programs	-	-	-	-
7930 · Instructional Programs - Other	-	-	-	-
7950 · Employee Programs	-	-	-	-
7951 · Professional Development	-	-	-	-
7952 · Travel	-	-	-	-
7953 · Hotel	-	-	-	-
7951 · Professional Development - Other	-	8,905	-	8,905
7954 · Employee Appreciation	-	2,176	-	2,176
7950 · Employee Programs - Other	-	-	-	-
7960 · Parent Involvement	-	-	-	-
7961 · Open House & Parent Conferences	-	892	-	892
7960 · Parent Involvement - Other	-	-	-	-
7970 · Fundraising	-	-	-	-
7972 · Fairhill Campus Fundraising	-	724	-	724
7973 · Simpson Campus Fundraising	-	990	-	990
7974 · Elmwood Campus Fundraising	-	1,069	-	1,069

**IECI**  
**Statements of Activities**  
**As of April 30, 2019**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
7975 · Other Fundraising	-	-	-	-
7977 · Mansion Night Fundraising	-	419	-	419
7976 · Mansion Day Fundraising	-	413	-	413
7970 · Fundraising - Other	-	-	-	-
7971 · Golf Fundraising	-	-	-	-
7900 · Program Expenses - Other	-	-	-	-
<b>Total 7900 · Program Expenses</b>	<b>-</b>	<b>100,273</b>	<b>6,145</b>	<b>106,418</b>
4000 · Capital Project	-	-	-	-
4004 · Draw 4	-	-	-	-
4003 · Draw 3	-	-	-	-
4002 · Draw 2	-	-	-	-
4001 · Draw 1	-	-	-	-
4000 · Capital Project - Other	-	-	-	-
Total 4000 · Capital Project	-	-	-	-
<b>Total Expense</b>	<b>5,925</b>	<b>7,808,102</b>	<b>164,874</b>	<b>7,978,900</b>
<b>Net Ordinary Income</b>	<b>896,868</b>	<b>(68,856)</b>	<b>(45,633)</b>	<b>782,379</b>
Other Income/Expense	-	-	-	-
Other Income	-	-	-	-
9002 · Interest Earned on Debt Holding	45,941	-	-	45,941
8000 · Gain (Loss) on Disposal	-	-	-	-
<b>Total Other Income</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Other Expense	-	-	-	-
9001 · Depreciation	-	-	-	-
9050 · Amortization	268,308	-	-	268,308
9100 · Interest Expense	13,825	-	-	13,825
9101 · Interest Expense - Series 2002A	-	-	-	-
9102 · Interest Expense - Series 2002B	69,709	-	-	69,709
9103 · Interest Expense - Bonds	-	-	-	-
9104 · Interest - Citizens Comm Loan	102,616	-	-	102,616
9098 · Interest Related to 2018 Financ	622,428	-	-	622,428
9105 · Interest Expense - LOC	-	-	-	-
9201 · Loss (Gain) on SWAP Instruments	-	-	-	-
9202 · Loss - Discontinued Operations	-	-	-	-
9900 · Budgetary Reserve	-	-	-	-
<b>Total Other Expense</b>	<b>1,076,886</b>	<b>-</b>	<b>-</b>	<b>1,076,886</b>
<b>Net Other Income</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Net Income</b>	<b>(134,078)</b>	<b>(68,856)</b>	<b>(45,633)</b>	<b>(248,567)</b>

**One Bright Ray - Non Profit**  
**Budget-to-Actual**  
**As of April 30, 2019**

	<u>Year-to-date Actual</u>	<u>Year-to-date Budget</u>	<u>YTD Variance - favorable/ (unfavorable)</u>	<u>End-of-year Projection</u>	<u>Board- Approved Budget</u>	<u>EOY Variance - favorable/ (unfavorable)</u>
<b>REVENUES</b>						
CAP 1100 E. Erie	739,928	805,760	(65,832)	976,666	966,912	9,754
OBRCHS Intercompany	162,864	150,000	12,864	179,152	180,000	(848)
<b>Total Rental Income</b>	<b>902,792</b>	<b>955,760</b>	<b>(52,968)</b>	<b>1,155,818</b>	<b>1,146,912</b>	<b>8,906</b>
Interest Earned on Debt	45,941	-	45,941	64,361	-	64,361
<b>TOTAL REVENUES</b>	<b>\$ 948,733</b>	<b>\$ 955,760</b>	<b>\$ (7,027)</b>	<b>\$ 1,220,179</b>	<b>\$ 1,146,912</b>	<b>\$ 73,267</b>
<b>EXPENDITURES</b>						
Dues & Fees	116	588	472	266	705	439
Capital Projects	5,809	90,047	84,239	-	108,057	108,057
<b>Total Operating Expenditures</b>	<b>5,925</b>	<b>90,635</b>	<b>84,710</b>	<b>266</b>	<b>108,762</b>	<b>108,496</b>
<b>Debt Service</b>						
Depreciation	-	-	-	700,000	580,831	(119,169)
Amortization	268,308	223,590	(44,718)	300,000	268,308	(31,692)
Interest	808,579	455,833	(352,746)	809,242	546,999	(262,243)
<b>Total Debt Service</b>	<b>1,076,886</b>	<b>679,422</b>	<b>(397,464)</b>	<b>1,809,242</b>	<b>1,396,138</b>	<b>(413,104)</b>
<b>Total Expenditures</b>	<b>\$ 1,082,811</b>	<b>\$ 770,057</b>	<b>\$ (312,754)</b>	<b>\$ 1,809,508</b>	<b>\$ 1,504,899</b>	<b>\$ (304,609)</b>
<b>Net Change in Fund Balance</b>	<b>\$ (134,078)</b>	<b>\$ 185,703</b>	<b>\$ (319,781)</b>	<b>\$ (589,329)</b>	<b>\$ (357,987)</b>	<b>\$ (231,342)</b>



**One Bright Ray - OBRCHS**  
**Budget-to-Actual**  
**As of April 30, 2019**

	Year-to-date Actual	Year-to-date Budget	YTD Variance - favorable/ (unfavorable)	End-of-year Projection	Board-Approved Budget	EOY Variance - favorable/ (unfavorable)
<b>REVENUES</b>						
School District Revenue	7,581,000	7,496,160	84,840	9,482,202	9,370,200	112,002
Food Program Revenue	80,953	90,000	(9,047)	100,000	108,000	(8,000)
Student Revenues	62,056	70,833	(8,778)	85,000	85,000	-
Fundraising Revenue	10,716	2,167	8,550	12,115	2,600	9,516
Miscellaneous Revenue	4,520	2,228	2,292	5,820	2,673	3,147
<b>Total School Operations Revenue</b>	<b>7,739,245</b>	<b>7,661,388</b>	<b>77,857</b>	<b>9,685,138</b>	<b>9,568,473</b>	<b>116,665</b>
<b>TOTAL REVENUES</b>	<b>\$ 7,739,245</b>	<b>\$ 7,661,388</b>	<b>\$ 77,857</b>	<b>\$ 9,685,138</b>	<b>\$ 9,568,473</b>	<b>\$ 116,665</b>
<b>EXPENDITURES</b>						
<b>Salaries</b>						
OBR Administration Salaries	305,073	318,357	13,284	370,735	382,028	11,293
School Administration Salaries	908,484	936,301	27,817	1,094,500	1,123,561	29,061
Instructional Salaries	2,086,190	2,183,234	97,044	2,497,443	2,619,880	122,438
Non-Instructional Salaries	1,604,698	1,652,746	48,048	1,937,963	1,983,295	45,332
<b>Total Salaries</b>	<b>4,904,444</b>	<b>5,090,637</b>	<b>186,193</b>	<b>5,900,640</b>	<b>6,108,764</b>	<b>208,124</b>
<b>Employee Benefits</b>						
Health and Dental	661,474	600,382	(61,092)	801,656	720,459	(81,198)
FICA	373,461	382,773	9,313	451,267	459,328	8,061
Retirement Contributions	134,340	151,442	17,102	158,340	181,730	23,390
Other Employee Benefits	82,361	100,059	17,699	119,858	120,071	214
<b>Total Employee Benefits</b>	<b>1,251,636</b>	<b>1,234,657</b>	<b>(16,979)</b>	<b>1,531,121</b>	<b>1,481,588</b>	<b>(49,533)</b>
Professional Fees	324,436	341,481	17,044	411,568	409,777	(1,791)
Cleaning	45,826	47,646	1,821	48,991	57,176	8,185
Utilities	47,268	42,083	(5,184)	53,268	50,500	(2,768)
Maintenance	80,433	59,355	(21,078)	86,536	71,226	(15,310)
Rent	325,176	354,734	29,558	419,050	425,680	6,630
Auto	220	833	614	630	1,000	370
Insurance	103,357	113,207	9,850	126,506	135,848	9,343
Communications	42,815	33,833	(8,982)	49,219	40,600	(8,619)
Advertising	6,328	8,596	2,267	10,000	10,315	315
Printing	17,236	31,667	14,431	21,636	38,000	16,364
Food Service	140,120	109,667	(30,453)	172,795	131,600	(41,195)
Travel	3,925	3,750	(175)	5,227	4,500	(727)
Supplies	182,802	109,667	(73,136)	187,802	131,600	(56,202)
Food	13,455	10,000	(3,455)	15,455	12,000	(3,455)
Books	669	667	(3)	669	800	131
Technology	182,904	156,802	(26,102)	183,632	188,162	4,530
Property & Equipment	50,895	41,152	(9,743)	50,895	49,383	(1,512)
Dues & Fees	1,849	2,171	322	2,942	2,605	(337)
Student Activities	66,721	72,083	5,362	94,851	86,500	(8,351)
Professional Development	8,905	12,500	3,595	9,500	15,000	5,500
Employee Appreciation	2,176	2,083	(92)	6,000	2,500	(3,500)
Parent Involvement	892	833	(58)	892	1,000	108
Fundraising	3,615	2,583	(1,032)	4,800	3,100	(1,700)
<b>Total Operating Expenditures</b>	<b>1,652,021</b>	<b>1,557,393</b>	<b>(94,628)</b>	<b>1,962,866</b>	<b>1,868,872</b>	<b>(93,994)</b>
<b>Total Expenditures</b>	<b>\$ 7,808,102</b>	<b>\$ 7,882,687</b>	<b>\$ 74,585</b>	<b>\$ 9,394,628</b>	<b>\$ 9,459,225</b>	<b>\$ 64,597</b>
<b>Budgetary Reserve</b>	-	-	-	-	-	-
<b>Net Change In Fund Balance</b>	<b>\$ (68,856)</b>	<b>\$ (221,299)</b>	<b>\$ 152,443</b>	<b>\$ 290,511</b>	<b>\$ 109,249</b>	<b>\$ 181,262</b>

**One Bright Ray - Harcum**  
**Budget-to-Actual**  
**As of April 30, 2019**

	Year-to-date Actual	Year-to-date Budget	YTD Variance - favorable/ (unfavorable)	End-of-year Projection	Board- Approved Budget	EOY Variance - favorable/ (unfavorable)
<b>REVENUES</b>						
Cohort Support	33,077	33,000	77	6,500	39,600	(33,100)
Tuition	86,164	133,697	(47,533)	220,000	200,546	19,454
Building Capacity	-	-	-	-	-	-
<b>Total Harcum Revenues</b>	<b>119,241</b>	<b>166,697</b>	<b>(47,456)</b>	<b>226,500</b>	<b>240,146</b>	<b>(13,646)</b>
<b>TOTAL REVENUES</b>	<b>\$ 119,241</b>	<b>\$ 166,697</b>	<b>\$ (47,456)</b>	<b>\$ 226,500</b>	<b>\$ 240,146</b>	<b>\$ (13,646)</b>
<b>EXPENDITURES</b>						
<b>Salaries</b>						
OBR Administration Salaries	74,178	47,333	(26,845)	88,415	71,000	(17,415)
School Administration Salaries	-	-	-	-	-	-
Instructional Salaries	13,132	10,667	(2,465)	17,608	16,000	(1,608)
Non-Instructional Salaries	39,629	37,775	(1,854)	48,019	56,662	8,643
<b>Total Salaries</b>	<b>126,938</b>	<b>95,775</b>	<b>(31,163)</b>	<b>154,041</b>	<b>143,662</b>	<b>(10,379)</b>
<b>Employee Benefits</b>						
Health and Dental	11,564	9,985	(1,579)	14,102	14,978	876
FICA	9,631	7,327	(2,304)	11,704	10,990	(714)
Retirement Contributions	121	2,873	2,752	4,664	4,310	(354)
Other Employee Benefits	2,453	1,251	(1,202)	2,829	1,877	(952)
<b>Total Employee Benefits</b>	<b>23,769</b>	<b>21,437</b>	<b>(2,332)</b>	<b>33,300</b>	<b>32,155</b>	<b>(1,145)</b>
Professional Fees	2,650	-	(2,650)	2,650	-	(2,650)
Communications	1,588	333	(1,255)	1,888	500	(1,388)
Travel	-	2,000	2,000	-	3,000	3,000
Supplies	68	2,000	1,932	70	3,000	2,930
Food	202	-	(202)	202	-	(202)
Books	-	2,000	2,000	-	3,000	3,000
Technology	3,513	-	(3,513)	3,513	-	(3,513)
Dues & Fees	-	67	67	-	100	100
Student Activities	6,145	16,667	10,521	10,000	25,000	15,000
Professional Development	-	2,000	2,000	-	3,000	3,000
<b>Total Operating Expenditures</b>	<b>14,167</b>	<b>25,067</b>	<b>10,900</b>	<b>18,323</b>	<b>37,600</b>	<b>19,277</b>
<b>Total Expenditures</b>	<b>\$ 164,874</b>	<b>\$ 142,278</b>	<b>\$ (22,596)</b>	<b>\$ 205,664</b>	<b>\$ 213,417</b>	<b>\$ 7,753</b>
<b>Budgetary Reserve</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Net Change in Fund Balance</b>	<b>\$ (45,633)</b>	<b>\$ 24,419</b>	<b>\$ (70,052)</b>	<b>\$ 20,836</b>	<b>\$ 26,729</b>	<b>\$ (5,893)</b>

**IECI**  
**Statements of Activities**  
**FY2020 Budget**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
Ordinary Income/Expense				
Income				
5000 · Program Revenues	-	-	-	-
5121 · School District Revenue	-	10,450,000	-	10,450,000
5211 · Harcum College	-	-	25,000	25,000
5212 · Education Plus - Harcum @ OBR	-	-	10,000	10,000
5250 · Harcum Revenue	-	-	-	-
5251 · Cohort Support	-	-	37,000	37,000
5253 · Tuition	-	-	170,000	170,000
5300 · Rental Income	-	-	-	-
5311 · CAP - 1100 E. Erie	1,001,214	-	-	1,001,214
5321 · OBRCHS - Intercompany	183,655	-	-	183,655
5600 · Revenue from Federal Grants	-	-	-	-
5610 · Food Program Revenue (NSLP)	-	100,000	-	100,000
<b>Total 5000 · Program Revenues</b>	<b>1,184,869</b>	<b>10,550,000</b>	<b>242,000</b>	<b>11,976,869</b>
6000 · General Revenues	-	-	-	-
6200 · Student Revenues	-	-	-	-
6203 · School store	-	40,000	-	40,000
6204 · Prom	-	20,000	-	20,000
6205 · Graduation	-	25,000	-	25,000
6300 · Other Revenues	-	-	-	-
6301 · Daycare Fees	-	3,200	-	3,200
6372 · Fairhill Fundraising Revenue	-	1,400	-	1,400
6373 · Simpson Fundraising Revenue	-	1,400	-	1,400
6374 · Elmwood Fundraising Revenue	-	1,400	-	1,400
6371 · Mansion Day Fundraising Revenue	-	1,400	-	1,400
6375 · Mansion Night Fundraising Rev	-	1,400	-	1,400
6399 · Miscellaneous other revenue	-	1,800	-	1,800
<b>Total 6000 · General Revenues</b>	<b>-</b>	<b>97,000</b>	<b>-</b>	<b>97,000</b>
<b>Total Income</b>	<b>1,184,869</b>	<b>10,647,000</b>	<b>242,000</b>	<b>12,073,869</b>
Expense	-	-	-	-
7100 · Salaries	-	-	-	-
7111 · OBR Administration	-	405,499	87,967	493,466
7112 · School Administration	-	1,087,932	-	1,087,932
7120 · Instructional salaries	-	2,920,069	12,000	2,932,069
7150 · Non-instructional staff	-	2,089,040	46,686	2,135,726
<b>Total 7100 · Salaries</b>	<b>-</b>	<b>6,502,540</b>	<b>146,652</b>	<b>6,649,192</b>
7200 · Benefits	-	-	-	-
7211 · Health Insurance	-	857,711	17,897	875,608
7212 · Dental Insurance	-	64,280	1,372	65,651
7213 · Life & Disability Insurance	-	4,760	120	4,880
7220 · Social Security & Medicare	-	497,444	11,219	508,663
7240 · Tuition Reimbursement	-	15,000	-	15,000
7250 · Unemployment Compensation	-	106,200	2,700	108,900
7290 · Retirement Contributions	-	195,076	4,400	199,476
<b>Total 7200 · Benefits</b>	<b>-</b>	<b>1,740,471</b>	<b>37,707</b>	<b>1,778,178</b>

**IECI**  
**Statements of Activities**  
**FY2020 Budget**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
7300 · Professional Fees	-	-	-	-
7312 · School District Service Fees	-	206,750	-	206,750
7329 · Contracted Educational Services	-	25,000	-	25,000
7331 · Accounting	-	42,999	-	42,999
7332 · Auditing	-	20,000	-	20,000
7333 · Legal fees	-	20,000	-	20,000
7334 · Payroll fees	-	20,000	-	20,000
7341 · Website Design	-	2,000	-	2,000
7340 · Technical Support Services - Other	-	90,000	-	90,000
<b>Total 7300 · Professional Fees</b>	-	<b>426,749</b>	-	<b>426,749</b>
7400 · Rent & Occupancy	-	-	-	-
7410 · Cleaning	-	-	-	-
7411 · Trash Removal	-	25,000	-	25,000
7412 · Snow Removal	-	10,000	-	10,000
7410 · Cleaning - Other	-	24,000	-	24,000
7420 · Utilities	-	-	-	-
7422 · Gas & Electric	-	36,000	-	36,000
7423 · Oil	-	6,000	-	6,000
7424 · Water	-	15,000	-	15,000
7430 · Maintenance	-	-	-	-
7431 · Building Supplies	-	40,000	-	40,000
7432 · Repairs & Renovations	-	10,000	-	10,000
7433 · Equipment Repairs	-	1,000	-	1,000
7435 · Heating & Air	-	25,000	-	25,000
7436 · Extermination	-	6,000	-	6,000
7437 · Security	-	1,800	-	1,800
7439 · Licenses & Permits	-	3,000	-	3,000
7440 · Rental Expense	-	-	-	-
7441 · Rent - Fairhill & Simpson	-	183,655	-	183,655
7442 · Rent - Elmwood	-	88,225	-	88,225
7444 · Mansion Rent	-	99,265	-	99,265
7448 · Copier Lease	-	60,000	-	60,000
7490 · Auto	-	-	-	-
7491 · Auto Maintenance	-	1,000	-	1,000
<b>Total 7400 · Rent &amp; Occupancy</b>	-	<b>634,944</b>	-	<b>634,944</b>

**IECI**  
**Statements of Activities**  
**FY2020 Budget**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
7500 · Other Services	-	-	-	-
7522 · Auto Insurance	-	8,500	-	8,500
7523 · Property - Commercial Package	-	18,000	-	18,000
7524 · Student Accident	-	1,176	-	1,176
7525 · Directors & Officers	-	8,000	-	8,000
7527 · General Liability	-	40,000	-	40,000
7528 · Umbrella	-	15,000	-	15,000
7529 · Workers Compensation	-	42,231	-	42,231
7530 · Communications	-	-	-	-
7531 · Internet & Landline	-	32,000	-	32,000
7532 · Cell Phones	-	5,000	2,500	7,500
7539 · Postage & Delivery	-	3,500	500	4,000
7530 · Communications - Other	-	4,500	-	4,500
7540 · Advertising	-	10,000	-	10,000
7550 · Printing & Reproduction	-	30,000	-	30,000
7570 · Food Service	-	-	-	-
7571 · Food Program Supplies	-	5,000	-	5,000
7570 · Food Service - Other	-	150,000	-	150,000
7580 · Travel	-	-	-	-
7581 · Mileage Reimbursement	-	4,000	2,000	6,000
7580 · Travel - Other	-	4,000	-	4,000
<b>Total 7500 · Other Services</b>	-	<b>380,907</b>	<b>5,000</b>	<b>385,907</b>
7600 · Supplies	-	-	-	-
7610 · Instructional Supplies	-	35,000	-	35,000
7611 · Office Supplies	-	35,000	1,000	36,000
7612 · Gifts	-	100	-	100
7614 · Student Uniforms	-	30,000	-	30,000
7615 · School Store Supplies	-	40,000	-	40,000
7617 · Employee Uniforms	-	2,500	-	2,500
7630 · Food	-	16,000	1,000	17,000
7640 · Books & Periodicals	-	80,000	1,500	81,500
7651 · Computers	-	90,000	3,500	93,500
7652 · Technology Software	-	30,000	-	30,000
7654 · Tech Supplies	-	15,000	-	15,000
<b>Total 7600 · Supplies</b>	-	<b>373,600</b>	<b>7,000</b>	<b>380,600</b>
7700 · Property & Equipment	-	-	-	-
7751 · Equipment	-	15,000	-	15,000
7752 · Furniture	-	25,000	-	25,000
<b>Total 7700 · Property &amp; Equipment</b>	-	<b>40,000</b>	-	<b>40,000</b>
7800 · Other Operating Expenses	-	-	-	-
7810 · Dues & Subscriptions	-	2,500	100	2,600
7811 · Bank Service Charges	500	500	-	1,000
7813 · Employment Clearances	-	250	-	250
<b>Total 7800 · Other Operating Expenses</b>	<b>500</b>	<b>3,250</b>	<b>100</b>	<b>3,850</b>

**IECI**  
**Statements of Activities**  
**FY2020 Budget**

	(1) OBR Non-profit	(2) OBR CHS	(3) Harcum Program	TOTAL
7900 · Program Expenses	-	-	-	-
7910 · Student Activities	-	-	-	-
7911 · Prom	-	20,000	-	20,000
7912 · Graduation	-	40,000	-	40,000
7913 · Honors Luncheon	-	1,500	-	1,500
7914 · Holidays	-	5,000	-	5,000
7916 · Student Incentives & Events	-	15,000	15,000	30,000
7917 · Module & School Trips	-	15,000	-	15,000
7918 · Module Supplies	-	8,000	-	8,000
7930 · Instructional Programs	-	-	-	-
7933 · Student Assessment	-	20,000	-	20,000
7950 · Employee Programs	-	-	-	-
7951 · Professional Development	-	-	-	-
7952 · Travel	-	500	-	500
7953 · Hotel	-	4,500	-	4,500
7951 · Professional Development - Other	-	10,000	-	10,000
7954 · Employee Appreciation	-	6,000	-	6,000
7961 · Open House & Parent Conferences	-	1,500	-	1,500
7972 · Fairhill Campus Fundraising	-	1,200	-	1,200
7973 · Simpson Campus Fundraising	-	1,200	-	1,200
7974 · Elmwood Campus Fundraising	-	1,200	-	1,200
7977 · Mansion Night Fundraising	-	1,200	-	1,200
7976 · Mansion Day Fundraising	-	1,200	-	1,200
<b>Total 7900 · Program Expenses</b>	<b>-</b>	<b>153,000</b>	<b>15,000</b>	<b>168,000</b>
<b>Total Expense</b>	<b>500</b>	<b>10,255,461</b>	<b>211,460</b>	<b>10,467,421</b>
<b>Net Ordinary Income</b>	<b>1,184,369</b>	<b>391,539</b>	<b>30,540</b>	<b>1,606,448</b>
Other Income/Expense	-	-	-	-
Other Income	-	-	-	-
9002 · Interest Earned on Debt Holding	60,000	-	-	60,000
<b>Total Other Income</b>	<b>60,000</b>	<b>-</b>	<b>-</b>	<b>60,000</b>
Other Expense	-	-	-	-
9001 · Depreciation	700,000	-	-	700,000
9050 · Amortization	37,143	-	-	37,143
9098 · Interest Related to 2018 Financ	974,869	-	-	974,869
<b>Total Other Expense</b>	<b>1,712,012</b>	<b>-</b>	<b>-</b>	<b>1,712,012</b>
<b>Net Other Income</b>	<b>(1,652,012)</b>	<b>-</b>	<b>-</b>	<b>(1,652,012)</b>
<b>Net Income</b>	<b>(467,643)</b>	<b>391,539</b>	<b>30,540</b>	<b>(45,564)</b>

**Board**  
One Bright Ray, Inc.  
1142 E. Erie Ave.  
Philadelphia, PA 19124

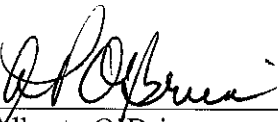


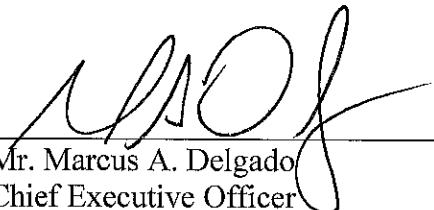
## **LINE OF CREDIT APPROVAL**

### **Lending Bank: PNC**

RESOLVED that members of the Board of School Directors approve the process of moving forward with the application process for a line of credit through PNC in the amount of \$500,000.

RESOLVED FURTHER, that any one of the Authorized Officers of the School be, and each of them hereby is, authorized, empowered and directed to enter into such other agreements, documents and other instruments with respect to any extension or renewal of the Line of Credit, provided, however that, such extension or renewal shall be for a term no greater than 36 months, the maximum principal amount of the Line of Credit shall not exceed \$500,000 and the interest rate on the Line of Credit is no greater than 8% per annum, and, except as described above, on such terms and conditions as may be agreed to by any such Authorized Officer of the School and the Bank, and to take such other actions with respect to the foregoing as may be required by the Bank; and that any one of the Authorized Officers of the School be, and hereby is, authorized, directed and empowered, in the name and on behalf of the School, to execute and deliver such other agreements, documents and other instruments and to perform all other acts as such officers shall approve in connection with any of the above, the execution of such agreements, documents, promissory notes, deeds of trust, mortgages, financing statements and other instruments or the taking of any such actions to be conclusive evidence of such approval.

  
\_\_\_\_\_  
Dr. Alberta O'Brien  
Board Vice President

  
\_\_\_\_\_  
Mr. Marcus A. Delgado  
Chief Executive Officer

**PNC BANK****Commercial Loan Application Disclosure**

This document contains important information about your rights, and disclosures to which you are entitled, pursuant to certain statutory and regulatory requirements. Consent you provide for further consideration of this application is also included. Please read and retain a copy for your records.

**USA Patriot Act / Customer Identification Program:** *Important Information About Procedures for Opening a New Account* To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask you your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying information.

**Notice to Borrower/Appraisal:** You are entitled to receive a copy of each written appraisal and valuation developed in connection with an application for credit to be secured by a first lien on a 1-4 family residential dwelling at least three (3) business days prior to your closing date. We will make every effort to deliver a copy at least three (3) business days prior to your closing date, however, in the unlikely event that we experience a delay in the delivery your closing may be postponed. By providing your e-mail address to PNC, you agree to the electronic delivery of appraisals and valuations. If you prefer copies in written form, contact PNC at: 855-201-1604.

**Important Information about Phone Calls:** By providing telephone number(s) to us, now or at any later time, you authorize PNC and its affiliates and designees to contact you regarding your account(s) with PNC or its affiliates, whether such accounts are your individual accounts or business accounts for which you are a contact, at such numbers using any means, including but not limited to placing calls using an automated dialing system to cell, VoIP or other wireless phone number, or leaving prerecorded messages or sending text messages, even if charges may be incurred for the calls or text messages. You consent that any phone call with us may be monitored or recorded by us. You may tell us at any time that you do not want to be contacted at a wireless number by an automated dialing system.

**Consumer Credit Reports:** You authorize PNC or its designees (and any assignee or potential assignee) to obtain personal credit profiles from one or more national credit bureaus. This authorization extends to obtaining a credit profile(s) in considering this application and subsequently for the purposes of update, renewal, modification or extension of such credit or additional credit and for reviewing or collecting the resulting account.

**Email Communication:** By providing an email address to us you authorize us to communicate via email.

**Business Purpose Affirmation:** You certify that all loan proceeds will be used for business purposes.

**Income:** When applying for credit, you are not required to disclose alimony, child support or other separate maintenance but may provide it as a basis for repaying a loan.

**Notice for Denial:** If you have applied for credit and your request is denied you have the right to a written statement of the specific reasons for denial. To obtain the statement, please write to Business Loan Services, MS: F6-F266-03-B, Attn: Relationship Support Team, 8800 Tinicum Boulevard, Philadelphia, PA 19153-3198, or call 1-877-287-2654, within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for denial within 30 days of receiving your request for the statement.

**ECOA Notice:**

The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is: Bureau of Consumer Financial Protection, 1700 G Street NW, Washington, DC 20006.

**State Disclosures:**

**Notice to Ohio Residents:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that reporting agencies maintain credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

**Notice to New Jersey Residents:** Under New Jersey law we are required to give you the following notification if we make a loan offer to be secured, in whole or in part, by real property located in New Jersey: "The interests of the borrower and lender are or may be different and may conflict, and the lender's attorney represents only the lender and not the borrower. The borrower is, therefore, advised to employ an attorney of the borrower's choice. Licensed to practice law in the State of New Jersey to represent the interests of the borrower."

**Notice to New York Residents:** Upon request you will be informed whether or not a consumer report was requested, and if it was, of the name and address of the consumer reporting agency that furnished the report.

**Notice to Vermont Residents:** You authorize PNC to obtain credit reports about you now and in the future for all legitimate purposes associated with this application or account, including but not limited to evaluating the application and renewing, modifying, reviewing and taking collection on the account.

**Notice to Wisconsin Residents:** No provision of a marital property agreement, a unilateral statement under Wisconsin Statutes s. 766.59 or a court decree under Wisconsin Statutes s. 766.70 adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the creditor is incurred.



Operations Department  
One Bright Ray, Inc.  
1142 East Erie Avenue  
Philadelphia, PA 19124



# RFP - Removal and Replacement of Roof

**Bid/RFP Due Date:**

Friday, May 31, 2019 - 4:00pm

**Bid/RFP Status:**

Accepting bids and proposals

**REQUEST FOR PROPOSALS**

One Bright Ray, Inc, seeks proposals for:

Removal and Replacement of roof at our two locations:

Simpson Campus, 1142 East Erie Avenue, Phila., PA 19124

Fairhill Campus, 2820 N. 4<sup>th</sup> Street, Philadelphia, PA 19133

One Bright Ray, Inc is seeking proposals from qualified contractors to furnish and install a new EPDM roof at our 2 locations: Simpson Campus, 1142 East Erie Avenue, Phila., PA 19124, Fairhill Campus, 2820 N. 4<sup>th</sup> Street, Philadelphia, PA 19133.

**Scope of work:**

Provide all necessary materials, labor and equipment to complete installation of new roof according to the following scope:

- Remove all layers of current roofing membrane down to deck.
- Removal/Disposal of all debris
- Remove existing layers of roof membrane to the wood/ steel decking
- Remove existing coping and provide new blocking
- Mechanically fasten (2) layers of 2-3" insulation
- Install EPDM to factory specifications
- Fabricate and install all new flashing and terminations
- Fabricate and install all new scuppers and downspouts
- Contractor shall keep work area neat at the end of each work day and contained through the duration of the job.

**Submission Information:**

PROPOSERS MUST COMPLY WITH THE FOLLOWING SUBMISSION PROCEDURES:

Two Proposals shall be submitted marked "One Bright Ray – EPDM Roofing Bid" on the outside of the envelope, addressed to:

T: 215.744.6000 | [onebightraycommunity.org](http://onebightraycommunity.org) | F: 215.979.6725

Operations Department  
One Bright Ray, Inc.  
1142 East Erie Avenue  
Philadelphia, PA 19124



Anna Duvivier, COO, 1142 East Erie Avenue, Philadelphia PA, 19124

Proposals will be accepted until 4:00 PM May 31, 2019. Proposals received after this time will be disposed. Faxed, emailed, and hand delivered proposals will be accepted.

**WITHDRAWAL OF PROPOSALS:** A proposer will be permitted to withdraw their proposal unopened after it has been deposited if such request is received in writing prior to the time specified for the opening of the proposals.

**OPTIONAL SITE VISIT:** All prospective bidders may obtain a tour of the property by contacting Gilberto Gonzalez at (215) 744-6000. Prospective bidders shall not enter the site without receiving PRIOR permission.

**RESERVATION OF RIGHTS:** One Bright Ray, Inc. reserves the right to reject any and all proposals, to waive technical, or legal deficiencies, and to accept any proposal that it deems to be in the best interest of the organization.

**WARRANTY:** The contractor shall submit a copy of the manufacturer's warranty indicating duration of said warranty and install the roof according to the manufacturer's instructions.

**SPECIFICATIONS:** The bidder shall furnish information related to the specifications of the products being used.

**COST/SCHEDULE:** The bidder shall furnish a cost proposal and schedule as part of the package. The contractor shall complete the work by June 30, 2019.

**SEPARABILITY:** One Bright Ray, Inc. will accept only full packages for all requested elements. Proposals submitted without all scope of work items included shall be disqualified.

A copy of applicable insurance certificate(s) must accompany bids. Minimum coverage is \$1,000,000 per occurrence, \$2,000,000 aggregate on general liability; Worker's Compensation Coverage in compliance with State Law.

Anna Duvivier  
Operations Department  
One Bright Ray, Inc.  
3133 Ridge Ave.  
Philadelphia, PA 19132



Request for Proposals (RFP) Scoring Sheet (Agency Number \_\_\_\_\_)

Proposal Section	Weight	Evaluation Points*	Max Possible Score	Total Score**
A. Agency Name and Physical Address	N/A	N/A	N/A	N/A
B. Primary Contact Information	N/A	N/A	N/A	N/A
C. Qualifications & Experience	20%		20	
D. Professionalism of Proposal	20%		20	
E. References	10%		10	
F. Cost	50%		50	
G. Conflict/Concerns Up to 10 points deducted				

**TOTAL** \_\_\_\_\_

\*Evaluation Points = 1-100, with 1=lowest 100=highest

\*\*Total Score (weighted value) = Weight multiplied by the Evaluation Points minus Conflict/Concerns deduction

Scored By: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

CEO  
One Bright Ray, Inc.  
1142 E. Erie Ave.  
Philadelphia, PA 19124



**Salary Scale for Professional Educators 2019-2020**  
**Effective September 1, 2019**

***PA Certified Teacher (Regular Education, Special Ed, Certified Counselors)***

Step	Bachelors Degree	Masters Degree	Masters + 30	EDD/PhD	Extra Duty Extra Pay
1	\$43,500	\$44,500	\$46,500	\$1,000	\$1,500
2	\$45,360	\$46,694	\$49,615	\$1,200	
3	\$47,278	\$48,945	\$52,197	\$1,300	
4	\$51,113	\$53,282	\$57,033	\$1,500	
5	\$54,365	\$56,531	\$60,453	\$1,500	
6	\$57,450	\$59,532	\$63,537	\$1,500	
7	\$60,203	\$62,368	\$66,369	\$1,500	
8	\$62,869	\$65,121	\$69,207	\$1,700	
9	\$64,045	\$67,788	\$72,506	\$2,000	
10	\$65,242	\$70,565	\$75,964	\$2,000	
11	\$66,462	\$73,454	\$79,586	\$2,000	
12	\$67,705	\$76,462	\$83,381	\$2,000	

**\*\*Plus \$2,000  
for any teacher  
with math and  
or Science PA  
certification.**

*NOTE: THERE MAY BE CASES WHERE AN INDIVIDUAL TEACHER FALLS OUT OF THIS SCALE.*

Teachers who are certified in another state, and have applied for Pennsylvania Certification, will receive a starting salary of \$ 42,360 as of September 1, 2019.

Teachers who are NOT certified will receive a starting salary of \$40,500 as of September 1, 2019. The salary will be frozen until the teacher becomes PA certificated in the area in which they teach. PA Certification must be attained within 3 year from date of hire.

Prior experience will be awarded to PA Certified teachers with two years or more of approved teaching experience. Prior experience must meet the following provisions:

- All prior teaching experience must be verified before salary credit is given.
- Prior experience requests must be submitted at the time of hiring and will be credited after verification.
- Credit will be awarded only for full school years. Partial years cannot be combined.
- Time as a student teacher, teacher's aide, part-time teacher, substitute or similar positions cannot be awarded.
- Teaching service can be at any level of education, including day care, school age or college-level instruction. In each case, the candidate must have been a full-time teacher.
- Official transcripts for master's degrees, master's plus 30 and doctorate degrees in education must be provided at the time of hiring in order to receive salary credit. If received by September 15<sup>th</sup> adjustments will be added to contracts. If received after September 15<sup>th</sup>, the raise will be added to your contract the following school year.
- Double Summer Session stipend of \$4,500
- Extra Duty Extra Pay includes Senior Seminar and OBR Seminar Course
- Philly Run Program \$800 up to \$1,500 based on the number of students enrolled and complete the program
- The Board of Directors may from time to time offer COLA pay increases or bonuses not reflected in this scale.

Rev. 5/2019 BOARD REVIEW 5/22/19

**CEO**  
One Bright Ray, Inc.  
1142 E. Erie Ave.  
Philadelphia, PA 19124



**Salary Range for OBR Inc. Administrators 2019-2020**

<b>Position</b>	<b>Salary Scale and Range</b>
<b>CEO</b>	Board Approval based on years of experience, credentials and satisfactory performance
<b>CAO</b>	Board Approval based on years of experience, credentials and satisfactory performance
<b>Principal</b>	1 <sup>st</sup> Year Certified: \$90,000 2 <sup>nd</sup> Year Certified: \$93,500 Satisfactory Performance 3 <sup>rd</sup> Year Certified: \$95,000 Satisfactory Performance 4 <sup>th</sup> Year Certified: \$100,000 Satisfactory Performance
<b>Vice Principal</b>	1 <sup>st</sup> Year Certified: \$80,000 2 <sup>nd</sup> Year Certified: \$81,500 Satisfactory Performance 3 <sup>rd</sup> Year Certified: \$85,000 Satisfactory Performance 4 <sup>th</sup> Year Certified: \$90,000 Satisfactory Performance
<b>Dean of Students or Dean of Academics</b>	\$60,000 to \$80,000  Range based on years of experience, credentials, student population size and satisfactory performance
<b>Director Positions</b>	\$60,000 to \$80,000  Range based on years of experience, credentials, student population size and satisfactory performance

- 12-month work-year pay scale (See Employee Manual). Salary set here is for 12-month for all employees;
- The Board of Directors may from time to time offer COLA pay increases or bonuses not reflected in this scale
- Salary Range is determined by size of student population years of experience, credentials, satisfactory performance

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**2017****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

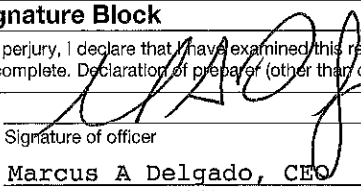
<b>A</b> For the 2017 calendar year, or tax year beginning <u>Jul 1</u> , 2017, and ending <u>Jun 30</u> , 2018	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <u>International Educational and Community Initiatives</u> Doing business as <u>One Bright Ray, Inc.</u> Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>1142 East Erie Avenue</u> City or town, state or province, country, and ZIP or foreign postal code <u>Philadelphia, PA 19124</u> <b>D</b> Employer identification number <u>23-2147087</u> <b>E</b> Telephone number <u>(215) 533-6700</u> <b>G</b> Gross receipts \$ <u>8,240,573.</u> <b>F</b> Name and address of principal officer: <u>Joseph H. Proietta, 1100 East Erie Ave., Philadelphia, PA 19124</u> H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ <b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 <b>J</b> Website: ▶ <u>www.onebrightray.org</u> <b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>L</b> Year of formation: <u>1980</u> <b>M</b> State of legal domicile: <u>PA</u>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>To provide alternative educational services, health care services, mental health services, after-school and summer school programming, post-secondary programing, and facilities to</u>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<u>6</u>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<u>0</u>
	<b>5</b>	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	<b>5</b>	<u>116</u>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<u>1</u>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<u>0.</u>
	<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<u>2,813.</u>
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g)	<u>133,945.</u>	<u>152,752.</u>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>7,344,429.</u>	<u>8,010,822.</u>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>37,219.</u>	<u>58,190.</u>
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>7,515,593.</u>	<u>8,221,764.</u>
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>4,442,760.</u>	<u>5,265,401.</u>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)		
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>0.</u>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u>2,242,117.</u>	<u>2,543,415.</u>
	<b>18</b>	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>6,684,877.</u>	<u>7,808,816.</u>
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<u>830,716.</u>	<u>412,948.</u>
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<u>13,104,930.</u>	<u>12,738,568.</u>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<u>13,435,921.</u>	<u>12,656,611.</u>
			<u>-330,991.</u>	<u>81,957.</u>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer  <u>Marcus A Delgado, CEO</u> Type or print name and title	Date <u>5/9/19</u>
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<b>Paid Preparer Use Only</b>	Print/Type preparer's name <u>Michael A. Whisman, CPA</u>	Preparer's signature <u>Michael A. Whisman, CPA</u>	Date <u>05/07/2019</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P01479091</u>
	Firm's name ▶ <u>CHARTER CHOICE INC</u>			Firm's EIN ▶ <u>27-2599210</u>	
	Firm's address ▶ <u>222 KESWICK AVENUE, Glenside, PA 19038</u>			Phone no. <u>(215) 481-9777</u>	

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

**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

To provide alternative educational services,  
health care services, mental health services, after-school and summer school  
programming, post-secondary programing, and facilities to

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

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

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ 6,521,788. including grants of \$ 0.) (Revenue \$ 6,889,704.)

To provide high-risk and at-risk youth between the ages of 16-21  
with a second chance of obtaining a high school diploma, post-secondary programing  
and provide facilities to a charter school in Philadelphia.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4d** Other program services (Describe in Schedule O.)

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

**4e** Total program service expenses ▶ 6,521,788.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b> X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	<b>2</b>	X
<b>3</b> 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 . . . . .	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>4</b>	X
<b>5</b> 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 . . . . .	<b>5</b>	X
<b>6</b> 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 . . . . .	<b>6</b>	X
<b>7</b> 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 . . . . .	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . . . . .	<b>9</b>	X
<b>10</b> 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 . . . . .	<b>10</b>	X
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	<b>11a</b> X	
<b>b</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 . . . . .	<b>11b</b>	X
<b>c</b> 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 . . . . .	<b>11c</b>	X
<b>d</b> 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 . . . . .	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	<b>11e</b>	X
<b>f</b> 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 . . . . .	<b>11f</b>	X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .	<b>12b</b> X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>13</b> X	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . .	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . . .	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	<b>17</b>	X
<b>18</b> 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 . . . . .	<b>18</b>	X
<b>19</b> 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 . . . . .	<b>19</b>	X



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

	Yes	No
<b>20 a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<b>20b</b>	
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .	<b>21</b>	X
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . .	<b>22</b>	X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J . . . . .	<b>23</b>	X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a . . . . .	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>	X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>	X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>	X
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .	<b>25a</b>	X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II . . . . .	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III . . . . .	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . .	<b>28a</b>	X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . .	<b>28b</b>	X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . . .	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . .	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . .	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . .	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . . . . .	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I . . . . .	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . . . .	<b>34</b>	X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>35a</b>	X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .	<b>35b</b>	X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI . . . . .	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	<b>38</b>	X

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	<b>1a</b> 12	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	<b>1b</b> 0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b> X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 116	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . . .	<b>2b</b> X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>3a</b> X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . . .	<b>3b</b> X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	<b>4a</b>	X
<b>b</b>	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	<b>5b</b>	X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .	<b>5c</b>	
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>	X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>	X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .	<b>8</b>	X
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>	X
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>	X
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? . . . . . <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand . . . . .	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>14b</b>	

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b> 6		
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>b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b> 0		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	<b>2</b>	X	
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . .	<b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		X
<b>6</b> Did the organization have members or stockholders? . . . . .	<b>6</b>		X
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	<b>7a</b>		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	<b>7b</b>		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body? . . . . .	<b>8a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	<b>9</b>		X

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

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

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ►

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records: ►  
 Management, 1142 East Erie Ave., Philadelphia, PA 19124 (215) 744-6000

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Joseph H. Proietta President	8.00	X						0.	172,213.	76,523.
(2) Alberta Proietta O'Brien Executive Vice President	4.00	X						0.	120,221.	56,086.
(3) Anna Duvivier COO	8.00	X						0.	142,364.	67,180.
(4) Marcus Delgado CEO	50.00			X				143,177.	0.	17,798.
(5) Joycet Velasquez CAO	50.00			X				94,167.	0.	16,328.
(6) Cassandra McLaughlin Board member	2.00	X						0.	37,459.	20,688.
(7) Yolanda Negron Board member	2.00	X						0.	44,539.	22,904.
(8) Aykema Mabery-Austin Board member	2.00	X						0.	107,983.	48,975.
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Sub-total</b>								237,344.	624,779.	326,482.
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								237,344.	624,779.	326,482.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

**3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
<b>3</b>		X
<b>4</b>	X	
<b>5</b>		X

**4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

**5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
Lintons Managed Services, 4 Sentry Pkwy W, #100, Blue Bell, PA 19422	Food services	114,772.
Al Horgan Contractor, Inc., 834 Pennsylvania Blvd, Feasterville, PA 19053	Construction	449,019.
Dell Marketing LP, One Dell Way, RR8, Round Rock, TX 78682	Technology	126,744.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>				
	<b>b</b>	Membership dues . . . . .	<b>1b</b>				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>				
	<b>d</b>	Related organizations . . . . .	<b>1d</b>				
	<b>e</b>	Government grants (contributions)	<b>1e</b>	116,813.			
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	35,939.			
	<b>g</b>	Noncash contributions included in lines 1a-1f: \$					
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		152,752.			
<b>Program Service Revenue</b>				<b>Business Code</b>			
	<b>2a</b>	Program fees	611110	6,964,189.	6,964,189.	0.	0.
	<b>b</b>	Rental income	531120	1,046,253.	1,046,253.	0.	0.
	<b>c</b>	Daycare fees	611110	380.	380.	0.	0.
	<b>d</b>						
	<b>e</b>						
	<b>f</b>	All other program service revenue .					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . .		8,010,822.			
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .					
	<b>4</b>	Income from investment of tax-exempt bond proceeds					
	<b>5</b>	Royalties . . . . .					
			(i) Real	(ii) Personal			
	<b>6a</b>	Gross rents . . . . .					
	<b>b</b>	Less: rental expenses					
	<b>c</b>	Rental income or (loss)					
	<b>d</b>	Net rental income or (loss) . . . . .					
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .					
	<b>c</b>	Gain or (loss) . . . . .					
	<b>d</b>	Net gain or (loss) . . . . .					
	<b>8a</b>	Gross income from fundraising events (not including \$ 0. of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b>	9,355.			
	<b>b</b>	Less: direct expenses . . . . .	<b>b</b>	1,037.			
	<b>c</b>	Net income or (loss) from fundraising events . . . . .		8,318.		0.	8,318.
	<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b>				
	<b>b</b>	Less: direct expenses . . . . .	<b>b</b>				
	<b>c</b>	Net income or (loss) from gaming activities . . . . .					
	<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	30,520.			
	<b>b</b>	Less: cost of goods sold . . . . .	<b>b</b>	17,772.			
<b>c</b>	Net income or (loss) from sales of inventory . . . . .		12,748.	12,748.	0.	0.	
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
<b>11a</b>	Miscellaneous	900099	25,124.	25,124.	0.	0.	
<b>b</b>	Intercompany fees	900099	12,000.	12,000.	0.	0.	
<b>c</b>							
<b>d</b>	All other revenue . . . . .						
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		37,124.				
<b>12</b>	<b>Total revenue.</b> See instructions. . . . .		8,221,764.	8,060,694.	0.	8,318.	

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .				
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	245,561.	0.	245,561.	0.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b> Other salaries and wages . . . . .	3,866,382.	3,416,717.	449,665.	0.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	101,841.	84,622.	17,219.	0.
<b>9</b> Other employee benefits . . . . .	676,313.	561,965.	114,348.	0.
<b>10</b> Payroll taxes . . . . .	375,304.	311,850.	63,454.	0.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management . . . . .				
<b>b</b> Legal . . . . .	79,977.	0.	79,977.	0.
<b>c</b> Accounting . . . . .	74,218.	0.	74,218.	0.
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17 . . . . .				
<b>f</b> Investment management fees . . . . .				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	273,795.	273,795.	0.	0.
<b>12</b> Advertising and promotion . . . . .	3,123.	0.	3,123.	0.
<b>13</b> Office expenses . . . . .	34,293.	5,344.	28,949.	0.
<b>14</b> Information technology . . . . .	126,467.	126,467.	0.	0.
<b>15</b> Royalties . . . . .				
<b>16</b> Occupancy . . . . .	316,055.	262,618.	53,437.	0.
<b>17</b> Travel . . . . .	43,778.	43,778.	0.	0.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b> Conferences, conventions, and meetings . . . . .				
<b>20</b> Interest . . . . .	511,564.	511,564.	0.	0.
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	686,225.	570,201.	116,024.	0.
<b>23</b> Insurance . . . . .	116,799.	89,083.	27,716.	0.
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> Books & program supplies . . . . .	68,012.	68,012.	0.	0.
<b>b</b> Equipment . . . . .	17,236.	17,236.	0.	0.
<b>c</b> Dues . . . . .	7,268.	0.	7,268.	0.
<b>d</b> Food . . . . .	19,030.	19,030.	0.	0.
<b>e</b> All other expenses . . . . .	165,575.	159,506.	6,069.	0.
<b>25</b> Total functional expenses. Add lines 1 through 24e . . . . .	7,808,816.	6,521,788.	1,287,028.	0.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	436,108.	<b>1</b>	692,716.
	<b>2</b> Savings and temporary cash investments . . . . .	449,006.	<b>2</b>	472,286.
	<b>3</b> Pledges and grants receivable, net . . . . .	103,705.	<b>3</b>	118,849.
	<b>4</b> Accounts receivable, net . . . . .	1,054,404.	<b>4</b>	1,102,780.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	15,034.	<b>9</b>	43,494.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 18,574,570.		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 8,659,140.	<b>10c</b>	9,915,430.
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	584,377.	<b>15</b>	393,013.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	13,104,930.	<b>16</b>	12,738,568.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	162,310.	<b>17</b>	244,919.
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities . . . . .	13,273,611.	<b>20</b>	12,411,692.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	13,435,921.	<b>26</b>	12,656,611.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	-330,991.	<b>27</b>	81,957.
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
	<b>33</b> <b>Total net assets or fund balances.</b> . . . . .	-330,991.	<b>33</b>	81,957.
<b>34</b> <b>Total liabilities and net assets/fund balances.</b> . . . . .	13,104,930.	<b>34</b>	12,738,568.	



**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	8,221,764.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	7,808,816.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1 . . . . .	<b>3</b>	412,948.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	-330,991.
<b>5</b>	Net unrealized gains (losses) on investments . . . . .	<b>5</b>	
<b>6</b>	Donated services and use of facilities . . . . .	<b>6</b>	
<b>7</b>	Investment expenses . . . . .	<b>7</b>	
<b>8</b>	Prior period adjustments . . . . .	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) . . . . .	<b>10</b>	81,957.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

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

Form **990** (2017)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Name of the organization

International Educational and Community Initiatives

Employer identification number

23-2147087

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☒ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10 ☐ An organization that normally receives: (1) more than 33 $\frac{1}{3}$ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 $\frac{1}{3}$ % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations . . . . .
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2016 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 33 1/3% support test—2016.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2017.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2016.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.  
If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . .						
<b>c</b> Add lines 7a and 7b . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6 . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .						
<b>c</b> Add lines 10a and 10b . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15 . . . .	<b>16</b>	%

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

<b>17</b> Investment income percentage for <b>2017</b> (line 10c, column (f) divided by line 13, column (f)) . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2016</b> Schedule A, Part III, line 17 . . . .	<b>18</b>	%
<b>19a 33 1/3% support tests—2017.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . <input type="checkbox"/>		
<b>b 33 1/3% support tests—2016.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . <input type="checkbox"/>		

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

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

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

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.	Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4).	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d <b>Total</b> (add lines 1a, 1b, and 1c)	1d		
e <b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 <b>Minimum Asset Amount</b> (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

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

Section D - Distributions		Current Year
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b>	Amounts paid to acquire exempt-use assets	
<b>5</b>	Qualified set-aside amounts (prior IRS approval required)	
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b>	Distributable amount for 2017 from Section C, line 6	
<b>10</b>	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
<b>1</b>	Distributable amount for 2017 from Section C, line 6			
<b>2</b>	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
<b>3</b>	Excess distributions carryover, if any, to 2017			
<b>a</b>				
<b>b</b>	From 2013 . . . . .			
<b>c</b>	From 2014 . . . . .			
<b>d</b>	From 2015 . . . . .			
<b>e</b>	From 2016 . . . . .			
<b>f</b>	<b>Total</b> of lines 3a through e			
<b>g</b>	Applied to underdistributions of prior years			
<b>h</b>	Applied to 2017 distributable amount			
<b>i</b>	Carryover from 2012 not applied (see instructions)			
<b>j</b>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b>	Distributions for 2017 from Section D, line 7: \$			
<b>a</b>	Applied to underdistributions of prior years			
<b>b</b>	Applied to 2017 distributable amount			
<b>c</b>	Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b>	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b>	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b>	<b>Excess distributions carryover to 2018.</b> Add lines 3j and 4c.			
<b>8</b>	Breakdown of line 7:			
<b>a</b>	Excess from 2013 . . . .			
<b>b</b>	Excess from 2014 . . . .			
<b>c</b>	Excess from 2015 . . . .			
<b>d</b>	Excess from 2016 . . . .			
<b>e</b>	Excess from 2017 . . . .			



## Part VI

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

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

International Educational and Community Initiatives

Employer identification number

23-2147087

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

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

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

**Part II Conservation Easements.**

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	<b>Held at the End of the Tax Year</b>
a Total number of conservation easements . . . . .	<b>2a</b>
b Total acreage restricted by conservation easements . . . . .	<b>2b</b>
c Number of conservation easements on a certified historic structure included in (a) . . . . .	<b>2c</b>
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . .	<b>2d</b>
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶	
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? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ (ii) Assets included in Form 990, Part X . . . . . ▶ \$	
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ b Assets included in Form 990, Part X . . . . . ▶ \$	

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** ☐ Public exhibition **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 XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.**

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance . . . . .             | <b>1c</b> |
| <b>d</b> Additions during the year . . . . .     | <b>1d</b> |
| <b>e</b> Distributions during the year . . . . . | <b>1e</b> |
| <b>f</b> Ending balance . . . . .                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

**Part V Endowment Funds.**

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

- |   | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| <b>1a</b> Beginning of year balance . . . . .                     |                  |                |                    |                      |                     |
| <b>b</b> Contributions . . . . .                                  |                  |                |                    |                      |                     |
| <b>c</b> Net investment earnings, gains, and losses . . . . .     |                  |                |                    |                      |                     |
| <b>d</b> Grants or scholarships . . . . .                         |                  |                |                    |                      |                     |
| <b>e</b> Other expenditures for facilities and programs . . . . . |                  |                |                    |                      |                     |
| <b>f</b> Administrative expenses . . . . .                        |                  |                |                    |                      |                     |
| <b>g</b> End of year balance . . . . .                            |                  |                |                    |                      |                     |
- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ► \_\_\_\_\_ %
- b** Permanent endowment ► \_\_\_\_\_ %
- c** Temporarily restricted endowment ► \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes           | No |
|---|---------------|----|
| <b>(i)</b> unrelated organizations . . . . .  | <b>3a(i)</b>  |    |
| <b>(ii)</b> related organizations . . . . .   | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | <b>3b</b>     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .	650,000.	0.		650,000.
<b>b</b> Buildings . . . . .	15,551,439.	0.	7,436,511.	8,114,928.
<b>c</b> Leasehold improvements . . . . .	995,926.	0.	349,384.	646,542.
<b>d</b> Equipment . . . . .	938,928.	0.	662,420.	276,508.
<b>e</b> Other . . . . .	438,277.	0.	210,825.	227,452.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) . . . . .				9,915,430.

**Part VII Investments—Other Securities.**

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

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

**Part VIII Investments—Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

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

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	8,217,520.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	18,808.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	18,808.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	8,198,712.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	23,052.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	23,052.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .	<b>5</b>	8,221,764.

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	7,804,099.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	18,808.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	18,808.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	7,785,291.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	23,525.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	23,525.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .	<b>5</b>	7,808,816.

**Part XIII Supplemental Information.**

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

Pt XI, Line 2d: Certain expenses were netted against revenues in the 990.

Pt XII, Line 2d: Certain expenses were netted against revenues in the 990.

Pt XI, Line 4b: Certain expenses were netted against revenues in the 990.

Pt XII, Line 4b: Certain expenses were netted against revenues in the 990.

**Part XIII**   **Supplemental Information** *(continued)*[illegible]

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

Department of the Treasury  
Internal Revenue Service

**Schools**

- Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.  
► Attach to Form 990 or Form 990-EZ.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

International Educational and Community Initiatives

Employer identification number

23-2147087

**Part I**

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

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

Line 6b: As a school providing services to public school district students,  
the organization occasionally qualifies for aid from a government agency. The  
school receives federal school lunch subsidies from the PA Department of Education.

Line 3: Through newspapers and brochures



**SCHEDULE J**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

International Educational and Community Initiatives

Employer identification number

23-2147087

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (such as, maid, chauffeur, chef)

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

☐ Compensation committee

☐ Independent compensation consultant

☐ Form 990 of other organizations

☐ Written employment contract

☐ Compensation survey or study

☐ Approval by the board or compensation committee

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

**a** Receive a severance payment or change-of-control payment?

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

**a** The organization?

**b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

**a** The organization?

**b** Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2	X	
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation				(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(iv) Other reportable compensation				
1 Joseph H. Proietta President	(i) 0. (ii) 172,213. (iii) 0.	0.	0.	0.	0.	0.	0.	0.
2 Alberta Proietta O'Brien Executive Vice President	(i) 0. (ii) 120,221. (iii) 0.	0.	0.	0.	53,903.	22,620.	248,736.	0.
3 Anna Duvivier COO	(i) 0. (ii) 142,364. (iii) 143,177.	0.	0.	0.	37,629.	18,457.	176,307.	0.
4 Marcus Delgado CEO	(i) 0. (ii) 0. (iii) 107,983.	0.	0.	0.	44,560.	22,620.	209,544.	0.
5 Aykema Mabery-Austin Board member	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.	4,295.	13,503.	160,975.	0.
6	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.	0.	0.	0.	0.
7	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.	33,799.	15,176.	156,958.	0.
8	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
9	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
10	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
11	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
12	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
13	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
14	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
15	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				
16	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.				

REV 03/08/19 PRO

Schedule J (Form 990) 2017

## Part III

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

[illegible]

**SCHEDULE K**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

International Educational and Community Initiatives

Employer identification number  
23-2147087

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> Philadelphia Authority For Industrial Development	23-2237287	7178182X5	11/05/2009	14,675,000.	Refinance Series of 2008 Bond			X	X		X
<b>B</b>											
<b>C</b>											
<b>D</b>											

**Part II Proceeds**

	A		B		C		D	
<b>1</b> Amount of bonds retired . . . . .								
<b>2</b> Amount of bonds legally defeased . . . . .								
<b>3</b> Total proceeds of issue . . . . .		14,675,000.						
<b>4</b> Gross proceeds in reserve funds . . . . .		0.						
<b>5</b> Capitalized interest from proceeds . . . . .								
<b>6</b> Proceeds in refunding escrows . . . . .		0.						
<b>7</b> Issuance costs from proceeds . . . . .		99,379.						
<b>8</b> Credit enhancement from proceeds . . . . .								
<b>9</b> Working capital expenditures from proceeds . . . . .		0.						
<b>10</b> Capital expenditures from proceeds . . . . .		0.						
<b>11</b> Other spent proceeds . . . . .								
<b>12</b> Other unspent proceeds . . . . .		0.						
<b>13</b> Year of substantial completion . . . . .		2000						
<b>14</b> Were the bonds issued as part of a current refunding issue? . . . . .	Yes	No	Yes	No	Yes	No	Yes	No
<b>15</b> Were the bonds issued as part of an advance refunding issue? . . . . .	X							
<b>16</b> Has the final allocation of proceeds been made? . . . . .	X							
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds? . . . . .	X							

**Part III Private Business Use**

	A		B		C		D	
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? . . . . .	Yes	No	Yes	No	Yes	No	Yes	No
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? . . . . .		X						

**Part III Private Business Use (Continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? . . . . .		X						
<b>b</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? . . . . .								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? . . . . .		X						
<b>d</b> 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? . . . . .								
<b>4</b> 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 . . . . .		0.0000 %		%		%		%
<b>5</b> 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 . . . . .		0.0000 %		%		%		%
<b>6</b> Total of lines 4 and 5 . . . . .		0.0000 %		%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? . . . . .								
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? . . . . .								
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . . .		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? . . . . .								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? . . . . .	X							

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? . . . . .		X						
<b>2</b> If "No" to line 1, did the following apply?								
<b>a</b> Rebate not due yet? . . . . .								
<b>b</b> Exception to rebate? . . . . .								
<b>c</b> No rebate due? . . . . .								
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed . . . . .								
<b>3</b> Is the bond issue a variable rate issue? . . . . .		X						
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? . . . . .		X						
<b>b</b> Name of provider . . . . .								
<b>c</b> Term of hedge . . . . .								
<b>d</b> Was the hedge superintegrated? . . . . .								
<b>e</b> Was the hedge terminated? . . . . .								

BAA

REV 03/09/19 PRO

Schedule K (Form 990) 2017



**Part VI**   **Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions (Continued)

[illegible]

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

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2017**

**Open To Public Inspection**

Name of the organization

International Educational and Community Initiatives

Employer identification number

23-2147087

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total . . . . . ▶						\$						

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2017



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?	
				Yes	No
(1) Community Academy of Phila. Charter School	Board - Officers	177,363.	Rent net of reimbursed costs		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Provide additional information for responses to questions on Schedule L (see instructions).

1: Certain officers of the related organization are board members of the filer.

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

Department of the Treasury  
Internal Revenue Service

**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.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Name of the organization

International Educational and Community Initiatives

Employer identification number

23-2147087

Pt VI, Line 11b: Form 990 is sent to the Board for review.

Pt VI, Line 15a: Board approves all compensation.

Pt VI, Line 19: Form 990 is available on [guidestar.com](http://guidestar.com) and upon request of the  
school.

Pt VI, Line 2: Joseph Proietta, President, is related to Alberta O'Brien, Vice  
President.

Pt VI, Line 12c: Annual conflict of interest forms are completed.

Pt VI, Line 15b: Board approves all compensation.

Pt IX, Line 24e:

Description: Communications

Total: \$17,965

Program services: \$17,965

Management and general: \$0

Fundraising: \$0

Description: Activities

Total: \$95,117

Program services: \$95,117

Management and general: \$0

Fundraising: \$0

Description: Printing

Total: \$19,363

Program services: \$19,363

Management and general: \$0

Fundraising: \$0

Description: Uniforms

Name of the organization

International Educational and Community Initiatives

Employer identification number

23-2147087

Total: \$27,061

Program services: \$27,061

Management and general: \$0

Fundraising: \$0

Description: Bank fees

Total: \$5,594

Program services: \$0

Management and general: \$5,594

Fundraising: \$0

Description: Miscellaneous

Total: \$475

Program services: \$0

Management and general: \$475

Fundraising: \$0

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

**Related Organizations and Unrelated Partnerships**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

International Educational and Community Initiatives

Employer identification number

23-2147087

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

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on 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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	Community Academy of Philadelphia Charter School 23-2920514 1100 East Erie Ave. Philadelphia PA 19124-5424	Charter School	PA	501(c)3	School	No	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

(1) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) _____												
(2) _____												
(3) _____												
(4) _____												
(5) _____												
(6) _____												
(7) _____												

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

(1) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) _____									
(2) _____									
(3) _____									
(4) _____									
(5) _____									
(6) _____									
(7) _____									

**Part V** Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		<b>1a</b>
<b>b</b> Gift, grant, or capital contribution to related organization(s)		<b>1b</b>
<b>c</b> Gift, grant, or capital contribution from related organization(s)		<b>1c</b>
<b>d</b> Loans or loan guarantees to or for related organization(s)		<b>1d</b>
<b>e</b> Loans or loan guarantees by related organization(s)	<b>X</b>	<b>1e</b>
<b>f</b> Dividends from related organization(s)		<b>1f</b>
<b>g</b> Sale of assets to related organization(s)		<b>1g</b>
<b>h</b> Purchase of assets from related organization(s)		<b>1h</b>
<b>i</b> Exchange of assets with related organization(s)		<b>1i</b>
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s)		<b>1j</b>
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)	<b>X</b>	<b>1k</b>
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s)		<b>1l</b>
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)		<b>1m</b>
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		<b>1n</b>
<b>o</b> Sharing of paid employees with related organization(s)		<b>1o</b>
<b>p</b> Reimbursement paid to related organization(s) for expenses	<b>X</b>	<b>1p</b>
<b>q</b> Reimbursement paid by related organization(s) for expenses	<b>X</b>	<b>1q</b>
<b>r</b> Other transfer of cash or property to related organization(s)		<b>1r</b>
<b>s</b> Other transfer of cash or property from related organization(s)		<b>1s</b>

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1) Community Academy of Philadelphia Charter School	<b>e</b>	12,680,000.	lease agreements
(2) Community Academy of Philadelphia Charter School	<b>k,p,q</b>	966,912.	lease agreements
(3)			
(4)			
(5)			
(6)			

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

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

(1) Name, address, and EIN of entity	(2) Primary activity	(3) Legal domicile (state or foreign country)	(4) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(5) Are all partners section 501(c)(3) organizations?		(6) Share of total income	(7) Share of end-of-year assets	(8) Disproportionate allocations?		(9) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(10) General or managing partner?		(11) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

**Part VII****Supplemental Information.**

Provide additional information for responses to questions on Schedule R. See instructions.



Form **990-T****Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No. 1545-0687

**2017**Department of the Treasury  
Internal Revenue Service

For calendar year 2017 or other tax year beginning Jul 1, 2017, and ending Jun 30, 2018.

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for  
501(c)(3) Organizations OnlyA ☐ Check box if  
address changed

B Exempt under section

☒ 501(c)(3)☐ 408(e) ☐ 220(e)☐ 408A ☐ 530(a)☐ 529(a)C Book value of all assets  
at end of year

12,738,568.

Print  
or  
TypeName of organization ( ☐ Check box if name changed and see instructions.)

International Educational and Community Initiatives

Number, street, and room or suite no. If a P.O. box, see instructions.

1142 East Erie Avenue

City or town, state or province, country, and ZIP or foreign postal code

Philadelphia, PA 19124

D Employer identification number  
(Employees' trust, see instructions.)

23-2147087

E Unrelated business activity codes  
(See instructions.)

812930

F Group exemption number (See instructions.) ▶

G Check organization type ▶ ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

H Describe the organization's primary unrelated business activity. ▶ Nonprofit employee parking costs

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No  
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ Filer

Telephone number ▶ (215) 744-6000

**Part I Unrelated Trade or Business Income**

	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances			
c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnerships and S corporations (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule) See 0th Inc Stmt	12	2,813	2,813
13 Total. Combine lines 3 through 12	13	2,813	2,813

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14		
15 Salaries and wages	15		
16 Repairs and maintenance	16		
17 Bad debts	17		
18 Interest (attach schedule)	18		
19 Taxes and licenses	19		
20 Charitable contributions (See instructions for limitation rules)	20		
21 Depreciation (attach Form 4562)	21		
22 Less depreciation claimed on Schedule A and elsewhere on return	22a		22b
23 Depletion	23		
24 Contributions to deferred compensation plans	24		
25 Employee benefit programs	25		
26 Excess exempt expenses (Schedule I)	26		
27 Excess readership costs (Schedule J)	27		
28 Other deductions (attach schedule)	28		
29 Total deductions. Add lines 14 through 28	29		
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	2,813	
31 Net operating loss deduction (limited to the amount on line 30)	31		
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	2,813	
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33		
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	2,813	

For Paperwork Reduction Act Notice, see instructions. BAA

REV 03/08/19 PRO Form 990-T (2017)

**Part III Tax Computation**

<b>35 Organizations Taxable as Corporations.</b> See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> <b>See instructions</b> and:		
<b>a</b> Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ (2) \$ (3) \$		
<b>b</b> Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ (2) Additional 3% tax (not more than \$100,000) \$		
<b>c</b> Income tax on the amount on line 34	<b>35c</b>	506
<b>36 Trusts Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	<b>36</b>	
<b>37 Proxy tax.</b> See instructions	<b>37</b>	
<b>38 Alternative minimum tax</b>	<b>38</b>	
<b>39 Tax on Non-Compliant Facility Income.</b> See instructions	<b>39</b>	
<b>40 Total.</b> Add lines 37, 38 and 39 to line 35c or 36, whichever applies	<b>40</b>	506

**Part IV Tax and Payments**

<b>41a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	<b>41a</b>	
<b>b</b> Other credits (see instructions)	<b>41b</b>	
<b>c</b> General business credit. Attach Form 3800 (see instructions)	<b>41c</b>	
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827)	<b>41d</b>	
<b>e Total credits.</b> Add lines 41a through 41d	<b>41e</b>	
<b>42</b> Subtract line 41e from line 40	<b>42</b>	506
<b>43</b> Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	<b>43</b>	
<b>44 Total tax.</b> Add lines 42 and 43	<b>44</b>	506
<b>45a</b> Payments: A 2016 overpayment credited to 2017	<b>45a</b>	
<b>b</b> 2017 estimated tax payments	<b>45b</b>	
<b>c</b> Tax deposited with Form 8868	<b>45c</b>	
<b>d</b> Foreign organizations: Tax paid or withheld at source (see instructions)	<b>45d</b>	
<b>e</b> Backup withholding (see instructions)	<b>45e</b>	
<b>f</b> Credit for small employer health insurance premiums (Attach Form 8941)	<b>45f</b>	
<b>g</b> Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	<b>45g</b>	
<b>46 Total payments.</b> Add lines 45a through 45g	<b>46</b>	
<b>47</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	<b>47</b>	
<b>48 Tax due.</b> If line 46 is less than the total of lines 44 and 47, enter amount owed	<b>48</b>	506
<b>49 Overpayment.</b> If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	<b>49</b>	
<b>50</b> Enter the amount of line 49 you want: <b>Credited to 2018 estimated tax</b> <b>Refunded</b>	<b>50</b>	

**Part V Statements Regarding Certain Activities and Other Information** (see instructions)

	Yes	No
<b>51</b> At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here		X
<b>52</b> During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
<b>53</b> Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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

Signature of officer: *[Signature]* Date: *5/9/19* Title: *CEO*

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

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Michael A. Whisman, CPA	Michael A. Whisman, CPA	05/07/2019		P01479091
	Firm's name	Firm's EIN			
	CHARTER CHOICE INC	27-2599210			
	Firm's address			Phone no.	
	222 KESWICK AVENUE, Glenside, PA 19038			(215) 481-9777	

Form **990-T** (2017)

**Schedule A—Cost of Goods Sold.** Enter method of inventory valuation ►

<b>1</b>	Inventory at beginning of year	<b>1</b>		<b>6</b>	Inventory at end of year . . . . .	<b>6</b>		
<b>2</b>	Purchases . . . . .	<b>2</b>		<b>7</b>	<b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2 . . . . .	<b>7</b>		
<b>3</b>	Cost of labor . . . . .	<b>3</b>						
<b>4a</b>	Additional section 263A costs (attach schedule) . . . . .	<b>4a</b>		<b>8</b>	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? . . . . .		<b>Yes</b>	<b>No</b>
<b>b</b>	Other costs (attach schedule)	<b>4b</b>						
<b>5</b>	<b>Total.</b> Add lines 1 through 4b	<b>5</b>						

**Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

**1.** Description of property

(1)
(2)
(3)
(4)

**2.** Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	<b>3(a)</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
<b>Total</b>	<b>Total</b>	

**(c) Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) . . . . . ►**(b) Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ►**Schedule E—Unrelated Debt-Financed Income** (see instructions)

<b>1.</b> Description of debt-financed property		<b>2.</b> Gross income from or allocable to debt-financed property	<b>3.</b> Deductions directly connected with or allocable to debt-financed property	
			<b>(a)</b> Straight line depreciation (attach schedule)	<b>(b)</b> Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
<b>4.</b> Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	<b>5.</b> Average adjusted basis of or allocable to debt-financed property (attach schedule)	<b>6.</b> Column 4 divided by column 5	<b>7.</b> Gross income reportable (column 2 × column 6)	<b>8.</b> Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
<b>Totals</b> . . . . . ►				
<b>Total dividends-received deductions</b> included in column 8 . . . . . ►				

**Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization		2. Employer identification number		Exempt Controlled Organizations		
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5	
(1)						
(2)						
(3)						
(4)						
<b>Nonexempt Controlled Organizations</b>						
7. Taxable income		8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)						
(2)						
(3)						
(4)						
				Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	
<b>Totals</b> . . . . . ▶						

**Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
<b>Totals</b> . . . . . ▶				

**Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.
<b>Totals</b> . . . . . ▶						

**Schedule J—Advertising Income** (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5)) . . . ▶						

**Part II** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b> . . . . . ▶						
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
<b>Totals, Part II (lines 1–5)</b> . . . . . ▶						

**Schedule K—Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 . . . . . ▶			

Additional information from your Form 990-T: Exempt Organization Business Income Tax Return

Form 990-T: Exempt Organization Business Income Tax Return

Other Income

Continuation Statement

Description	All Income	Net
Nonprofit employee parking costs	2,813.	2,813.
Total	2,813.	2,813.

181 Instructional Days / 229 Teacher Days

AUGUST 2019						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

SEPTEMBER 2019						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

OCTOBER 2019						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

NOVEMBER 2019						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

DECEMBER 2019						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

JANUARY 2020						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

FEBRUARY 2020						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

MARCH 2020						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

APRIL 2020						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

MAY 2020						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

JUNE 2020						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

JULY 2020						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Schools and Offices Closed

School Closed and Offices Open

PTO Black-Out

Professional Development

Instructional Days Per Module		Instructional Days Per Month			
Module 1: 38	Module 4: 36	September: 19	December: 14	March: 17	June: 18
Module 2: 38	Module 5: 32	October: 19	January: 16	April: 18	July: 14
Module 3: 37		November: 17	February: 17	May: 11	

**Board**  
One Bright Ray, Inc.  
1142 E. Erie Ave.  
Philadelphia, PA 19124



## **2019-2020 BOARD MEETING TENTATIVE SCHEDULE**

<b>DATE</b>	<b>TIME</b>	<b>LOCATION</b>
Wednesday, October 23, 2019	4:00 p.m.	Community Academy of Philadelphia CS (Board Room)
Wednesday, November 20, 2019	4:00 p.m..	Community Academy of Philadelphia CS (Board Room)
Wednesday, December 11, 2019	4:00 p.m.	Community Academy of Philadelphia CS (Board Room)
Wednesday, February 19, 2020	4:00 p.m.	Community Academy of Philadelphia CS (Board Room)
Wednesday, April 22, 2020	4:00 p.m.	Community Academy of Philadelphia CS (Board Room)
Wednesday, May 20, 2020	4:00 p.m.	Community Academy of Philadelphia CS (Board Room)



# Lauren E. Nelson

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539 Watkins Street, Philadelphia, PA 19148 · 607.227.5239 · lauren.nelson06@gmail.com

## PROFESSIONAL EXPERIENCE

### **The Wharton School, The University of Pennsylvania**

Philadelphia, PA

*Director of Operations, Wharton Customer Analytics Initiative*

7/2018-present

- Oversee the strategic vision, daily operations and implementation of all programs and events in analytics by engaging with students, alumni, donors, corporate partners, Wharton departments, and senior leadership
- Supervise three full-time staff members including: Associate Director of Corporate Relations & Events, Associate Director of Administration, and Associate Director of Marketing
- Oversee \$1.2 million budget and all financial processes including income to disbursements, budgets to closing, and grants, gifts, and endowments
- Responsible for all payroll and HR related processes including staff hiring, onboarding, training, and evaluation

### **Harcum College @ One Bright Ray**

Philadelphia, PA

*Director*

6/2013-6/2018

- Managed the operations of the Harcum College @ One Bright Ray associate degree program including recruitment, retention, and academic services for 105 low-income, first generation college students
- Supervised, trained, and evaluated three staff members and three student workers
- Maintained electronic student records and all program data and benchmarks
- Served as the spokesperson of the program at senior leadership discussions and monthly board meetings, presented performance data and advocated for financial investments to expand programming and services
- Developed and managed an operating budget of \$220,000

### **Philadelphia Futures, Sponsor-A-Scholar Program**

Philadelphia, PA

*Coordinator*

8/2010-6/2013

- Provided academic, college guidance, and personal support to caseload of 45 low-income high school students
- Supported fundraising and stewardship efforts by presenting program data to key stakeholders
- Maintained data for grant reporting, assessment of student progress, and evaluation of learning outcomes
- Developed relationships with contacts at partner institutions to leverage opportunities for SAS students
- Implemented a partnership with Northeast High School to deliver college guidance services for 35 seniors

### **New York University, Gallatin School of Individualized Study**

New York, NY

*Graduate Assistant for Student Life*

8/2008-5/2010

- Assisted in the planning and execution of all Student Life events and advised student clubs
- Oversaw administrative duties of a student honors group and planned international academic trips with faculty
- Developed a three day Orientation for 200 first year students in partnership with NYU departments

### **Cornell University, Residential Programs**

Ithaca, NY

*Residence Hall Director*

9/2006-6/2008

- Oversaw programming and operations of 5-building residential complex to meet the needs of 300 students
- Adjudicated student violations of the University Code through educational conferences and sanctioning

## EDUCATION

### **New York University, Steinhardt School of Culture, Education, and Human Development**

New York, NY

Master of Arts in Higher Education/Student Personnel Administration

5/2010

### **Cornell University, College of Agriculture and Life Science**

Ithaca, NY

Bachelor of Science in Plant Science

5/2006

## PROFESSIONAL DEVELOPMENT

Grant Writing for Profit & Non Profit Entities, Community College of Philadelphia

2/2018 – 5/2018

PA Education Policy Fellowship Program, The Education Policy & Leadership Center

9/2017 – 5/2018

Non-Profit Board Prep Program, Young Involved Philadelphia

9/2015 – 11/2015