Beth Lehman

From: Lili Zhang

Sent: Friday, May 13, 2016 5:09 PM

To: Audit Facilitation

Subject: FW: 2014 Electronic Return Accepted by the IRS



Lili Zhang

SB & Company, LLC
200 International Circle, Suite 5500
Hunt Valley, Maryland 21030
410.584.9305 Direct
443.254.2622 Mobile
410.584.0061 Fax
Izhang@sbandcompany.com
www.sbandcompany.com

Knowledge • Quality • Client Service

From: CCH-ReturnNotification@wolterskluwer.com [mailto:CCH-ReturnNotification@wolterskluwer.com]

Sent: Friday, May 13, 2016 5:08 PM

To: Lili Zhang < Izhang@sbandcompany.com>

Subject: 2014 Electronic Return Accepted by the IRS

Elsie Whitlow Stokes Community Freedom Public Charter School,

You are receiving this e-mail on behalf of SB & Company LLC.

Your electronically filed Exempt federal income tax return for tax year 2014 has been acknowledged as accepted for processing by the IRS on 05/13/2016.

Your return was sent to the Ogden Service Center.

Your SubmissionID is Your Client ID is .

Do not mail the paper copy of your tax return to the IRS. It is for your use only.

Form 8879-EO	IRS e-file Signature Authors for an Exempt Organiz	orization	OMB No. 1545-1878				
roini OO7O EO	For calendar year 2014, or fiscal year beginning JUL 1 , 2014, and ending JUN 30 ,20 15						
	▶ Do not send to the IRS. Keep for you		2014				
Department of the Treasury Internal Revenue Service	► Information about Form 8879-EO and its instructions is	i at www.im.cov/form0070.					
Name of exempt organization		En	nployer identification number				
	Stokes Community Freedom						
Public Charte	r School	5	52-2094777				
Name and title of officer							
Erika Bryant							
Executive Dir							
	Return and Return Information (Whole Dollars Only)						
on line 1a, 2a, 3a, 4a, or 5a	rn for which you are using this Form 8879-EO and enter the applic a, below, and the amount on that line for the return being filed wit ank (do not enter -0-). But, if you entered -0- on the return, then er	h this form was blank, then	leave line 1b. 2b. 3b. 4b. or 5b				
1a Form 990 check here	▶ X b Total revenue, if any (Form 990, Part VIII, colum	n (A) line 12)	th 8.206.018				
2a Form 990-EZ check he	b Total revenue, if any (Form 990-EZ, line 9)	11 (7 V) 11 10 12/	2h				
3a Form 1120-POL check	here b Total tax (Form 1120-POL, line 22)	***********************************	3h				
4a Form 990-PF check he	b Tax based on investment income (Form 99	0-PF, Part VI, line 5)	4b				
5a Form 8868 check here	b Balance Due (Form 8868, Part I, line 3c or Part I	I, line 8c)	5b				

	on and Signature Authorization of Officer I declare that I am an officer of the above organization and that I						
1-888-353-4537 no later that processing of the electronic payment. I have selected a organization's consent to electronic payment.		authorize the financial instit to answer inquiries and res	utions involved in the olve issues related to the				
Officer's PIN: check one b							
LX I authorize SB	& Company, LLC	to er	nter my PIN 94777				
	ERO firm name		Enter five numbers, b do not enter all zeros				
is being filed with enter my PIN on t	on the organization's tax year 2014 electronically filed return. If the a state agency(ies) regulating charities as part of the IRS Fed/State return's disclosure consent screen. e organization, I will enter my PIN as my signature on the organization.	ate program, I also authoriz ation's tax year 2014 electr	turn that a copy of the return the the aforementioned ERO to ronically filed return. If I have				
prog	vitn a state agen	cy(les) regulating charities :	as part of the IRS Fed/State				
Officer's signatu		Date ▶ <u>5/11</u>	16				
Part III Certificati	on and Authentication						
hamilton and the second	r six-digit electronic filing identification						
	general production of the control of	27037520721 do not enter all zeros					
I certify that the above nume confirm that I am submitting e-file Providers for Business	eric entry is my PIN, which is my signature on the 2014 electronic this return in accordance with the requirements of Pub. 4163 , M	ally filed return for the orga odernized e-File (MeF) Info	nization indicated above. I mation for Authorized IRS				
ERO's signature		Date ▶ <u>05/11/</u>	′16				
	ERO Must Retain This Form - See In	structions					

Do Not Submit This Form To the IRS Unless Requested To Do So

Extended to May 16, 2016

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

Tax year beginning JUL 1, 2014 and ending JUN 30, 2015

Open to Public Inspection

$\underline{\sim}$	ו טו נוונ	2014 Calendar year, or tax year beginning 0011 1, 2014 and	ending 0	ON 30, 2013					
В	Check if applicabl	C Name of organization		D Employer identifi	cation number				
		Eiste whittow Stokes Community Freedom	m						
	Addre chang								
L	Name chang			52-2	094777				
L	Initial return	Number and street (or P.O. box if mail is not delivered to street address)							
	Final return	3700 Oakview Terrace, NW		202-	265-7237				
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,206,018.				
L	Amen	Washington, DC 20017		H(a) Is this a group re					
	Application			for subordinates	? Yes X No				
	pendir	same as c above		H(b) Are all subordinates in	ncluded? Yes No				
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)				
		te: ▶ www.ewstokes.org		H(c) Group exemption					
		organization: X Corporation Trust Association Other ▶	∟ Year	of formation: 1998 N	State of legal domicile: DC				
P	art I	Summary							
Φ	1	Briefly describe the organization's mission or most significant activities: ${\color{red}{\rm To}}$	ducate	culturally	diverse				
auc		children to become responsible citizens	commit	ted to soci	al justice.				
ĸ.	2	Check this box if the organization discontinued its operations or dispo	sed of more	than 25% of its net as					
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	11				
رى ق	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11				
es	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	129				
Ϋ́	6	Total number of volunteers (estimate if necessary)		6	100				
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	524,614.				
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	-56,145.				
				Prior Year	Current Year				
<u>•</u>	8	Contributions and grants (Part VIII, line 1h)		1,010,599.	842,217.				
nu.	9	Program service revenue (Part VIII, line 2g)		6,136,440.	7,306,806.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,098.	416.				
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		44,028.	56,579.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,194,165.	8,206,018.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,687,129.	4,840,106.				
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	<u></u> L	0.	0.				
ď	b	Total fundraising expenses (Part IX, column (D), line 25)	56.						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,292,347.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,979,476.					
	19	Revenue less expenses. Subtract line 18 from line 12		214,689.					
Net Assets or Find Balances	[Ве	ginning of Current Year	End of Year				
set	20	Total assets (Part X, line 16)		10,605,466.	11,113,459.				
AP	21	Total liabilities (Part X, line 26)		7,970,702.	7,505,495.				
킬	22	Net assets or fund balances. Subtract line 21 from line 20		2,634,764.	3,607,964.				
	art II	Signature Block							
		lties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	nich preparer	has any knowledge.					
		Circohum of officer		Doto					
Sig		Signature of officer		Date					
He	re	Erika Bryant, Executive Director Type or print name and title							
		·	П	Date Check	II DTIN				
D - '	_	Print/Type preparer's name Preparer's signature		Ollook L	PTIN				
Pai		Monique Booker	U	5/11/16 if self-employ	P00644231				
	parer	Firm's name SB & Company, LLC	EEAA	Firm's EIN ▶	20-2153727				
USE	Only	Firm's address 200 International Circle, Suite	2200		10\ 504 0000				
_		Hunt Valley, MD 21030		Phone no. (4					
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Established in 1998, the Elise Whitlow Stokes Community Freedom Public
	Charter School prepares 349 culturally diverse pre-school and
	elementary school students in the District of Columbia to be leaders,
	scholars, and responsible citizens who are committed to social
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 5,244,956 • including grants of \$) (Revenue \$ 6,383,867 •)
	The instructional program serves approximately 350 pre-kindergarten
	through 6th grade students. The Elsie Whitlow Stokes Community Freedom
	PCS After School Program embodies the school's mission of sustaining
	and enhancing a dynamic, disciplined and diverse learning community
	that ensures academic excellence and preparation for active leadership
	and responsible global citizenship for all students.
4b	(Code:) (Expenses \$ 500,056 • including grants of \$) (Revenue \$ 608,640 •)
	The Stokes School food service department prepares and serves
	breakfast, lunch and supper to students and staff on a daily basis. All
	of the food is prepared fresh daily, from scratch, with local
	ingredients as much as possible. We partner with local organizations
	such as DC Farm to School, the Washington Youth Garden and local meat
	providers.
	<u></u>
4c	(Code:) (Expenses \$ 258,227 • including grants of \$) (Revenue \$ 314,299 •)
	Students engage in creative activities to supplement as well as
	complement student learning. Students enrolled in the after school
	program not only learn the language arts and mathematics fundamentals
	but are also be exposed to world cultures. They learn about the
	language, the customs, the foods, the environment and the people. In
	addition to these learning activities, students engage in visual arts,
	arts & crafts, music and movement, dance, steel drums, African
	drumming, violin, guitar, reading and literacy groups and other
	activities.
	Other program convices (Describe in Schedule O.)
40	Other program services (Describe in Schedule O.)
4.	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 6,003,239 •
<u>4e</u>	Total program service expenses ► 6 , 003 , 239 . Form 990 (2014)
	Form 990 (2014)

52-2094777

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		7.7	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			3,7
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	37	_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	37
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	ا ا		v
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			Х
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.		х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		Х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		х
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
19		19		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
<u> </u>	ii res to line zoa, uiu the organization attaon a copy of its addited linaricial statements to this return?	ZUD		

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			Х
0.4	contributions? If "Yes," complete Schedule M	30		Λ
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Х
20	If "Yes," complete Schedule N, Part I	31		21
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1000		
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 17			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 129			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	Х	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			l
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	igsquare	X
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).			L
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	\vdash	Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			7.7
	any contributions that were not tax deductible as charitable contributions?	6a	\vdash	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			Х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 7b	$\vdash \vdash \vdash$	
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	76		
C	to file Form 8282?	7c		х
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d	,,,		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a	igsquare	<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ıza		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2014)

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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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	10b	37	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		37	
12a	1 , , , , ,	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		v	
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	^	
15	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?	45-	Х	
	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a	41	Х
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		-2
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
·Ja	taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	IUa		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailah	le	
	for public inspection. Indicate how you made these available. Check all that apply.		-	
	Own website Another's website X 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	l finan	cial	
	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:			
	The Organization - 202-265-7237			
	3700 Oakview Terrace, NW, Washington, DC 20017			

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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.

(A) Name and Title	(B) Average hours per	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer p		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Carlos Bonner	2.00	.,							•	•
Trustee	2 00	Х						0.	0.	0
(2) John R. Bryant	2.00	₩							0	0
Trustee (3) Erin Gore	2.00	Х						0.	0.	0
Trustee	2.00	X						0.	0.	0
(4) Tracey Friedlander	2.00	122						0.	0.	0
Trustee	2700	x						0.	0.	0
(5) Robyn Lingo	2.00									
Trustee		X						0.	0.	0
(6) Joi M. Hilton	2.00									
Trustee		Х						0.	0.	0
(7) Erica McGrady	2.00									
Chair		Х		Х				0.	0.	0
(8) Verleria King-Jones	2.00									
Treasurer		Х		Х				0.	0.	0
(9) Ami Richardson	2.00								_	_
Trustee		Х						0.	0.	0
(10) Josh Steele	2.00	١								
Trustee	2.00	Х						0.	0.	0
(11) Jenice View, Ph.D	2.00	Į.,							0	•
Trustee	47.00	Х						0.	0.	0
(12) Erika Bryant Executive Director	47.00	1		x				94,435.	0.	10,352
Executive Director				Λ				94,433.		10,332
										F 000 (004

Form 990 (2014)

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Pai	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)			•	C)			(D)	(E)			(F)	
	Name and title	Average hours per		not c		more	than		Reportable	Reportable	I			
		week					is bot or/trus		compensation	compensation from related		ar	nount other	ot
		(list any	ro						from the	organization		com	otriei ipensa	ation
		hours for	Individual trustee or director				p		organization	(W-2/1099-MIS		om th		
		related	ee or	stee			nsate		(W-2/1099-MISC)	(** =/ *********************************	,	anizat		
		organizations	Itrust	Institutional trustee		yee	Highest compensated employee					d relat	ed	
		below	vidua	itution	Ser	Key employee	hest c	Former				ons		
		line)	lpul	lust	Officer	Key	Hig	윤						
			-											
							-							
			-											
							\vdash							
			1											
			-											
			1											
1b	Sub-total								94,435.		0.	1	0,3	52.
	Total from continuation sheets to Part V								0.		0.			0.
d	Total (add lines 1b and 1c)								94,435.		0.	1	0,3	<u>52.</u>
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed a	bov	e) wł	no r	eceived more than \$100	,000 of reportab	le			^
	compensation from the organization												Yes	0 No
3	Did the organization list any former officer,	director or tri	ıcta	o ko	N/ Or	mnlc)VAA	or	highest compensated a	mplovee on			163	NO
3	line 1a? If "Yes," complete Schedule J for s											3		х
4	For any individual listed on line 1a, is the su													
-	and related organizations greater than \$15	•							•	•		4		Х
5	Did any person listed on line 1a receive or a													
_	rendered to the organization? If "Yes," com	plete Schedul	e J t	for s	uch	pers	son .					5		X
	tion B. Independent Contractors									.				
1	Complete this table for your five highest co the organization. Report compensation for										npens	ation '	rom	
	(A)	trie caleridar y	eai	enui	ng v	VILII	OI W	111111	(B)	year.		10		
	Name and business	address	N	INC	Ξ				Description of s	ervices	С		nsatio	n
								_						
								\dashv						
2	Total number of independent contractors (i		ot li	mite	d to		se li: 0	stec	d above) who received m	ore than				
	\$100,000 of compensation from the organi	zaliui 📂										Form	990 (2014)

Form 990 (2014) Public Charter School
Part VIII | Statement of Revenue

Га	L VI			or note to any lin	as in this Dort VIII			
		Check if Schedule O conta	ins a response	or note to any iii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Service Contributions, Gifts, Grants and Other Similar Amounts	t c c f f	a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions gifts, grants similar amounts not included above Noncash contributions included in lines 1 h Total. Add lines 1a-1f a Pupil Allocation b Food Services c Before and After	1b 1c 1d 1d 1s 1e 1s	Business Code	842,217. 6,383,867.	6,383,867. 84,026. 270,109.	524,614.	
Program Service Revenue		d <mark>Student Activiti</mark> e	les Fee	611710	44,190.	44,190.		
_		f All other program service reven g Total. Add lines 2a-2f			7,306,806.			
	3 4 5	Investment income (including dother similar amounts) Income from investment of tax-Royalties	lividends, intere	est, and	416.			416.
	6 a	a Gross rents b Less: rental expenses c Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	d Net rental income or (loss) a Gross amount from sales of assets other than inventory b Less: cost or other basis	(i) Securities	(ii) Other				
	c	and sales expenses c Gain or (loss) d Net gain or (loss) a Gross income from fundraising		>				
Other Revenue		including \$ contributions reported on line 1 Part IV, line 18 b Less: direct expenses	of c). See a					
ō		c Net income or (loss) from fundr						
		a Gross income from gaming acti						
	k	Part IV, line 19 b Less: direct expenses c Net income or (loss) from gamir	a					
	10 a	a Gross sales of inventory, less reand allowances b Less: cost of goods sold Net income or (loss) from sales	eturns a					
		Miscellaneous Revenue		Business Code				
	t	a Other Income b c		900099	56,579.	56,579.		
	c	d All other revenue						
	•	e Total. Add lines 11a-11d			56,579.	C 020 771	E24 C14	416
	12	Total revenue. See instructions.			8,206,018.	p,838,771.	ɔ⊿4,6⊥4.	416.

Total expenses Program service expenses Management and general expenses Program service expenses	(D) draising penses
Total expenses Program service expenses Program service expenses Program service expenses Program service expenses Interview of the program service expenses Program service expenses Program service expenses Program service expenses Interview of the program service expenses Program service expenses Program service expenses Interview of the program service expenses Interview of the program service expenses Program service expenses Interview of the program	draising
Total expenses Program service expenses Total expenses Program service expenses Management and general expenses Fundament and general expenses Total expenses Program service expenses Management and general expenses Program service expenses Management and general expenses Program service expenses Management and general expenses Fundament and general expenses Program service expenses Management and general expenses Management and general expenses Program service expenses Management and general expenses Program service expenses Management and general expenses Program service expenses Prog	draising
and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management	
2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management 236, 213. 196, 057. 35, 432. 196, 057. 35, 432.	
individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management	
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management	
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management	
individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management 236, 213. 196, 057. 35, 432. 196, 057. 35, 432. 196, 057. 35, 432.	
4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management 236,213. 196,057. 35,432. 236,213. 196,057. 35,432.	
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management 236,213. 196,057. 35,432. 196,057. 35,432. 196,057. 35,432.	
trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Management 236,213. 196,057. 35,432. 196,057. 35,432. 196,057. 35,432. 196,057. 35,432. 196,057. 35,432.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 3,905,106. 3,241,238. 585,766. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 268,651. 222,980. 40,298. 10 Payroll taxes 322,354. 267,554. 48,353.	4 704
persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 3,905,106. 3,241,238. 585,766. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 268,651. 222,980. 40,298. 10 Payroll taxes 322,354. 267,554. 48,353.	4,724
persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management 3 , 905 , 106 . 3 , 241 , 238 . 585 , 766 . 10 3 , 905 , 106 . 3 , 241 , 238 . 585 , 766 . 10 268 , 651 . 222 , 980 . 40 , 298 . 10 268 , 651 . 222 , 980 . 40 , 298 . 11 Fees for services (non-employees):	
7 Other salaries and wages 3,905,106. 3,241,238. 585,766. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 268,651. 222,980. 40,298. 10 Payroll taxes 322,354. 267,554. 48,353.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 107,782. 89,459. 16,167. 9 Other employee benefits 268,651. 222,980. 40,298. 10 Payroll taxes 322,354. 267,554. 48,353. 11 Fees for services (non-employees): a Management 40,298.	78,102
section 401(k) and 403(b) employer contributions) 107,782. 89,459. 16,167. 9 Other employee benefits 268,651. 222,980. 40,298. 10 Payroll taxes 322,354. 267,554. 48,353. 11 Fees for services (non-employees): a Management 7,360. 1,320.	70,102
9 Other employee benefits 268,651. 222,980. 40,298. 10 Payroll taxes 322,354. 267,554. 48,353. 11 Fees for services (non-employees): a Management 7,007 7,007 7,007 1	2 156
10 Payroll taxes 322,354. 267,554. 48,353. 11 Fees for services (non-employees): a Management 7,360 1,330	2,156 5,373
11 Fees for services (non-employees): a Management	6,447
a Management	0,11
0 0 0 0 0 0 0 1 220 1	
	177
F0 051 40 066 F 000	1,057
	1,057
d Lobbyinge Professional fundraising services. See Part IV, line 17	
f Investment management fees	
g Other. (If line 11g amount exceeds 10% of line 25,	
column (A) amount, list line 11g expenses on Sch 0.) 289,945. 240,654. 43,492.	5.799
12 Advertising and promotion 3,839. 3,186. 576.	5,799 77
13 Office expenses 115,051. 95,492. 17,258.	2,301
14 Information technology	
15 Royalties	
16 Occupancy 337,407. 280,048. 50,611.	6,748
17 Travel	•
18 Payments of travel or entertainment expenses	
for any federal, state, or local public officials	
19 Conferences, conventions, and meetings 32,027. 26,582. 4,804.	641
20 Interest 371,735. 308,540. 55,760.	7,435
21 Payments to affiliates	
22 Depreciation, depletion, and amortization 297,136. 246,623. 44,570.	5,943
23 Insurance 62,643. 51,994. 9,396.	1,253
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 0.)	
	11,045
b Food Services-Stokes Ki 238,236. 197,736. 35,735.	4,765
c Miscellaneous 22,364. 18,563. 3,355.	446
d Transportation 8,338. 6,920. 1,251.	167
e All other expenses	± 0 1
26 Joint costs. Complete this line only if the organization	44,656
reported in column (B) joint costs from a combined	
educational campaign and fundraising solicitation.	
Check here if following SOP 98-2 (ASC 958-720)	

Form **990** (2014)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 1,009,221. 1,739,439. Cash - non-interest-bearing 1 2 Savings and temporary cash investments 219,364. 85,111. Pledges and grants receivable, net 3 167,556. 29,071. 4 Accounts receivable, net **5** Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 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 instr). Complete Part II of Sch L Assets 6 Notes and loans receivable, net 7 Inventories for sale or use 8 34,811. 25,602. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 10,949,831. basis. Complete Part VI of Schedule D _____ 10a 2,018,622. 9,181,669. 8,931,209. b Less: accumulated depreciation 10b 10c 8,704. 8,578. Investments - publicly traded securities 11 11 74,653. 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 81,311. 122,626. 15 Other assets. See Part IV, line 11 15 10,605,466. 11,113,459. 16 Total assets. Add lines 1 through 15 (must equal line 34) ... 16 494,221. 17 528,708. 17 Accounts payable and accrued expenses 18 18 Grants payable 248,000. 45,503. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, _iabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 7,215,930. 6,923,266. Secured mortgages and notes payable to unrelated third parties 23 12,551. 8,018. 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 7,970,702. 7,505,495. **Total liabilities.** Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here

X
and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 2,634,764. 3,607,964. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 2,634,764. 3,607,964. 33

11,113,459. Form **990** (2014)

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

10,605,466.

Form **990** (2014)

Ра	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,20		
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	,23		
3	Revenue less expenses. Subtract line 2 from line 1	3				00.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	,63	<u>4,7</u>	64.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	3	,60	7,9	64.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	_X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	٠,			
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	_X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?			За	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3h	Х	l

432012 11-07-14

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 **2014**

Open to Public Inspection

Name of the organization

Elsie Whitlow Stokes Community Freedom Public Charter School Employer identification number 52-2094777

Pa	rt I	Reason for Public	Charity Status (All organizations must co	omplete th	is part.) Se	ee instructions.	
The (organi	ization is not a private found	lation because it is: ((For lines 1 through 11, o	check only	one box.)		
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1)(A)(i).	
2	X	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E.)				
3		A hospital or a cooperative			ection 170	(b)(1)(A)(ii	i).	
4		A medical research organiz	· ·				-	the hospital's name,
		city, and state:	•	, ,			(,
5		An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a go	overnmental unit describ	ped in
_		section 170(b)(1)(A)(iv). (C		g,		, 9		
6		A federal, state, or local go		mental unit described in	section 17	70(b)(1)(A)	(v)	
7	一	An organization that norma	-				•	nublic described in
•		section 170(b)(1)(A)(vi). (C	-	iniai part of its support	nom a gov	ommonia	ant of from the general	public described in
8		A community trust describe		(1)(A)(vi) (Complete Par	+ 11 \			
9	H	An organization that norma				contribution	one momborehin fooe a	and gross receipts from
9		activities related to its exen	•	-	-			•
			-	•			· · · · · · · · · · · · · · · · · · ·	•
		income and unrelated busin		(less section of reak) if	OIII DUSIIIE	sses acqu	ired by the organization	arter June 30, 1973.
10		See section 509(a)(2). (Con An organization organized a	•	ively to test for public so	ofaty Saa	saction 50	10(2)(4)	
11	H	An organization organized	·	•	•			nurnoses of one or
• • •		•	•	•	•		•	• •
		more publicly supported or	-					DIRECK THE DOX III
_		lines 11a through 11d that	* *			•		, giving
а		Type I. A supporting orga	•	· ·	•			
		the supported organization		• • • •	a majomy	or the direc	ciors or trustees or the s	supporting
		organization. You must o	- ·				- d	
b		Type II. A supporting org	•					-
		control or management o			same perso	ons that co	ontroi or manage the sup	pported
_		organization(s). You mus	-		:			ملاند، الم
С		Type III functionally inte					· ·	ea with,
		its supported organizatio		•				!+!(-)
d		Type III non-functionally						• •
		that is not functionally int	-		•			iveness
		requirement (see instruct	•	-				
е		Check this box if the orga					турет, турет, туреті	
	Ento	functionally integrated, or	• •					
-		er the number of supported of						
g	-	ride the following information i) Name of supported	(ii) EIN		(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of
	,	organization	(.,,	(described on lines 1-9		n your	support (see	other support (see
				above or IRC section	Yes	No	Instructions)	Instructions)
				(see instructions))	100	110		
Гotа	ı							

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	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,						
	(6)						
6	Public support. Subtract line 5 from line 4.						
	etion B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	(4) 2010	(6) 2011	(0) 2012	(4) 2010	(6) 2014	(i) rotai
	Gross income from interest,						_
Ü	dividends, payments received on						
	securities loans, rents, royalties						
•	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on			-			
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10					40	
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	J	,		•	* / * /	▶□
Sec	organization, check this box and stop ction C. Computation of Publi	c Support Pe	rcentage				·····
	Public support percentage for 2014 (li			column (f))		14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14							
h	stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
_	and stop here. The organization qualifies as a publicly supported organization						
17a	7a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization						
	meets the "facts-and-circumstances" t					~	
h	10% -facts-and-circumstances test						
IJ	more, and if the organization meets th	-					
	organization meets the "facts-and-circ				-		
18	Private foundation. If the organization						
		. s.a not oncor a	20% On mile 10, 10	-a, 100, 114, 01 11	2, 3110011 tillo box t		

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

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

Se	ction A. Public Support		,				
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support		1	1	T	T	1
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>	<u> </u>	1.6		504(.)(2)	<u> </u>
14	First five years. If the Form 990 is for	_			-		
<u>S</u>	check this box and stop here ction C. Computation of Publ						<u> </u>
	Public support percentage for 2014 (l			column (f))		15	%
	Public support percentage from 2013					16	
	ction D. Computation of Inves					1 10 1	70
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	
	a 33 1/3% support tests - 2014. If the						
	more than 33 1/3%, check this box a						
Ł	33 1/3% support tests - 2013. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI. including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in

Part VI.

- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b 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.)

		Yes	No
	1		
	1		
	2		
	3a		
	- Ou		
	3b		
	3с		
	4a		
	4b		
	4c		
	40		
	F		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
า 99	90 or 99	0-EZ)	2014

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
<u>Sec</u>	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		,	
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	A1		
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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 <i>part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01-		
	of its supported organizations? If "Yes." describe in part with the role played by the organization in this regard.	3b	1	

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970. See instru	uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year
	•		(ryr nor rear	(optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 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	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionall	y-integra	ated Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2014

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	ion D -	Distributions		,	Current Year
1	Amou	nts paid to supported organizations to accomplish exe			
2	Amou	nts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organ	izations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amou	nts paid to acquire exempt-use assets			
5	Qualif	ied set-aside amounts (prior IRS approval required)			
6	Other	distributions (describe in Part VI). See instructions.			
7	Total	annual distributions. Add lines 1 through 6.			
8	Distrik	outions to attentive supported organizations to which the	ne organization is responsive		
	(provi	de details in Part VI). See instructions.			
9	Distrik	outable amount for 2014 from Section C, line 6			
10	Line 8	amount divided by Line 9 amount			
			(i)	(ii)	(iii)
	_		Excess Distributions	Underdistributions	Distributable
secti	ion E -	Distribution Allocations (see instructions)		Pre-2014	Amount for 2014
1	Distrib	outable amount for 2014 from Section C, line 6			
2	Unde	rdistributions, if any, for years prior to 2014			
		onable cause required-see instructions)			
3	Exces	ss distributions carryover, if any, to 2014:			
а					
b					
С					
d					
е	From	2013			
f	Total	of lines 3a through e			
		ed to underdistributions of prior years			
		ed to 2014 distributable amount			
i	Carry	over from 2009 not applied (see instructions)			
j	Rema	inder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distrik	outions for 2014 from Section D,			
	line 7:	\$			
а	Applie	ed to underdistributions of prior years			
b	Applie	ed to 2014 distributable amount			
С	Rema	inder. Subtract lines 4a and 4b from 4.			
5	Rema	ining underdistributions for years prior to 2014, if			
	any. S	Subtract lines 3g and 4a from line 2 (if amount			
	greate	er than zero, see instructions).			
6	Rema	ining underdistributions for 2014. Subtract lines 3h			
	and 4	b from line 1 (if amount greater than zero, see			
		ctions).			
7	Exces	ss distributions carryover to 2015. Add lines 3j			
	and 4	c.			
8	Break	down of line 7:			
а					
b					
С					
d	Exces	ss from 2013			
е	Exces	ss from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Elsie Whitlow Stokes Community Freedom Public Charter School

Schedule A (Form 990 or 990-EZ) 2014 PUDIIC Charter School	52-2094/// Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or	17b; and Part III, line 12.
Also complete this part for any additional information. (See instructions).	,
Also complete this part for any additional mormation. (See instructions).	

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Organization type (check one):

Elsie Whitlow Stokes Community Freedom Public Charter School

Employer identification number

52-2094777

Filers of	: :	Section:				
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
		s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
X		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
	•	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to				

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization
Elsie Whitlow Stokes Community Freedom
Public Charter School

Employer identification number

52-2094777

Parti	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	U.S. Dept of Education 400 Maryland Ave, SW Washington, DC 20202	557,042.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	U.S. Dept of Agriculture 1400 Independence Ave, SW Washington, DC 20250	- \$ 275,941.	Person X Payroll		
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	Flamboyan Foundation 1730 Massachusetts Avenue NW Washington, DC 20036	\$\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Name of organization
Elsie Whitlow Stokes Community Freedom
Public Charter School

Employer identification number

52-2094777

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization Employer identification number Elsie Whitlow Stokes Community Freedom 52-2094777 Public Charter School Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (<u>a)</u> No. `fŕom Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

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OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Elsie Whitlow Stokes Community Freedom Public Charter School

Employer identification number 52-2094777

Pai	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 v	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	• •		
Pai			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	`	orically important land area
	Protection of natural habitat	Preservation of a certi	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	, ,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic stru		·····
	Number of conservation easements included in (c) acquired a		
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel		
	year >		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat		
	conservation easements.		-
Pai	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descril	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ec	ducation, or research in furtherance of pul	olic service, provide the following amounts
	relating to these items:		
	(i) Revenue included in Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		·

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

Schedule D (Form 990) 2014

Pai	t III Organizations Maintaining C	ollections of A	rt, Historic	al Treasures,	or Other	Similar A	ssets(continu	red)
3	Using the organization's acquisition, accessi	on, and other record	ds, check any	of the following th	at are a sigr	ificant use o	of its collection	items
	(check all that apply):							
а	Public exhibition	d	I Loan	or exchange prog	rams			
b	Scholarly research	е	e Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they fu	ther the organiza	tion's exemp	t purpose ir	n Part XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, historic	al treasures, or ot	her similar a	ssets		
	to be sold to raise funds rather than to be ma	aintained as part of t	the organization	on's collection? .			Yes	☐ No
Pai	t IV Escrow and Custodial Arran	gements. Comple	ete if the orga	nization answered	"Yes" to Fo	rm 990, Par	t IV, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.						
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contri	butions or other a	ssets not in	cluded		
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII							
							Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on F					?	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanation has	been provided in	Part XIII			
Pai	t V Endowment Funds. Complete i	f the organization ar	swered "Yes"	to Form 990, Par	t IV, line 10.			
		(a) Current year	(b) Prior ye	ear (c) Two ye	ars back (d)	Three years	back (e) Four y	ears back
1a	Beginning of year balance							
	Contributions							
	Net investment earnings, gains, and losses							
	Grants or scholarships							
	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
	End of year balance							
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1g, col	umn (a)) held as:	<u> </u>		•	
а	Board designated or quasi-endowment	•	%	· //				
	Permanent endowment	%	_					
С	Temporarily restricted endowment ▶	 %						
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%.						
За	Are there endowment funds not in the posse		ation that are	held and administ	ered for the	organization	า	
	by:	J				Ü		es No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations							
b	If "Yes" to 3a(ii), are the related organizations							
4	Describe in Part XIII the intended uses of the							<u> </u>
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answere		, Part IV, line	11a. See Form 99	0, Part X, lin	e 10.		
	Description of property	(a) Cost or o		Cost or other basis (other)	1 ' '	umulated ciation	(d) Book	value
	Land	'	,	• • • • • • • • • • • • • • • • • • • •	,-,-			
	Buildings		10	,735,987.	2.01	8,622.	8,717	,365.
	Leasehold improvements		 - 	58,718.		,		,718.
	Equipment			91,766.				,766.
	Other			63,360.				,360.
	. Add lines 1a through 1e. (Column (d) must e		X, column (B)			>	8,931	

Schedule D (Form 990) 2014

D 11' 01		ommunicy freed	52-2094777 _{Page}
Schedule D (Form 990) 2014 Public Char	ter school		52-2094/// Page
Part VII Investments - Other Securities.	. =		N. II
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua	tion: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)	1		
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
	ta Farra 000 Dart IV/ II	11- C Faure 000 Dark	V line 10
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		tion: Cost or end-of-year market value
	(b) Book value	(C) WELFIOU OF VAIUA	tion. Cost of end-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	to Form 990, Part IV, li	ne 11d. See Form 990, Part	X, line 15.
	Description	·	(b) Book value
(1)	i		
(2)			
(3)			
(4)			+
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<i>э</i> 15.)		>
Part X Other Liabilities.			
Complete if the organization answered "Yes"	to Form 990, Part IV, lin	ne 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)			

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 X

Schedule D (Form 990) 2014

(9)

52-	20	94'	777	7 Page 4

Sche	dule D (Form 990) 2014 Public Charter School			2094777 _{Page}
Par	t XI Reconciliation of Revenue per Audited Financial Sta	ntements With Reve	nue per Return) .
	Complete if the organization answered "Yes" to Form 990, Part IV, lir	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	8,206,018
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
	Donated services and use of facilities			
	Recoveries of prior year grants			
	Other (Describe in Part XIII.)			
	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1			8,206,018
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			<u> </u>
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			8,206,018
	t XII Reconciliation of Expenses per Audited Financial St			
	Complete if the organization answered "Yes" to Form 990, Part IV, lir	-	•	
1	Total expenses and losses per audited financial statements		1	7,232,818
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			<u>, , , , , , , , , , , , , , , , , , , </u>
	Donated services and use of facilities	2a		
	Prior year adjustments			
	Other losses			
	Other (Describe in Part XIII.)			
	Add lines 2a through 2d	•	2e	0
3	Subtract line 2e from line 1			7,232,818
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			.,
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)			
	And Breen Annual Ale	•	4c	0
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1			7,232,818
	t XIII Supplemental Information.	<u> </u>		, , , , , ,
Provi	de 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 a	ny additional information.		
<u>Par</u>	t X, Line 2:			
The	School is exempt from Federal income	taxes under	Section 50	1(c)(3) of
the	Internal Revenue Code and applicable	District of (Columbia i	ncome tax
lav				
Acc	ounting principles generally accepted	in the United	d States o	f America
	vide consistent guidance for the accou			
tax	es recognized in an entity's financial	statements a	and prescr	ibe a
thr	eshold of "more likely than not" for r	ecognition of	f tax posi	tions taken
or	expected to be taken in a tax return.	The School pe	erformed a	n

evaluation of uncertain tax positions for the year ended June 30, 2015,

and determined that there were no matters that would require recognition

in the financial statements or which may have any effect on its tax-exempt status. As of June 30, 2015, the statute of limitations for tax years 2011 through 2014 remains open with the U.S. Federal jurisdiction or the various states and local jurisdictions in which the School files tax returns. It is the School's policy to recognize interest and/or penalties related to uncertain tax positions, if any, in income tax expense.
through 2014 remains open with the U.S. Federal jurisdiction or the various states and local jurisdictions in which the School files tax returns. It is the School's policy to recognize interest and/or penalties
various states and local jurisdictions in which the School files tax returns. It is the School's policy to recognize interest and/or penalties
returns. It is the School's policy to recognize interest and/or penalties
related to uncertain tax positions, if any, in income tax expense.

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 52-2094777

			YES
	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
	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	Х
	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.		
	Mary and mary and Dotal II	3	Х
	The School publicizes its racially nondiscriminatory policy		
	on its website.		
	Does the organization maintain the following?		,,
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	₩
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	١.	
	admissions, programs, and scholarships?	4c	X
	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
	The School does not charge tuition and therefore does not provide scholarships to students.		
	provide scholarships to students.		
	Does the organization discriminate by race in any way with respect to:		
	Students' rights or privileges?	5a	
		ı Ja	
	Admiccione policioe?	\vdash	
	Admissions policies? Employment of faculty or administrative staff?	5b	
	Employment of faculty or administrative staff?	5b 5c	
	Employment of faculty or administrative staff? Scholarships or other financial assistance?	5b 5c 5d	
	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	5b 5c 5d 5e	
	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities?	5b 5c 5d 5e 5f	
	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g	
	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f	
) : !	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g	
	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	
);;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency?	5b 5c 5d 5e 5f 5g 5h	X
);;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h	X
	Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency?	5b 5c 5d 5e 5f 5g 5h	X

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

Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

Schedule E (Form 990 or 990-EZ) (2014)

Elsie Whitlow Stokes Community Freedom Public Charter School

Schedule E (Form 990 or 990-EZ) (2014) PUDIIC Charter School	52-2094	1 / / Page 2
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h	n, 6b, and 7, as applicable.	
Also provide any other additional information.		
Line 6 - Explanation of Government Financial Aid:		
The school received assistance from the Department of	Education and	l the
Department of Agriculture.		
Department of Agriculture:		

SCHEDULE O

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form9900

Elsie Whitlow Stokes Community Freedom Emplo

Public Charter School 52

Employer identification number 52-2094777

Form 990, Part III, Line 1, Description of Organization Mission: justice.

We teach children to think, speak, read, write, and learn in two
languages: English and French, or English and Spanish. With a dual
focus on academic excellence and community service, the School
accomplishes its mission by creating an environment of achievement,
respect, and non-violence.

Form 990, Part VI, Section A, line 2:

The Executive Director, Erika Bryant, is the daughter of Linda Moore, the senior advisor of the school since August 1, 2013. John Bryant, a member of the board, is the brother of Erika Bryant, Executive Director.

Form 990, Part VI, Section B, line 11:

Federal Form 990 is prepared by an independent accountant. The 990 is reviewed by the finance committee and then provided to the entire board for approval.

Form 990, Part VI, Section B, Line 12c:

Trustees review their individual compliance with the conflict of interest policy and sign statements affirming their compliance annually. If a potential conflict arises, board members review that potential situation to avoid conflict.

Form 990, Part VI, Section B, Line 15a:

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

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization Elsie Whitlow Stokes Community Freedom Public Charter School	Employer identification number 52-2094777
Compensation is determined by a variety of measures, incl	uding review of
comparability data, review of budget restrictions, and in	dividual employee
performance.	
Form 990, Part VI, Section C, Line 19:	
Governing documents are available for public review throu	gh the DC Public
Charter School Board and upon request from the School dir	ectly.
Form 990, Part XII, Line 2c:	
The process has not changed from prior year.	