



F.A.M.E., Inc.

May Finance Committee Meeting

Date and Time

Tuesday May 14, 2019 at 5:30 PM CDT

Location

4720 Painters Street, New Orleans, LA 70122

Agenda

	Purpose	Presenter	Time
I. Opening Items			5:30 PM
Opening Items			
A. Call the Meeting to Order		Calvin Tregre	
B. Record Attendance and Guests		Jalita Chandar	1 m
C. Adoption of the Agenda	Vote	Calvin Tregre	1 m
II. Approve Minutes			5:32 PM
A. Minutes from April 9, 2019	Vote	Calvin Tregre	2 m
III. Monthly Financial Statements			5:34 PM
Finance Committee			
A. Financial Statements for the Month of March, 2019 and April, 2019	Discuss	Justin Anderson	15 m

	Purpose	Presenter	Time
IV. Other Business			5:49 PM
A. Proposed Budget for 2019-20 year	Vote	Justin Anderson	30 m
Review the proposed budget for next fiscal year, and vote on recommendation to the Board of Directors.			
Budget Hearing at 9:00am on May 18, 2019 Budget Approval recommended to Board on May 18, 2019			
B. Review of the Form 990	Discuss	Justin Anderson	5 m
Review and discussion of the annual Form 990			
V. Closing Items			6:24 PM
A. Announcements	FYI	Calvin Tregre	1 m
Next meeting - Tuesday, June 11, 2019 at 5:30pm			
B. Adjourn Meeting	Vote	Calvin Tregre	1 m

Coversheet

Minutes from April 9, 2019

Section:	II. Approve Minutes
Item:	A. Minutes from April 9, 2019
Purpose:	Vote
Submitted by:	
Related Material:	2019_4_9_finance_committee_meeting_agenda minutes taken.docx



F.A.M.E., Inc.

Finance Committee Meeting

Date and Time

Tuesday April 9, 2019 at 5:30 PM CST

Location

Broadway Campus; 428 Broadway St.; New Orleans, LA; Conference Room

I. Opening Items

A. Meeting was called to order at 5:48pm by Mr. Tregre.

B. Record Attendance and Guests

Name	Term Expiration Date	Present/Absent
Calvin Tregre	2020	Present
Melissa Russell	2020	Present
Lourdes Moran	2018	Present
Jorge Perez	2018	Absent
Harold LeBlanc	2018	Present
Latoye Brown	CEO	Present
Justin Anderson	CFO	Present
Jalita Chandar	Controller	Present

C. Agenda adopted with no changes.

II. Approve Minutes

A. Minutes from the March 12, 2019 meeting were presented by Mr. Tregre. Motion: Mr. LeBlanc Second: Ms. Russell

III. Monthly Financial Statements

A. Mr. Anderson will send out March 2019 financial statements once completed. The financials will not be presented at the Board Meeting on Saturday April 13, 2019.

IV. Other Business

- A. Mr. Anderson presented the first draft of the 2019_2020 Budget.
- B. Mr. Anderson confirmed Title transfer of the land at Gentilly. Upon receipt of final documents to Bank, the Bank will take two weeks for finalization.
- C. Mr. Anderson provided an update on the Tax Credits for the Gentilly Campus.
- D. Mr. Tregre presented a draft "Change Order Policy." The Committee discussed the policy and will revisit the policy and finalize. Mr. Tregre provided an update on the creation of two separate 501c3 entities: 1) Fundraising and 2) Training Centre.

IV. Closing Items

- A. The F.A.M.E Finance Committee was adjourned at 7:04 pm. Motion: Ms. Russell Second Mr. LeBlanc.

Coversheet

Financial Statements for the Month of March, 2019 and April, 2019

Section:	III. Monthly Financial Statements
Item:	A. Financial Statements for the Month of March, 2019 and April, 2019
Purpose:	Discuss
Submitted by:	
Related Material:	1903 ACS Financial Statement.pdf 1904 ACS Financial Statement.pdf

FRENCH AND MONTESSORI EDUCATION INCORPORATED

Financial Statements

For the Month Ended March 31, 2019

These financial statements have not been subject to an audit, review, or compilation engagement, and no assurance is provided on them. Substantially all of the disclosures, and the statement of cash flows, required by accounting principles generally accepted in the United States of America have been omitted.

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**FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF FINANCIAL POSITION
FOR THE MONTH ENDED MARCH 31, 2019**

ASSETS**CURRENT ASSETS**

Cash and cash equivalents	\$ 546,491
Accounts receivable	548,955
Investments	923,935
Prepaid expenses and other current assets	<u>70,770</u>

Total current assets 2,090,151

PROPERTY AND EQUIPMENT, net 3,617,052

TOTAL ASSETS \$ 5,707,203

LIABILITIES AND NET ASSETS**CURRENT LIABILITIES**

Accounts payable and accrued expenses	\$ 263,741
Accrued salaries and benefits payable	85,804
Deferred revenues	<u>20,228</u>

Total current liabilities 369,773

NET ASSETS

Unrestricted net assets 5,337,430

TOTAL LIABILITIES AND NET ASSETS \$ 5,707,203

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**FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS AND BUDGET COMPARISON
FOR THE NINE MONTHS ENDED MARCH 31, 2019**

	AUDUBON UPTOWN Actual	AUDUBON GENTILLY Actual	AUDUBON CENTRAL OFFICE Actual	TOTAL	% ACHIEVED OF ANNUAL
REVENUES AND SUPPORT					
MFP revenues	\$ 5,632,137	\$ 841,868	\$ -	\$ 6,474,005	76%
Fee revenues	135,608	53,712	-	189,320	77%
Public grants and program funding	829,823	78,810	-	908,633	49%
Private grants and donations	188,396	23,060	-	211,456	14%
Income from investments	50,831	417	-	51,248	93%
Other income	377,236	30,600	-	407,836	74%
Total revenues and support	7,214,031	1,028,467	-	\$ 8,242,498	65%
EXPENSES					
Salaries	\$ 3,911,870	\$ 976,682	\$ 557,340	\$ 5,445,892	76%
Benefits	1,407,476	145,812	120,411	1,673,699	70%
Disposal	14,184	3,385	-	17,569	86%
Dues	19,672	1,115	-	20,787	41%
Food service	207,013	58,403	-	265,416	65%
Insurance	137,024	179	-	137,203	61%
Materials	279,878	108,971	3,691	392,540	102%
Purchased services	663,294	118,233	25,279	806,806	90%
Rentals	19,742	148	-	19,890	139%
Repairs and maintenance	176,535	25,886	499	202,920	76%
Travel	34,871	77	-	34,948	64%
Utilities	136,257	36,900	4	173,161	55%
Depreciation	57,533	-	-	57,533	53%
Other expenses	20,085	125	-	20,210	18%
Debt Service	-	-	-	-	0%
Student Transportation	42,455	133,279	-	175,734	137%
Total expenses	7,127,889	1,609,195	707,224	9,444,308	74%
CHANGE IN NET ASSETS	\$ 86,142	\$ (580,728)	\$ (707,224)	\$ (1,201,810)	
NET ASSETS - Beginning of period				6,539,239	
NET ASSETS - End of period				\$ 5,337,429	

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FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS AND BUDGET COMPARISON
FOR THE MONTH ENDED MARCH 31, 2019

	AUDUBON UPTOWN	AUDUBON GENTILLY	AUDUBON CENTRAL OFFICE	Total	Budeted
	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>		
REVENUES AND SUPPORT					
MFP revenues	\$ 745,704	\$ 99,903	\$ -	\$ 845,607	\$ 705,250
Fee revenues	9,272	4,349	-	13,621	24,480
Public grants and program funding	27,966	-	-	27,966	185,183
Private grants and donations	13,038	6,925	-	19,963	151,337
Income from investments	12,097	63	-	12,160	4,583
Other income	44,064	4,823	-	48,887	55,000
Total revenues and support	<u>852,141</u>	<u>116,063</u>	<u>-</u>	<u>968,204</u>	<u>1,125,833</u>
EXPENSES					
Salaries	\$ 278,898	\$ 184,843	\$ 175,914	\$ 639,655	\$ 691,407
Benefits	203,182	22,946	14,415	240,543	228,567
Disposal	1,502	343	-	1,845	1,700
Dues	2,417	955	-	3,372	4,250
Food service	5,629	1,496	-	7,125	38,640
Insurance	8,704	179	-	8,883	22,938
Materials	22,340	14,690	57	37,087	32,044
Purchased services	92,414	18,319	11,250	121,983	88,117
Rentals	8,207	-	-	8,207	946
Repairs and maintenance	19,758	1,702	-	21,460	22,198
Travel	86	-	-	86	4,583
Utilities	3,954	4,140	4	8,098	26,205
Depreciation	6,393	-	-	6,393	9,032
Other expenses	(8,472)	-	-	(8,472)	9,125
Debt Service	-	-	-	-	7,650
Student Transportation	2,058	21,215	-	23,273	12,838
Total expenses	<u>647,070</u>	<u>270,828</u>	<u>201,640</u>	<u>1,119,538</u>	<u>1,147,193</u>
CHANGE IN NET ASSETS				\$ (151,334)	\$ (21,360)
NET ASSETS - Beginning of month				<u>5,488,766</u>	
NET ASSETS - End of month				<u>\$ 5,337,432</u>	

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FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF CASH FLOWS
FOR THE MONTH ENDED MARCH 31, 2019

Cash Flows from Operating Activities

Changes in Net Assets	\$ (151,335)
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities	
Net Realized and Unrealized Loss on Investments	(9,463)
Depreciation	6,393
(Increase) Decrease in Assets	-
Accounts Receivable	65,811
Interest Receivable	-
Prepaid Expenses	13,044
Increase (Decrease) in Liabilities	-
Accounts Payable	90,183
Accrued liabilities	(9,196)
Deferred Revenue	(13,304)
 Total Adjustments	 <u>143,467</u>
 Net Cash Provided by Operating Activities	 <u>\$ (7,868)</u>

Cash Flows from Investing Activities

Sale of Investments	(2,399)
Purchases of Fixed Assets	<u>(32,587)</u>
 Net Cash Used in Investing Activities	 <u>\$ (34,986)</u>

Net Increase in Cash	\$ (42,853)
Cash, Beginning of Period	\$ 589,344
Cash, End of Period	<u>\$ 546,491</u>

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**FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
MANAGEMENT DISCUSSION AND ANALYSIS
MARCH 31, 2019**

1. MFP REVENUES

The total 2% administrative fee, charged by the OPSB for its supervisory role in being the school's granting authority, retained by OPSB for fiscal year 2018-19, is \$136,444 through March 31, 2019 and is recorded within Purchased Services on the Statement of Activities and Change in Fund Balance.

2. PUBLIC GRANTS & PROGRAM FUNDING	Month	Year to Date	Annual Budget	% ACHIEVED
NCLB - Title I		137,346		
Title II - Improving Teacher Quality		-		
IDEA-B		87,291		
EEF		14,922		
CODOFIL Stipends	-	42,000		
2016-17 F.A.T. Salary		420,000		
New School for Nola		18,030		
Federal Lunch Program	27,966	155,192		
Literacy Grant		11,603		
Total Public Grants and Program Funding	<u>\$ 27,966</u>	<u>\$ 886,383</u>	<u>\$ 1,851,826</u>	<u>48%</u>

3. PRIVATE GRANTS AND DONATIONS	Month	Year to Date	Annual Budget	% ACHIEVED
Chinese - Donation In-Kind (Salaries)	12,900	103,200		
LASIP Program		4,648		
Give Nola		4,209		
Sunship		-		
Schwab Grant		15,000		
Keller Family		-		
Annual Giving and Other Donations	6,709	48,457		
Cool Zoo	254	15,099		
Kellogg Grant		-		
Walton Grant		-		
ECMO		-		
FAME BOARD		2,697		
GNOF		-		
Fais Do-Do	100	100		
Misc Donations		13,989		
Total Private Grants and Donations	<u>\$ 19,963</u>	<u>\$ 207,398</u>	<u>\$ 1,513,367</u>	<u>14%</u>

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**FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
MANAGEMENT DISCUSSION AND ANALYSIS
MARCH 31, 2019**

4. OTHER INCOME	Month	Year to Date	Annual Budget	% ACHIEVED
Charter Care and Arts Reach	\$ 30,711	\$ 241,815		
Other Student Activity	4,484	41,675		
Consumable Fees	13,350	62,481		
EarthKeepers		-		
Summer Camp		859		
Food Service Revenues	343	39,306		
Other Miscellaneous		21,674		
Total Other Income	<u>\$ 48,887</u>	<u>\$ 407,810</u>	<u>\$ 550,000</u>	<u>74%</u>

5. INVESTMENTS	Balance at 3/31/2019
CDARS Account:	
Principal	
Accrued Interest	
Subtotal	<u>-</u>
Merrill Lynch Account:	
Cash/Money account	25,502
Government and Agency Securities	474,709
Corporate Bonds	238,150
Blackrock Mutual Fund	181,635
Accrued Interest	3,939
Subtotal	<u>923,935</u>
Total Investments	<u>\$ 923,935</u>

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FRENCH AND MONTESSORI EDUCATION INCORPORATED

Financial Statements

For the Month Ended April 30, 2019

DRAFT

These financial statements have not been subject to an audit, review, or compilation engagement, and no assurance is provided on them. Substantially all of the disclosures, and the statement of cash flows, required by accounting principles generally accepted in the United States of America have been omitted.

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**FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF FINANCIAL POSITION
FOR THE MONTH ENDED APRIL 30, 2019**

ASSETS**CURRENT ASSETS**

Cash and cash equivalents	\$ 493,044
Accounts receivable	548,955
Investments	923,685
Prepaid expenses and other current assets	<u>56,923</u>
Total current assets	2,022,607

PROPERTY AND EQUIPMENT, net	<u>3,770,753</u>
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TOTAL ASSETS	<u>\$ 5,793,360</u>
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LIABILITIES AND NET ASSETS**CURRENT LIABILITIES**

Accounts payable and accrued expenses	\$ 635,347
Accrued salaries and benefits payable	(92,114)
Deferred revenues	<u>8,148</u>
Total current liabilities	551,381

NET ASSETS

Unrestricted net assets	<u>5,241,979</u>
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TOTAL LIABILITIES AND NET ASSETS	<u>\$ 5,793,360</u>
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**FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS AND BUDGET COMPARISON
FOR THE TEN MONTHS ENDED APRIL 30, 2019**

	AUDUBON UPTOWN Actual	AUDUBON GENTILLY Actual	AUDUBON CENTRAL OFFICE Actual	TOTAL	% ACHIEVED OF ANNUAL
REVENUES AND SUPPORT					
MFP revenues	\$ 6,265,472	\$ 959,724	\$ -	\$ 7,225,196	85%
Fee revenues	140,756	54,271	-	195,027	80%
Public grants and program funding	973,434	117,563	-	1,090,997	59%
Private grants and donations	199,207	29,063	-	228,270	15%
Income from investments	51,995	481	-	52,476	95%
Other income	418,510	32,606	-	451,116	82%
Total revenues and support	8,049,374	1,193,708	-	\$ 9,243,082	73%
EXPENSES					
Salaries	\$ 4,410,093	\$ 1,098,352	\$ 611,839	\$ 6,120,284	85%
Benefits	1,572,722	168,450	135,340	1,876,512	78%
Disposal	15,603	3,662	-	19,265	94%
Dues	23,237	1,115	-	24,352	48%
Food service	236,625	67,800	-	304,425	74%
Insurance	151,810	179	-	151,989	68%
Materials	287,752	109,958	3,724	401,434	104%
Purchased services	719,633	145,872	25,324	890,829	99%
Rentals	21,668	1,068	-	22,736	159%
Repairs and maintenance	194,601	31,168	499	226,268	85%
Travel	35,684	132	449	36,265	66%
Utilities	147,396	39,165	7	186,568	59%
Depreciation	63,926	-	-	63,926	59%
Other expenses	20,085	125	-	20,210	18%
Debt Service	-	-	-	-	0%
Student Transportation	46,255	149,029	-	195,284	152%
Total expenses	7,947,090	1,816,075	777,182	10,540,347	83%
CHANGE IN NET ASSETS	\$ 102,284	\$ (622,367)	\$ (777,182)	\$ (1,297,265)	
NET ASSETS - Beginning of period				6,539,239	
NET ASSETS - End of period				\$ 5,241,974	

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FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS AND BUDGET COMPARISON
FOR THE MONTH ENDED APRIL 30, 2019

	AUDUBON UPTOWN Actual	AUDUBON GENTILLY Actual	AUDUBON CENTRAL OFFICE Actual	Total	Budeted
REVENUES AND SUPPORT					
MFP revenues	\$ 633,335	\$ 117,856	\$ -	\$ 751,191	\$ 705,250
Fee revenues	5,148	560	-	5,708	24,480
Public grants and program funding	143,612	38,753	-	182,365	185,183
Private grants and donations	10,811	6,003	-	16,814	151,337
Income from investments	1,164	65	-	1,229	4,583
Other income	41,274	2,006	-	43,280	55,000
Total revenues and support	835,344	165,243	-	1,000,587	1,125,833
EXPENSES					
Salaries	\$ 498,223	\$ 121,671	\$ 54,499	\$ 674,393	\$ 691,407
Benefits	165,246	22,638	14,930	202,814	228,567
Disposal	1,419	277	-	1,696	1,700
Dues	3,565	-	-	3,565	4,250
Food service	29,612	9,397	-	39,009	38,640
Insurance	14,785	-	-	14,785	22,938
Materials	7,874	988	33	8,895	32,044
Purchased services	56,339	27,639	45	84,023	88,117
Rentals	1,926	920	-	2,846	946
Repairs and maintenance	18,066	5,282	-	23,348	22,198
Travel	814	55	449	1,318	4,583
Utilities	11,139	2,265	3	13,407	26,205
Depreciation	6,393	-	-	6,393	9,032
Other expenses	-	-	-	-	9,125
Debt Service	-	-	-	-	7,650
Student Transportation	3,800	15,750	-	19,550	12,838
Total expenses	819,201	206,882	69,959	1,096,042	1,147,193
CHANGE IN NET ASSETS				\$ (95,455)	\$ (21,360)
NET ASSETS - Beginning of month				5,337,432	
NET ASSETS - End of month				<u>\$ 5,241,977</u>	

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FRENCH AND MONTESSORI EDUCATION INCORPORATED
D/B/A AUDUBON CHARTER SCHOOL
STATEMENT OF CASH FLOWS
FOR THE MONTH ENDED APRIL 30, 2019

Cash Flows from Operating Activities

Changes in Net Assets	\$ (95,451)
Adjustments to Reconcile Change in Net Assets to	
Net Cash Provided by Operating Activities	
Net Realized and Unrealized Loss on Investments	(9,463)
Depreciation	6,393
(Increase) Decrease in Assets	-
Accounts Receivable	-
Interest Receivable	-
Prepaid Expenses	13,847
Increase (Decrease) in Liabilities	-
Accounts Payable	371,606
Accrued liabilities	(177,918)
Deferred Revenue	(12,080)
Total Adjustments	<u>192,384</u>
Net Cash Provided by Operating Activities	<u>\$ 96,933</u>

Cash Flows from Investing Activities

Sale of Investments	9,714
Purchases of Fixed Assets	<u>(160,093)</u>
Net Cash Used in Investing Activities	<u>\$ (150,379)</u>

Net Increase in Cash	\$ (53,446)
Cash, Beginning of Period	\$ 546,491
Cash, End of Period	<u>\$ 493,044</u>

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Coversheet

Proposed Budget for 2019-20 year

Section:	IV. Other Business
Item:	A. Proposed Budget for 2019-20 year
Purpose:	Vote
Submitted by:	
Related Material:	19-20 BUDGET PRELIMINARY BUDGET.pdf 19-20 BUDGET ASSUMPTIONS (1).pdf

Audubon Schools
Comparative Income Statements
2019 - 2020 Proposed Budget Schedule

	AUDUBON UPTOWN FY 2020	AUDUBON GENTILLY FY 2020	AUDUBON CENTRAL OFFICE FY 2020	TOTAL FY 2020	PRIOR YEARS BUDGET
REVENUES AND SUPPORT					
MFP revenues	7,412,430	1,560,676	-	8,973,106	8,463,000
Fee revenues	214,200	158,100	-	372,300	244,800
Public grants and program funding	1,354,480	703,300	-	2,057,780	1,851,826
Private grants and donations	436,000	83,000	50,000	569,000	1,513,367
Income from investments	15,000	-	-	15,000	55,000
Other income	459,368	50,000	-	509,368	550,000
Released from restrictions	114,000	89,000	150,000	353,000	
Total revenues and support	10,005,478	2,644,076	200,000	12,849,554	12,677,993
EXPENSES					
Salaries	5,165,302	1,457,127	745,500	7,367,929	7,213,057
Benefits	1,693,000	259,133	253,470	2,205,603	2,391,769
Disposal	15,000	7,800	-	22,800	20,400
Dues	2,500	77,500	40,000	120,000	51,000
Food service	310,000	145,000	-	455,000	410,091
Insurance	150,000	80,000	-	230,000	223,600
Materials	312,878	69,642	39,290	421,811	384,530
Purchased services	581,499	308,214	67,500	957,212	895,341
Rentals	20,500	2,500	2,500	25,500	14,311
Repairs and maintenance	173,000	50,200	-	223,200	266,380
Travel	32,000	8,500	4,000	44,500	55,000
Utilities	188,500	55,500	4,500	248,500	314,460
Depreciation	75,000	100,000	-	175,000	108,380
Other expenses	19,000	3,500	-	22,500	109,500
Debt Service	-	132,000	-	132,000	91,800
Student Transportation	40,000	158,000	-	198,000	128,375
Total expenses	8,778,178	2,914,616	1,156,760	12,849,554	12,677,993
Surplus (Defecit)	\$ 1,227,300	\$ (270,540)	\$ (956,760)	\$ 0	\$ (0)

Revenues**Major Assumption Drivers Overview**

MFP Revenues	Based on 809 students @ \$9162 per student Uptown & 160 Students @ \$9754 Audubon Gentilly
Fee Revenues	Based at 42 students @ Audubon Uptown & 31 students @ Audubon Gentilly \$5100 per student
Grants & Program Funding	CODOFIL teachers funding and stipends of \$420,000 in F.A.T.S. \$40,000K ESCADRILLE PAYMENTS Food Claims Reimbursements \$385,000 Title I \$269,000 Uptown \$56,000 Gentilly IDEA B \$194,000 Uptown \$40,000 Gentilly LA 4 \$151,000 Uptown , \$87,300 Gentilly Assuming \$350,000 Historic Tax Credits Reimbursement Audubon Gentilly for Phase I and Phase 2A
Private Grants and Donations	In Kind Donations Chinese Teachers \$129,000 FUNDRAISING \$350,000 Uptown \$40,000 Gentilly \$50,000 Central Office
Income from Investments	Interest Income only removed CD interest
Other Income	Student Activity Income and Income from Meals based on projections.

Expenses

Salaries	Projected Staffing Level
Benefits	Combined Fringe Benefit Rate of 30% of salaries
Disposal	Based on current projections
Dues	\$29k projection for GNOCCS and \$9k for Montessori and AEFE dues.
Food Service	Based on current projections, assuming break even on food service program.
Insurance	Based on current projections including OPSB property insurance
Materials	\$78,000 in instructional supplies increased due to new Math curriculum adoption \$80,000 in instructional technology and licenses
Purchased Services	2% of MFP cost \$179,000, Chinese Teacher \$129,000 kind donations Chinese Teachers \$77,000 for NOPD for carpool \$57,000 Young Audiences Gentilly Arts and After School Program
Rentals	Based on current projections and \$19,000 copier rental
Repairs & Maintenance	Empire \$127,000 for maintenance, \$25,000 Ground Force Lawn Services
Travel	Based on current projections
Utilities	Based on current projections decreasing gentilly from prior year estimate
Depreciation	Based on current projections of fixed asset depreciation
Other Expenses	Student Activity Field Trip Buses, and Misc. flow through accounts
Debt Service	Interest only for Audubon Gentilly renovation for first 2 years WSJ Prime rate 5.5%
Transportation	\$155,000 for transportation for Gentilly, and projections for bus tokens and student field trip transportation

Coversheet

Review of the Form 990

Section:	IV. Other Business
Item:	B. Review of the Form 990
Purpose:	Discuss
Submitted by:	
Related Material:	Audubon Draft 990.PDF AUDUBON 8879.PDF

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 9.x products and later products, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

CLIENT'S COPY

DRAFT

LAPORTE CPAS & BUSINESS ADVISORS
5100 VILLAGE WALK, SUITE 300
COVINGTON, LA 70433

APRIL 25, 2019

FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL
428 BROADWAY STREET
NEW ORLEANS, LA 70118
ATTENTION: JUSTIN ANDERSON

DEAR JUSTIN,

ENCLOSED IS THE ORGANIZATION'S 2017 EXEMPT ORGANIZATION
RETURN.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990 RETURN:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU
WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE
SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL
THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A
PAPER COPY OF THE RETURN TO THE IRS.

PLEASE REVIEW THE RETURN FOR COMPLETENESS AND ACCURACY.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE
CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX
RETURN.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST
THAT YOU RETAIN THIS COPY INDEFINITELY.

SINCERELY,

CODY GUTTIERREZ, CPA
SENIOR MANAGER

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING**JUNE 30, 2018**

Prepared for	FRENCH AND MONTESSORI EDUCATION INC. DBA AUDUBON CHARTER SCHOOL 428 BROADWAY STREET NEW ORLEANS, LA 70118
Prepared by	LAPORTE, APAC 5100 VILLAGE WALK, SUITE 300 COVINGTON, LA 70433
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning JUL 1, 2017, and ending JUN 30, 2018**2017**Department of the Treasury
Internal Revenue Service▶ **Do not send to the IRS. Keep for your records.**▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

**FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL**

Employer identification number

**** - ***4026**

Name and title of officer

**JAVIER JALICE
VICE CHAIR****Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>11,724,871.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize LAPORTE, APAC

ERO firm name

to enter my PIN 00854Enter five numbers, but
do not enter all zeros

as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

72583970005

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2017)

723051 10-11-17

14560425 755639 00854

2017 05050 FRENCH AND MONTESSORI EDUCA 00854__1

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28 of 68

Form **990**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)

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

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

OMB No. 1545-0047

2017Open to Public
Inspection**A** For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018****B** Check if applicable:

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

C Name of organization
**FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

428 BROADWAY STREET

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

NEW ORLEANS, LA 70118**F** Name and address of principal officer: **JAVIER JALICE
SAME AS C ABOVE****D** Employer identification number**** - ***4026****E** Telephone number
(504) 324-7103**G** Gross receipts \$ **12,086,472.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.AUDUBONCHARTER.COM****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **2005** **M** State of legal domicile: **LA****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SCHOOL PROVIDING MONTESSORI AND FRENCH EDUCATION FOR STUDENTS IN GRADES PRE-KINDERGARTEN THROUGH 8TH
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 12
	4	Number of independent voting members of the governing body (Part VI, line 1b) 12
	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a) 175
	6	Total number of volunteers (estimate if necessary) 500
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.
7b	Net unrelated business taxable income from Form 990-T, line 34 0.	
Revenue	8	Contributions and grants (Part VIII, line 1h) 9,036,134.
	9	Program service revenue (Part VIII, line 2g) 718,423.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 86,982.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 23,911.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9,865,450.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0.
	14	Benefits paid to or for members (Part IX, column (A), line 4) 0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 6,780,132.
	16a	Professional fundraising fees (Part IX, column (A), line 11e) 0.
	b	Total fundraising expenses (Part IX, column (D), line 25) 0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,273,317.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,053,449.
19	Revenue less expenses. Subtract line 18 from line 12 812,001.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 6,026,729.
	21	Total liabilities (Part X, line 26) 311,768.
	22	Net assets or fund balances. Subtract line 21 from line 20 5,714,961.

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	JAVIER JALICE, VICE CHAIR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name STEVEN C. GUTTIERREZ, CPA	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P01467416
	Firm's name ▶ LAPORTE, APAC	Firm's EIN ▶ ** - ***8864			
	Firm's address ▶ 5100 VILLAGE WALK, SUITE 300 COVINGTON, LA 70433	Phone no. 985-892-5850			

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

FRENCH AND MONTESSORI EDUCATION INC.

DBA AUDUBON CHARTER SCHOOL

-*4026 Page 2

Form 990 (2017)

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

AUDUBON CHARTER SCHOOL IS DEDICATED TO THE DEVELOPMENT OF CREATIVE, CONSTRUCTIVE AND DISCIPLINED LEARNERS. THIS OBJECTIVE IS ACHIEVED THROUGH UNIQUELY INNOVATIVE EDUCATIONAL PROGRAMS.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 9,992,343. including grants of \$) (Revenue \$ 562,002.)

WITH ITS MONTESSORI AND FRENCH PROGRAMS, AUDUBON CHARTER SCHOOL HAS CREATED AN ADVANCED LEARNING ENVIRONMENT DRIVEN BY CURRICULA DESIGNED TO DRAW HIGHLY-MOTIVATED, HIGH-ACHIEVING STUDENTS. AUDUBON CHARTER SCHOOL TEACHES PRE-KINDERGARTEN THROUGH 8TH GRADE. 867 STUDENTS ATTENDED DURING THE 2017 - 2018 SCHOOL YEAR.

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

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

4e Total program service expenses **9,992,343.**

Form 990 (2017)

FRENCH AND MONTESSORI EDUCATION INC.

DBA AUDUBON CHARTER SCHOOL

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Form 990 (2017)

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b X	
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13 X	
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 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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 foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X

Form 990 (2017)

FRENCH AND MONTESSORI EDUCATION INC.

DBA AUDUBON CHARTER SCHOOL

** - ***4026 Page 4

Form 990 (2017)

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		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		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		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		X
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		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		X
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 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
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		X
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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2017)

FRENCH AND MONTESSORI EDUCATION INC.

DBA AUDUBON CHARTER SCHOOL

-*4026

Page 5

Form 990 (2017)

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

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

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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

☒**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	12													
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		12												
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									X
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							X
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:														
a 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

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

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a 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													
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.															
12a Did the organization have a written conflict of interest policy? If "No," go to line 13					12a									X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?						12b								X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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					X	
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?															
a The organization's CEO, Executive Director, or top management official										15a				X	
b Other officers or key employees of the organization											15b			X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).															
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?												16a			X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?													16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: **NONE**

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

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **JUSTIN C. ANDERSON - (504) 274-1952**
428 BROADWAY STREET, NEW ORLEANS, LA 70118

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ERICA MURRAY CHAIRWOMAN	0.50	X		X				0.	0.	0.
(2) CALVIN TREGRE TREASURER	0.50	X		X				0.	0.	0.
(3) EVA ALITO SECRETARY	0.50	X		X				0.	0.	0.
(4) JAVIER JALICE VICE CHAIR	0.50	X		X				0.	0.	0.
(5) DEREK BARDELL MEMBER	0.50	X						0.	0.	0.
(6) BRENDAN CONNICK MEMBER	0.50	X						0.	0.	0.
(7) RAMONA FERNANDEZ MEMBER	0.50	X						0.	0.	0.
(8) BYRON LILLY MEMBER	0.50	X						0.	0.	0.
(9) RACHEL VAN VORHEES KIRSCHMAN MEMBER	0.50	X						0.	0.	0.
(10) MELISSA RUSSELL MEMBER	0.50	X						0.	0.	0.
(11) DORCAS OMAJOLA MEMBER	0.50	X						0.	0.	0.
(12) DANIEL HELD MEMBER	0.50	X						0.	0.	0.
(13) LATOYE BROWN CEO	50.00			X				113,780.	0.	30,300.
(14) JUSTIN ANDERSON DIRECTOR OF FINANCE	50.00			X				75,459.	0.	20,204.

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[illegible]

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	1
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		Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

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

(A) Name and business address	(B) Description of services	(C) Compensation
COLMEX CONSTRUCTION 4334 EARHARD BLVD, NEW ORLEANS, LA 70125	CONSTRUCTION CONTRACTOR	688,209.
COMPASS GROUP P.O. BOX 417632, BOSTON, MA 02241	FOOD SERVICES	267,828.
MATHES BRIERRE ARCHITECTS, 201 ST CHARLES AVENUE, SUITE 4100, NEW ORLEANS, LA 70170	ARCHITECT SERVICES	241,045.
CITY OF NEW ORLEANS 1300 PERDIDO STREET, NEW ORLEANS, LA 70122	POLICE SERVICES	128,777.
EMPIRE CUSTODIAL SERVICES 1820 L&A RD., METAIRIE, LA 70001	MAINTENANCE AND CUSTODIAL	112,132.

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	5
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Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	8,834,918.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,181,542.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			11,016,460.			
Program Service Revenue	2 a STUDENT ACTIVITY PROGRAMS	Business Code	611710	288,388.	288,388.		
	b TUITION REVENUE		611710	143,404.	143,404.		
	c AFTER SCHOOL CARE		611710	105,822.	105,822.		
	d SCHOOL FOOD PROGRAM		611710	20,243.	20,243.		
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			557,857.			
	3 Investment income (including dividends, interest, and other similar amounts)			72,142.			72,142.
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
Other Revenue	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			60,317.			60,317.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	28,555.				
	b Less: direct expenses	b	14,605.				
	c Net income or (loss) from fundraising events			13,950.			13,950.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue			Business Code			
11 a MISCELLANEOUS		611710	4,145.	4,145.			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			4,145.				
12 Total revenue. See instructions.			11,724,871.	562,002.	0.	146,409.	

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Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☒ **X**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	253,046.	103,835.	149,211.	
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	5,948,450.	5,772,056.	176,394.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,487,645.	1,432,146.	55,499.	
9 Other employee benefits	450,663.	439,548.	11,115.	
10 Payroll taxes	123,732.	116,105.	7,627.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	25,750.		25,750.	
d Lobbying				
e 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 O.)	1,227,495.	862,211.	365,284.	
12 Advertising and promotion	8,440.	8,315.	125.	
13 Office expenses	327,292.	318,223.	9,069.	
14 Information technology				
15 Royalties				
16 Occupancy	169,211.	169,211.		
17 Travel	98,074.	97,962.	112.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	80,726.	80,726.		
23 Insurance	31,273.	28,512.	2,761.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EDUCATIONAL SUPPLIES AND	359,535.	316,249.	43,286.	
b REPAIRS AND MAINTENANCE	178,987.	178,987.		
c DUES AND FEES	63,253.	55,975.	7,278.	
d MISCELLANEOUS	-20,285.	12,282.	-32,567.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,813,287.	9,992,343.	820,944.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3,308,430.	1	2,152,955.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	341,902.
	4 Accounts receivable, net	524,660.	4	851,198.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 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		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	12,383.	9	115,209.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,429,077.		
	b Less: accumulated depreciation	10b 493,093.	10c	1,935,984.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	1,366,119.	12	1,397,477.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	6,026,729.	16	6,794,725.	
Liabilities	17 Accounts payable and accrued expenses	219,629.	17	160,663.
	18 Grants payable		18	
	19 Deferred revenue	92,139.	19	94,341.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	311,768.	26	255,004.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,714,961.	27	5,797,969.
	28 Temporarily restricted net assets		28	741,752.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	5,714,961.	33	6,539,721.
	34 Total liabilities and net assets/fund balances	6,026,729.	34	6,794,725.

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,724,871.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,813,287.
3	Revenue less expenses. Subtract line 2 from line 1	3	911,584.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,714,961.
5	Net unrealized gains (losses) on investments	5	-86,824.
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	6,539,721.

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

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

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Schedule A (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization'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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

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

Section C. Computation of Public Support Percentage

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

Schedule A (Form 990 or 990-EZ) 2017

FRENCH AND MONTESSORI EDUCATION INC.

Schedule A (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization'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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

FRENCH AND MONTESSORI EDUCATION INC.

Schedule A (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
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 12a or 12b 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
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 or 990-EZ).		
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 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

FRENCH AND MONTESSORI EDUCATION INC.

Schedule A (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

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Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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		
c 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		

Section 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		

Section 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		

Section D. All 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described 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		

Section 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 <input type="checkbox"/>	The organization satisfied the Activities Test. Complete line 2 below.	
b <input type="checkbox"/>	The organization is the parent of each of its supported organizations. Complete line 3 below.	
c <input type="checkbox"/>	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).	
2 Activities Test. Answer (a) and (b) below.		
a	Yes	No
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	Yes	No
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 activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a	Yes	No
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 Part VI .		
3a		
b	Yes	No
Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
3b		

FRENCH AND MONTESSORI EDUCATION INC.

Schedule A (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	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	

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

Schedule A (Form 990 or 990-EZ) 2017

FRENCH AND MONTESSORI EDUCATION INC.

Schedule A (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified 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 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

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

Schedule A (Form 990 or 990-EZ) 2017

FRENCH AND MONTESSORI EDUCATION INC.

Schedule A (Form 990 or 990-EZ) 2017 **DBA AUDUBON CHARTER SCHOOL**

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Part VI

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

DRAFT

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

OMB No. 1545-0047

2017**Name of the organization**FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL**Employer identification number**

-*4026

Organization type(check one):**Filers of:****Section:**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 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) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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Name of organization FRENCH AND MONTESSORI EDUCATION INC. DBA AUDUBON CHARTER SCHOOL	Employer identification number ** - ***4026
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PRO BONO PUBLICO FOUNDATION P.O. BOX 531024 NEW ORLEANS, LA 70153	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	KELLER FAMILY FOUNDATION 1100 POYDRAS STREET, SUITE 1502 NEW ORLEANS, LA 70163	\$ 17,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ROSAMARY FOUNDATION, C/O CRESCENT CAPITAL CONSULTING, LLC 1100 POYDRAS STREET, SUITE 1502 NEW ORLEANS, LA 70163	\$ 34,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	CHARLES AND HELEN SCHWAB FOUNDATION 201 MISSION STREET, SUITE 1950 SAN FRANCISCO, CA 94105	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	CHARTER SCHOOL GROWTH FUND 10901 W. 120TH AVENUE, SUITE 450 BROOMFIELD, CO 80021	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	WALTON FAMILY FOUNDATION P.O. BOX 2030 BENTONVILLE, AR 72712	\$ 325,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

723452 11-01-17

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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Name of organization
FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL

Employer identification number
**** - ***4026**

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	W.K. KELLOGG FOUNDATION 1 MICHIGAN AVE EAST BATTLE CREEK, MI 49017	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	NEW SCHOOLS NEW ORLEANS 1555 POYDRAS STREET NEW ORLEANS, LA 70112	\$ 18,030.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

723452 11-01-17

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL

Employer identification number

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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

[illegible]

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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Name of organization

FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL

Employer identification number

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Part III

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 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.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(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" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**▶ **Attach to Form 990.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2017**Open to Public Inspection****Name of the organization** FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL**Employer identification number**
-*4026**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

Schedule D (Form 990) 2017

732051 10-09-17

FRENCH AND MONTESSORI EDUCATION INC.

DBA AUDUBON CHARTER SCHOOL

-*4026 Page 2

Schedule D (Form 990) 2017

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibitiond ☐ Loan or exchange programsb ☐ Scholarly researche ☐ Other _____c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ %b Permanent endowment ☐ %c Temporarily restricted endowment ☐ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		796,451.	70,800.	725,651.
d Equipment		498,524.	422,293.	76,231.
e Other		1,134,102.		1,134,102.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,935,984.

Schedule D (Form 990) 2017

FRENCH AND MONTESSORI EDUCATION INC.**DBA AUDUBON CHARTER SCHOOL**

Schedule D (Form 990) 2017

**** - ***4026** Page **3****Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) BLACKROCK INVESTMENTS	865,808.	END-OF-YEAR MARKET VALUE
(B) FIRST NBC CDARS	531,669.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	1,397,477.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

Schedule D (Form 990) 2017

FRENCH AND MONTESSORI EDUCATION INC.

DBA AUDUBON CHARTER SCHOOL

-*4026 Page 4

Schedule D (Form 990) 2017

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

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

1	Total revenue, gains, and other support per audited financial statements	1	11,738,652.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-86,824.
b	Donated services and use of facilities	2b	86,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	-824.
3	Subtract line 2e from line 1	3	11,739,476.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-14,605.
c	Add lines 4a and 4b	4c	-14,605.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	11,724,871.

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

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

1	Total expenses and losses per audited financial statements	1	10,913,892.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	86,000.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	14,605.
e	Add lines 2a through 2d	2e	100,605.
3	Subtract line 2e from line 1	3	10,813,287.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	10,813,287.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE SCHOOL IS RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS A SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE SCHOOL'S TAX-EXEMPT PURPOSE IS SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME.

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ENTITY IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN.

THE SCHOOL BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND MANAGEMENT HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX

FRENCH AND MONTESSORI EDUCATION INC.

Schedule D (Form 990) 2017

DBA AUDUBON CHARTER SCHOOL

-*4026 Page 5

Part XIII Supplemental Information (continued)

POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

PENALTIES AND INTEREST ASSESSED BY INCOME TAXING AUTHORITIES, IF ANY, ARE INCLUDED IN INCOME TAX EXPENSE

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES -14,605.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES 14,605.

DRAFT

SCHEDULE E
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Schools**▶ **Complete if the organization answered "Yes" on Form 990,
Part IV, line 13, or Form 990-EZ, Part VI, line 48.**▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2017**Open to Public
Inspection**Name of the organization **FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL**Employer identification number
****-***4026****Part I**

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

YES NO

1

X

2

X

3

X

4a

X

4b

X

4c

X

4d

X

5a

X

5b

X

5c

X

5d

X

5e

X

5f

X

5g

X

5h

X

6a

X

6b

X

7

X

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

Schedule E (Form 990 or 990-EZ) 2017

FRENCH AND MONTESSORI EDUCATION INC.

Schedule E (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

-*4026 Page 2

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.

Also provide any other additional information.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE SCHOOL'S PRIMARY SOURCE OF FUNDING IS THROUGH THE STATE PUBLIC SCHOOL FUND AND THE ORLEANS PARISH SCHOOL BOARD. THE SCHOOL RECEIVED \$7,460,373 FROM THE STATE AND OPSB BASED ON ELIGIBLE STUDENTS IN ATTENDANCE ON A MONTHLY BASIS. STATE AND FEDERAL GRANTS ARE ON A COST REIMBURSEMENT BASIS. AN ACCRUAL IS MADE WHEN ELIGIBLE EXPENSES ARE INCURRED. THE ORGANIZATION RECEIVED 64% OF ITS REVENUES IN THE YEAR ENDED JUNE 30, 2018, FROM THE LOUISIANA DEPARTMENT OF EDUCATION, SUBJECT TO ITS CHARTER SCHOOL CONTRACTS WITH THE ORLEANS PARISH SCHOOL BOARD, 4% FROM OTHER LOUISIANA STATE PROGRAMS, AND 7% OF ITS FUNDING FROM THE FEDERAL GOVERNMENT.

FRENCH AND MONTESSORI EDUCATION INC.

Schedule G (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

-*4026 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		CITY PARK AMUSEMENT NIGHT (event type)	AT THE COOL ZOO (event type)	1 (total number)	
Revenue	1 Gross receipts	14,805.	8,659.	5,091.	28,555.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	14,805.	8,659.	5,091.	28,555.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	6,305.	4,500.		10,805.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses			3,800.	3,800.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				14,605.
	11 Net income summary. Subtract line 10 from line 3, column (d)				13,950.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

FRENCH AND MONTESSORI EDUCATION INC.

Schedule G (Form 990 or 990-EZ) 2017 DBA AUDUBON CHARTER SCHOOL

-*4026 Page 3

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

- 16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

FRENCH AND MONTESSORI EDUCATION INC.

Schedule G (Form 990 or 990-EZ)

DBA AUDUBON CHARTER SCHOOL

** - ***4026 Page 4

Part IV Supplemental Information (continued)

DRAFT

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017Open to Public
Inspection

Name of the organization

FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOLEmployer identification number
-*4026

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

GRADE. THE FORMATION OF THE SCHOOL WAS IN RESPONSE TO THE DEVASTATION
LEFT BY HURRICANE KATRINA.

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

THE CHAIRMAN AND THE BOARD OF DIRECTORS WILL REVIEW AND APPROVE THE TAX
RETURN BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

AS PART OF THE ANNUAL AUDIT PROCESS, OFFICERS AND EMPLOYEES MUST DISCLOSE
ANY INTERESTS THAT COULD GIVE RISE TO CONFLICTS. BOARD MEMBERS READ AND
SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

THE BUDGET AND FINANCE COMMITTEE IS IN CHARGE OF BUDGET DECISIONS,
INCLUDING DECIDING COMPENSATION FOR ALL EMPLOYEES. THE BUDGET AND FINANCE
COMMITTEE USES SALARY AMOUNTS FROM SIMILAR POSITIONS AT SURROUNDING SCHOOLS
AS A BENCHMARK IN CHOOSING AN APPROPRIATE SALARY. THE COMMITTEE MAKES ITS
INITIAL DECISIONS AND THEN IT GOES TO THE BOARD OF DIRECTORS FOR APPROVAL.
THE BOARD OF DIRECTORS ARE INDEPENDENT OF THE SCHOOL AND RECEIVE NO
COMPENSATION FROM THE SCHOOL. ALL DISCUSSIONS AND DECISIONS ARE DOCUMENTED
IN THE BOARD'S MINUTES.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THROUGH PUBLIC

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

Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

Page 2

Name of the organization **FRENCH AND MONTESSORI EDUCATION INC.**
DBA AUDUBON CHARTER SCHOOL

Employer identification number
**** - ***4026**

RECORDS REQUESTS.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	463,709.
MANAGEMENT AND GENERAL EXPENSES	365,284.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	828,993.

FOOD SERVICES:

PROGRAM SERVICE EXPENSES	270,775.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	270,775.

SECURITY SERVICES:

PROGRAM SERVICE EXPENSES	127,727.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	127,727.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,227,495.
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Form **8868**
(Rev. January 2017)Department of the Treasury
Internal Revenue Service**Application for Automatic Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

► **File a separate application for each return.**► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions. FRENCH AND MONTESSORI EDUCATION INC. DBA AUDUBON CHARTER SCHOOL	Employer identification number (EIN) or **-***4026
	Number, street, and room or suite no. If a P.O. box, see instructions. 428 BROADWAY STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW ORLEANS, LA 70118	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JUSTIN C. ANDERSON

- The books are in the care of ► **428 BROADWAY STREET - NEW ORLEANS, LA 70118**

Telephone No. ► **(504) 274-1952**

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year _____ or► ☒ tax year beginning **JUL 1, 2017**, and ending **JUN 30, 2018**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.**Form **8868** (Rev. 1-2017)

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning JUL 1, 2017, and ending JUN 30, 2018**2017**Department of the Treasury
Internal Revenue Service▶ **Do not send to the IRS. Keep for your records.**▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

**FRENCH AND MONTESSORI EDUCATION INC.
DBA AUDUBON CHARTER SCHOOL**

Employer identification number

20-3694026

Name and title of officer

**JAVIER JALICE
VICE CHAIR****Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>11,724,871.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize LAPORTE, APAC

ERO firm name

to enter my PIN 00854Enter five numbers, but
do not enter all zeros

as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

72583970005

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2017)