



## The Exploris School

### The Exploris School Board Regular Monthly Meeting

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#### Date and Time

Thursday May 25, 2023 at 4:30 PM EDT

#### Location

The Exploris School: Elementary Campus  
17 S Swain St, Raleigh, NC 27601, USA  
5th Grade Classroom

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#### Agenda

|   | Purpose         | Presenter      | Time           |
|---|-----------------|----------------|----------------|
| <b>I. Opening Items</b>   |                 |                | <b>4:30 PM</b> |
| <b>A.</b> Record Attendance   |                 | Eric Grunden   | 1 m            |
| <b>B.</b> Call the Meeting to Order   |                 | Steven Darroch | 1 m            |
| <b>C.</b> Approve Minutes   | Approve Minutes | Eric Grunden   | 2 m            |
| Approve minutes for The Exploris School Board Regular Monthly Meeting on April 27, 2023 |                 |                |                |
| <b>D.</b> Public Comment  |                 | Steven Darroch | 15 m           |
| PUBLIC COMMENT  |                 |                |                |

Fifteen minutes will be allocated on the agenda for public input at each meeting.  
Additional time may be added at the discretion of the Chair.

|   | Purpose | Presenter | Time |
|---|---------|-----------|------|
| Public comment may be oral, in person, or in written form to be read by the Chair.<br>Public comment is limited to no more than 3 minutes per person.<br>It is recommended that public comment be written out and provided to the board following the three minutes to ensure the entire message is heard by the board. |         |           |      |
| Each speaker will clearly state their full name and county of residence.  |         |           |      |
| All public comment should be factual and should not include personally identifiable information of students or personnel in order to maintain confidentiality. Speakers should avoid using names of students or staff and maintain confidentiality and privacy standards.   |         |           |      |
| All public comments will be taken under advisement by the Board, but will not elicit an immediate written or spoken response. The names of persons providing public comment and a brief summary of topics or input will be included in the meeting minutes published.   |         |           |      |
| A response will be provided to the stakeholder within seven (7) days.   |         |           |      |
| Specific issues about a particular student or teacher should be addressed to the elementary or middle school director, rather than the Board of Directors.  |         |           |      |

|     |   |         |                  |         |
|-----|---|---------|------------------|---------|
| II. | Committee Reports   |         |                  | 4:49 PM |
| A.  | Governance  | FYI     | Ryan Boyce       | 5 m     |
| B.  | Finance   | Vote    | Koren Morgan     | 10 m    |
|     | <ul style="list-style-type: none"><li>• Monthly Financial Reports</li><li>• ESSER Monitoring Review Final Report and Closing Letter</li></ul> |         |                  |         |
| C.  | Educational Excellence  | FYI     | Eric Grunden     | 5 m     |
| D.  | Director Evaluation & Support   | Discuss | Steven Darroch   | 5 m     |
| E.  | Facilities  | Discuss | Theo Kingsberry  | 5 m     |
| F.  | Kaizen  | FYI     | Cori Greer-Banks | 5 m     |
|     | Kaizen leaders will give an update to the Board.  |         |                  |         |

|  | Purpose | Presenter       | Time           |
|--|---------|-----------------|----------------|
| <b>III. Meeting Items</b>  |         |                 | <b>5:24 PM</b> |
| <b>A. Directors Report</b>   | FYI     | Deborah Brown   | 5 m            |
| <ul style="list-style-type: none"> <li>• Monthly Report &amp; Updates (The Directors Report will not be made verbally during meetings. Please review the written report prior to the meeting. We will answer questions and provide critical updates and vote on any requested items.)</li> </ul> |         |                 |                |
| <b>B. Board Development: Exploris Coaching Structures</b>  | FYI     | Josh Corbat     | 15 m           |
| <ul style="list-style-type: none"> <li>• Michelle Parkerson and Leah Ruto will present to the Board about our School Improvement and Instructional Coaching structures.</li> </ul>   |         |                 |                |
| <b>C. Board Business</b>   | Discuss | Steven Darroch  | 5 m            |
| <ul style="list-style-type: none"> <li>• General Discussions</li> <li>• Strategy Refresh Working Group</li> </ul>  |         |                 |                |
| <b>D. Calendar Modification: Eid al Fitr Holiday</b>   | Vote    | Josh Corbat     | 3 m            |
| <ul style="list-style-type: none"> <li>• The date for Eid al Fitr has recently been settled. We are requesting the Board to vote to move the Eid al Fitr holiday from <b>Wednesday, April 10, 2024</b> to <b>Tuesday, April 9, 2024</b>. No other changes are requested at this time.</li> </ul> |         |                 |                |
| <b>IV. Closed Session</b>  |         |                 | <b>5:52 PM</b> |
| <b>A. Facilities &amp; Legal Items</b>   | Discuss | Theo Kingsberry | 10 m           |
| <ul style="list-style-type: none"> <li>• Updates on Facilities</li> </ul>  |         |                 |                |
| <b>V. Closing Items</b>  |         |                 | <b>6:02 PM</b> |
| <b>A. Adjourn Meeting</b>  | Vote    |                 |                |

# Coversheet

## Approve Minutes

**Section:** I. Opening Items  
**Item:** C. Approve Minutes  
**Purpose:** Approve Minutes  
**Submitted by:**

**Related Material:**

Minutes for The Exploris School Board Regular Monthly Meeting on April 27, 2023

APPROVED



## The Exploris School

### Minutes

#### The Exploris School Board Regular Monthly Meeting

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##### **Date and Time**

Thursday April 27, 2023 at 4:30 PM

##### **Location**

The Exploris School: Elementary Campus  
17 S Swain St, Raleigh, NC 27601, USA  
5th Grade Classroom

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##### **Directors Present**

D. Deaton, E. Grunden, M. Townley, R. Boyce (remote), S. Carothers, S. Darroch

##### **Directors Absent**

A. Rodriguez, E. Buchan, T. Kingsberry

##### **Ex Officio Members Present**

D. Brown, E. Burton, J. Corbat

##### **Non Voting Members Present**

D. Brown, E. Burton, J. Corbat

##### **Guests Present**

K. Morgan

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#### **I. Opening Items**

**A.**

## Record Attendance

### B. Call the Meeting to Order

S. Darroch called a meeting of the board of directors of The Exploris School to order on Thursday Apr 27, 2023 at 4:32 PM.

### C. Approve Minutes

E. Grunden made a motion to approve the minutes from The Exploris School Board Regular Monthly Meeting on 03-23-23.

D. Deaton seconded the motion.

The board **VOTED** unanimously to approve the motion.

### D. Public Comment

## II. Committee Reports

### A. Governance

R. Boyce made a motion to approve revised bylaws.

E. Grunden seconded the motion.

The board **VOTED** unanimously to approve the motion.

### B. Finance

M. Townley made a motion to accept finance reports as presented.

D. Deaton seconded the motion.

The board **VOTED** unanimously to approve the motion.

### C. Educational Excellence

### D. Director Evaluation & Support

### E. Facilities

### F. Kaizen

## III. Meeting Items

### A. Directors Report

M. Townley made a motion to approve hire of an elementary teacher candidate, Martin Smith.

S. Carothers seconded the motion.

What grade level? 4th.

The board **VOTED** unanimously to approve the motion.

### B.

## Board Development: BoardOnTrack Check-in

### C. Board Business

Recommend to the Governance Committee to examine term structure among board members and board composition so that rotation among classes is sustainable.

D. Deaton made a motion to extend terms of Steven Darroch and Alannah Rodriguez temporarily until a new arrangement can be made at the next board meeting.

S. Carothers seconded the motion.

Do the board bylaws include term limits? They have been removed from the bylaws because removal is still possible by the board in the event that a board member is not fulfilling their duties.

The board **VOTED** unanimously to approve the motion.

M. Townley made a motion to Appoint Eric Grunden, Dana Deaton, Ryan Boyce as the committee to evaluate a grievance that has been submitted to the board.

S. Carothers seconded the motion.

The board **VOTED** unanimously to approve the motion.

### IV. Closed Session

#### A. Facilities & Legal Items

E. Grunden made a motion to enter closed session to discuss real estate matters.

S. Carothers seconded the motion.

The board **VOTED** unanimously to approve the motion.

M. Townley made a motion to exit closed session.

D. Deaton seconded the motion.

The board **VOTED** unanimously to approve the motion.

### V. Closing Items

#### A. Adjourn Meeting

There being no further business to be transacted, and upon motion duly made, seconded and approved, the meeting was adjourned at 5:41 PM.

Respectfully Submitted,

D. Deaton

# Coversheet

## Governance

|                          |   |
|--------------------------|---|
| <b>Section:</b>          | II. Committee Reports                     |
| <b>Item:</b>             | A. Governance                             |
| <b>Purpose:</b>          | FYI                                       |
| <b>Submitted by:</b>     |   |
| <b>Related Material:</b> | Exploris School Board Members & Terms.pdf |



## Exploris School Board 2022-2023

**Yellow**= Terms end in June 2023

**Blue**= Terms end in June 2024

**Pink**= Terms end in July 2024

### Board Bylaws:

- set # of Board members at 9-14 seats
- No term limits
  - Staff rep is a one year position voted on by staff annually
  - PTO rep is filled by the current PTO Chair

| NAME              | TERM   | Skills & Background                      | Notes           | Contact Info  |
|-------------------|--|--|-----------------|---|
| Alannah Rodriguez | Feb 01, 2020 - June 30, 2023 (1st) (current) | Finance                                  | Board Treasurer | 6816 Stevens Oaks Drive<br>Garner, NC 27529<br><br>(484)-798-3130 |
| Cori Greer-Banks  | Jul 01, 2021 - June 30, 2023                 |  | Staff rep       | 1024 Chapanoke Road<br>Raleigh, NC 27603<br>919.352.6352          |
| Steven Darroch    | Feb 01, 2020 - June 30, 2023 (1st) (current) | Finance, IT, Risk Management, Governance | Board Chair     | 407 Cutler St<br>Raleigh, NC 27603<br>919-807-9327                |
| Stacey Carothers  | Aug 2022 - June 2023                         |  | PTO President   |   |
| Dana Deaton       | Aug 2022 - June 2024                         | Education; Communication                 | Communication   |   |
| Ed Buchan         | July 2021-2024 (1st) (Current)               | City Planning; engineering               | Board Secretary | 919-996-3471  |

|   |   |                            |  |  |
|---|---|----------------------------|--|--|
| Ryan Boyce  | October 21- July 24   | Education Law<br>Education | Educational Excellence                     |  |
| Mark Townley                                      | October 21- July 24   | Education                  | Educational Excellence                     |  |
| Eric Grunden                                      | October 21- July 24   | Education                  | Board Vice Chair<br>Educational Excellence |  |
| Theo Kingsberry                                   | October 21-July 24 (2nd term)<br>(First term was Jul 01, 2018 - Jun 30, 2021) | Facilities                 | Facilities                                 |  |
| Deb Brown   |   |                            | MS Director                                |  |
| Ethan Burton                                      |   |                            | ES Director                                |  |
| Josh Corbat                                       |   |                            | Resources Director                         |  |
| Board Bylaws set # of Board members at 9-14 seats |   |                            |  |  |

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## Exploris School Board 2021-2022

| NAME | TERM | Skills & Background | Notes | Contact Info |
|------|------|---------------------|-------|--------------|
|------|------|---------------------|-------|--------------|

|                            |  |   |                             |  |
|----------------------------|--|---|-----------------------------|--|
| Alannah Rodriguez          | Feb 01, 2020 - Jan 31, 2023 (1st) (current)  | Finance                                   | Board Treasurer             | 6816 Stevens Oaks Drive<br>Garner, NC 27529<br>Alannah.Rodriguez@dhg.com<br>(484)-798-3130 |
| Cori Greer-Banks           | Jul 01, 2021 - Jun 30, 2022  |   | Staff rep                   | 1024 Chapanoke Road<br>Raleigh, NC 27603<br>919.352.6352                                   |
| <del>Courtney Napier</del> | <del>July 2021-2024</del><br>Note: resigned Feb. 22, 2022  | <del>Diversity coaching; journalism</del> | <del>IDEA Committee</del>   | <del>courtney.has.words@gmail.com</del>  |
| Steven Darroch             | Feb 01, 2020 - Jan 31, 2023 (1st) (current)  | Finance                                   | Board Vice-chair Governance | 919-807-9327<br>407 Cutler St<br>Raleigh   |
| Jerry Hwang                | Feb 01, 2020 - Jan 31, 2023 (1st) (current)  | Management                                | Board Chair Facilities      |  |
| Ed Buchan                  | July 2021-2024 (1st) (Current)   | City Planning; engineering                |                             | 919-996-3471   |
| Melissa West               | February 2021-July 2021 (replacing Jay)<br>Note: resigning effective June 2022<br><br>New term would be JULy 2021-June 2024) | Coaching, communications                  | C&C Task Force              | Melissa@xtremeresultscoaching.com  |

|   |   |                             |                                     |   |
|---|---|-----------------------------|-------------------------------------|---|
| Leah Freidman   | July 2021-2024  | Coaching,<br>communications |                                     |   |
| Andrew Cioffi   | July 2021-2024  | Legal                       | Governance<br>Facilities            |   |
| Ryan Boyce  | October 21- July 24   | Education Law<br>Education  | Educational Excellence              |   |
| Mark Townley  | October 21- July 24   | Education                   | Educational Excellence              |   |
| Eric Grunden  | October 21- July 24   | Education                   | Educational Excellence              |   |
| Theo Kingsberry   | October 21-July 24 (2nd<br>term)<br>(First term was Jul 01,<br>2018 - Jun 30, 2021) | Facilities                  | Board Chair Jul. 2018-<br>June 2021 |   |
| Dana Deaton   | July 2021-July 2022   |                             | PTO President                       | Note: Interested in a<br>Board position once the<br>PTO seat has<br>completed |
| Deb Brown   |   |                             | MS Director                         |   |
| Ethan Burton  |   |                             | ES Director                         |   |
| Josh Corbat   |   |                             | Resources Director                  |   |
| Board Bylaws set # of<br>Board members at 9-14<br>seats |   |                             |                                     |   |

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## Exploris School Board 2020-2021

Green = continuing member

Yellow= term ending this spring; eligible for a 2nd term

Red= 2nd term ending or request to end

| NAME              | TERM  | Skills  | Notes   | Replaced BY   |
|-------------------|---|---|---|---|
| Alannah Rodriguez | Feb 01, 2020 - Jan 31, 2023 (1st) (current) |   | Board Treasurer   |   |
| Cori Greer-Banks  | Jul 01, 2019 - Jun 30, 2020                 |   | Staff rep   |   |
| Darrell Kain      | Jul 01, 2020 - Jun 30, 2023 (1st) (current) |   | Acad. Ex. Governance  | Asked to step down, effective June 1st<br>Replacement Needed                            |
| George Burnette   | Jul 01, 2018 - Jun 30, 2021 (1st) (current) |   | Development committee                                       | Courtney  |
| Jay Korreck       | Jul 01, 2019 - Jun 30, 2022 (1st) (current) | Edu. consultant<br>C&C<br>Chair E&D spinoff of AE | Has verbally requested to leave this year<br>C&C task force | Melissa-- ends w Jay's term and we could invite for a full term once Jay's is completed |
| Jerry Hwang       | Feb 01, 2020 - Jan 31, 2023 (1st) (current) |   | Board secretary   |   |
| Katherine Hogan   | Feb 01, 2020 - Jan 31, 2023 (1st) (current) |   | Has asked to leave the Board.                               | Ed Buchan   |

|                     |   |               |                                  |                    |
|---------------------|---|---------------|----------------------------------|--------------------|
|                     |   |               |                                  |                    |
| Keely Byers-Nichols | Jul 28, 2015 - Jun 26, 2018 (1st)<br>Jul 01, 2018 - Jun 30, 2021 (2nd) (current)      | BoT expertise | Educational Excellence committee | Leigh Freedman     |
| Melissa West        | February 2021-July 2021 (replacing Jay)<br><br>New term would be JULy 2021-June 2024) |               | C&C Task Force                   |                    |
| Steven Darroch      | Feb 01, 2020 - Jan 31, 2023 (1st) (current)   |               | Board Treasurer                  |                    |
| Theo Kingsberry     | Jul 01, 2018 - Jun 30, 2021 (1st) (current)   |               | Board Chair                      | Replacement Needed |
| Tom Miller          | Jul 28, 2015 - Jun 26, 2018 (1st)<br>Jul 01, 2018 - Jun 30, 2021 (2nd) (current)      |               |                                  | Replacement Needed |
|                     |   |               |                                  |                    |

# Coversheet

## Finance

|                          |   |
|--------------------------|---|
| <b>Section:</b>          | II. Committee Reports   |
| <b>Item:</b>             | B. Finance  |
| <b>Purpose:</b>          | Vote  |
| <b>Submitted by:</b>     |   |
| <b>Related Material:</b> | ESSER_Final_Report_2022_92BES_20230427.pdf<br>ESSER-GEER_Closing_Letter_2022_92BES_20230427.pdf<br>Bank Account Balances 4-30-23.pdf<br>06. Balance Sheet - 2023.04 - Exploris.pdf<br>05. Income Statement - 2023.04 - Exploris.pdf<br>03. Board Report - 2023.4 - Exploris.pdf<br>2021 Exploris School 990 Final.pdf |



# **PUBLIC SCHOOLS OF NORTH CAROLINA**

**DEPARTMENT OF PUBLIC INSTRUCTION** | Catherine Truitt, *Superintendent of Public Instruction*

[WWW.DPI.NC.GOV](http://WWW.DPI.NC.GOV)

## **ESSER Final Report Monitoring Template**

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An instrument to monitor grant programs authorized under the Elementary and Secondary Education Act, as amended by the Every Student Succeeds Act

Office of Federal Programs  
Revised August 2022

### **OFFICE OF FEDERAL PROGRAMS**

6307 Mail Service Center, Raleigh, North Carolina 27699-6307 | (984) 236-2786 | Fax (984) 236-2099

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER



## Office of Federal Programs ESSER Monitoring Report

| Summary                       | Programs Monitored |                 |                  |
|-------------------------------|--------------------|-----------------|------------------|
|                               | <b>ESSER I</b>     | <b>ESSER II</b> | <b>ESSER III</b> |
| PSU Code: 92B                 | [ ] PRC 163        | [X] PRC 171     | [X] PRC 181      |
| PSU Contact: Deb Brown        | [X] PRC 164        | [X] PRC 172     | [X] PRC 182      |
| NCDPI Lead PA: Julie Higdon   | [X] PRC 165        | [X] PRC 173     | [ ] PRC 188      |
| Documents Due Date: 4/20/2023 | [ ] PRC 166        | [ ] PRC 174     | [X] PRC 189      |
| Monitoring Date: 4/27/2023    | [ ] PRC 168        | [ ] PRC 176     | [ ] PRC 191      |
| Report Date: 5/15/2023        | [X] PRC 169        | [ ] PRC 177     | [X] PRC 192      |
| Findings: 0                   | [X] PRC 170        | [ ] PRC 178     | [X] PRC 193      |
| Recommendations: 0            |                    |                 | [ ] PRC 197      |
|                               |                    |                 | [ ] PRC 202      |
|                               |                    |                 | [X] PRC 203      |
|                               |                    |                 | [ ] PRC 205      |

The ESSER-GEER monitoring event summarized in this report is based on an examination of program files and an interview with the administration of the Public School Unit (PSU). The purpose of the review was to evaluate compliance with up to four performance elements for each of the accepted programs listed above. Details about these procedures are explained in the *ESSER-GEER Overview and Monitoring Instrument* which the PSU staff received from the Office of Federal Programs at the beginning of the process and is available on the website.

Each of the elements applicable to the PSU have been rated according to the following rubric:

A rating of Meets Requirement will be issued if the following are True:

- Compliance Element is 100% met and supported by all required evidence.
- All required documents are provided and support compliance.
- Interviews are consistent with documentation and indicate proper processes and implementation.
- Compliance is consistent at the PSU level and throughout the schools.

A rating of Meets Requirement with Recommendations will be issued if:

- Basic compliance requirements are met.
- Compliance and/or documentation could be strengthened with reasonable measures.

A Finding will be issued if either of the following is true:

- Evidence or lack of evidence shows compliance element has not been met.
- Documentation is incomplete or lacking.
- Interviews do not support documentation.
- Interviews reveal a lack of understanding of processes or implementation.
- Compliance is inconsistent at the PSU level or at the schools

The following pages present detailed results of this monitoring review. For each element rated with a finding, a narrative provides details and indicates corrective action required of the PSU. Recommendations are also described in narratives but require no corrective actions. A chart listing all elements and their ratings is also provided.

In accordance with department policy, no NCDPI staff member who contributed to the contents of this report has any affiliation or interests that would compromise an impartial review.

## Office of Federal Programs ESSER Monitoring Report

### ESSER I, GEER I

| PRC |   | Elements           | Rating            | Narrative |
|-----|---|--------------------|-------------------|-----------|
| 163 | K-12 Emergency Relief Fund  | 1                  | Not Applicable    |           |
|     |   | 2                  | Not Applicable    |           |
|     |   | 3                  | Not Applicable    |           |
|     |   | 4 (districts only) |                   |           |
| 164 | K-12 Emergency Relief Fund<br>(Supplementary for charter schools) | 1                  | Meets Requirement |           |
|     |   | 2                  | Meets Requirement |           |
|     |   | 3                  | Meets Requirement |           |
|     |   | 4 (districts only) |                   |           |
| 165 | Digital Curricula   | 1                  | Meets Requirement |           |
|     |   | 2                  | Meets Requirement |           |
|     |   | 3                  | Meets Requirement |           |
|     |   | 4 (districts only) |                   |           |
| 166 | Learning Management Systems                                       | 1                  | Not Applicable    |           |
|     |   | 2                  | Not Applicable    |           |
|     |   | 3                  | Not Applicable    |           |
|     |   | 4 (districts only) |                   |           |
| 168 | Innovative Childcare and Remote Extended Support (ICARES)         | 1                  | Not Applicable    |           |
|     |   | 2                  | Not Applicable    |           |
|     |   | 3                  | Not Applicable    |           |
|     |   | 4 (districts only) |                   |           |
| 169 | Specialized Instructional Support Personnel                       | 1                  | Meets Requirement |           |
|     |   | 2                  | Meets Requirement |           |
|     |   | 3                  | Meets Requirement |           |
|     |   | 4 (districts only) |                   |           |
| 170 | Supplemental Instructional Services                               | 1                  | Meets Requirement |           |
|     |   | 2                  | Meets Requirement |           |
|     |   | 3                  | Meets Requirement |           |
|     |   | 4 (districts only) |                   |           |

### ESSER II

| PRC |  | Elements | Rating            | Narrative |
|-----|--|----------|-------------------|-----------|
|     |  | 1        | Meets Requirement |           |

**Office of Federal Programs  
ESSER Monitoring Report**

|     |   |   |                   |  |
|-----|---|---|-------------------|--|
| 171 | K-12 Emergency Relief Fund  | 2 | Meets Requirement |  |
|     |   | 3 | Meets Requirement |  |
| 172 | K-12 Emergency Relief Fund<br>(Supplementary for Charter Schools) | 1 | Meets Requirement |  |
|     |   | 2 | Meets Requirement |  |
|     |   | 3 | Meets Requirement |  |
| 173 | Supplemental Contracted Instructional Support Funding             | 1 | Meets Requirement |  |
|     |   | 2 | Meets Requirement |  |
|     |   | 3 | Meets Requirement |  |
| 174 | School Nutrition COVID Support                                    | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |
| 176 | Learning Loss Funding   | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |
| 177 | Summer Career Accelerator   | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |
| 178 | Competency-Based Assessment                                       | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |

**ESSER III**

| PRC |   | Elements | Rating            | Narrative |
|-----|---|----------|-------------------|-----------|
| 181 | K-12 Emergency Relief Fund  | 1        | Meets Requirement |           |
|     |   | 2        | Meets Requirement |           |
|     |   | 3        | Meets Requirement |           |
| 182 | K-12 Emergency Relief Fund<br>(Supplementary for Charter Schools) | 1        | Meets Requirement |           |
|     |   | 2        | Meets Requirement |           |
|     |   | 3        | Meets Requirement |           |
| 188 | Summer Career Accelerator   | 1        | Not Applicable    |           |
|     |   | 2        | Not Applicable    |           |
|     |   | 3        | Not Applicable    |           |
|     |   | 1        | Meets Requirement |           |

**Office of Federal Programs  
ESSER Monitoring Report**

|     |   |   |                   |  |
|-----|---|---|-------------------|--|
| 189 | Math Enrichment Programs                        | 2 | Meets Requirement |  |
|     |   | 3 | Meets Requirement |  |
| 191 | Identification and Location of Missing Students | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |
| 192 | Cyberbullying & Suicide Prevention              | 1 | Meets Requirement |  |
|     |   | 2 | Meets Requirement |  |
|     |   | 3 | Meets Requirement |  |
| 193 | Gaggle Grant                                    | 1 | Meets Requirement |  |
|     |   | 2 | Meets Requirement |  |
|     |   | 3 | Meets Requirement |  |
| 197 | Middle School Reading                           | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |
| 202 | COVID-19 Student Enrollment Increase            | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |
| 203 | State Teacher Bonuses                           | 1 | Meets Requirement |  |
|     |   | 2 | Meets Requirement |  |
|     |   | 3 | Meets Requirement |  |
| 205 | Drivers Ed/Training                             | 1 | Not Applicable    |  |
|     |   | 2 | Not Applicable    |  |
|     |   | 3 | Not Applicable    |  |



## NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION

Catherine Truitt, *Superintendent of Public Instruction*

[www.dpi.nc.gov](http://www.dpi.nc.gov)

May 15, 2023

Steven Darroch, Board Chair  
The Exploris School

Dear Steven Darroch:

On April 27, 2023, the Office of Federal Programs concluded the ESSER-GEER Monitoring Review of the use of federal COVID funds by The Exploris School. The programs that were reviewed include the following, as applicable to your PSU:

- CARES Act, ESSER I and GEER: PRCs 163, 164, 165, 166, 168, 169, 170;
- CRRSA Act, ESSER II: PRCs 171, 172, 173, 174, 176, 177 and 178;
- ARP Act, ESSER III: PRCs 181, 182; and
- Other federal grants as allotted: PRCs 191, 192, 193, 202, 203, 205 and other added PRCs as developed.

We are pleased to announce that The Exploris School met all programmatic requirements for the use of these federal COVID funds. Please see the attached ESSER-GEER Monitoring Report for The Exploris School. On behalf of the North Carolina Department of Public Instruction, we would like to express our gratitude to you and your staff for assisting in this review and for your service to the children of North Carolina.

Sincerely,

A handwritten signature in black ink, appearing to read "LT Townsend", written over a light blue rectangular background.

Dr. LaTricia Townsend  
Division Director

LT: rt

c: Deb Brown, Federal Program Director  
Alex Charles, Interim Assistant Director  
Julie Higdon, Lead Federal Program Administrator

### FEDERAL PROGRAM MONITORING AND SUPPORT DIVISION

6307 Mail Service Center, Raleigh, North Carolina 27699-6307 | (984) 236-2786 | Fax (984) 236-2099

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

Powered by BoardOnTrack

|   |                |
|---|----------------|
| 4/30/2023 Account Balances                      |                |
|   |                |
| Bank Account                                    | Balance        |
| The Exploris School Checking                    | \$1,332,587.12 |
| The Exploris School Reserves                    | \$1,217,153.21 |
| The Exploris School Foundation-Annual Fund      | \$68,822.56    |
| The Exploris School Foundation-Capital Campaign | \$542,104.20   |

**THE EXPLORIS SCHOOL**

**Balance Sheet**

**Fiscal Year: 2023 | Fiscal Month: April**  
**Include Funds: All**

**Assets**

|                           |                   |              |
|---------------------------|-------------------|--------------|
| 1.1010.000.000.000.000.00 | Cash OP FCIT 6528 | (16.26)      |
| 2.1010.000.000.000.000.00 | Cash OP FCIT 6528 | 921,781.83   |
| 2.1011.000.000.000.000.00 | Cash - Reserve    | 1,217,153.21 |
| 2.1611.000.000.000.000.00 | Security Deposit  | 15,658.00    |
| 3.1010.000.000.000.000.00 | Cash OP FCIT 6528 | (13,911.85)  |
| 5.1010.000.000.000.000.00 | Cash OP FCIT 6528 | 395,509.12   |

**TOTAL Assets:** **2,536,174.05**

**Liabilities**

|                           |                               |            |
|---------------------------|-------------------------------|------------|
| 2.2282.000.000.000.000.00 | EEs' Flex Spending Deductions | (1,948.87) |
|---------------------------|-------------------------------|------------|

**TOTAL Liabilities:** **(1,948.87)**

**Reserves and Equity**

|                           |             |              |
|---------------------------|-------------|--------------|
| 2.2960.000.000.000.000.00 | Fund Equity | 1,449,461.36 |
| 5.2960.000.000.000.000.00 | Fund Equity | 383,991.63   |

**TOTAL Reserves and Equity:** **1,833,452.99**

**NET GAIN (LOSS):** **704,669.93**

**TOTAL LIABILITIES / RESERVES / INCOME:** **2,536,174.05**

05/03/2023  
04:04 PM

Page 1 of 1

**THE EXPLORIS SCHOOL****Income Statement****Fiscal Year: 2023 Month: April****Include Fund(s): 1, 2, 3, 5**

| <b>Fund</b>               | <b>Beg. Balance</b> | <b>MTD Actual</b> | <b>YTD Actual</b> |
|---------------------------|---------------------|-------------------|-------------------|
| <b>Fund 1</b>             |                     |                   |                   |
| Revenue Total:            | 2,671,059.90        | 286,630.77        | 2,957,690.67      |
| Expense Total:            | 2,671,059.90        | 286,647.03        | 2,957,706.93      |
| Change in Fund 1 Balance: | 0.00                | (16.26)           | (16.26)           |
| <b>Fund 2</b>             |                     |                   |                   |
| Revenue Total:            | 1,322,792.03        | 133,055.97        | 1,455,848.00      |
| Expense Total:            | 706,852.87          | 41,914.58         | 748,767.45        |
| Change in Fund 2 Balance: | 615,939.16          | 91,141.39         | 707,080.55        |
| <b>Fund 3</b>             |                     |                   |                   |
| Revenue Total:            | 292,444.22          | 8,167.98          | 300,612.20        |
| Expense Total:            | 298,380.67          | 16,143.38         | 314,524.05        |
| Change in Fund 3 Balance: | (5,936.45)          | (7,975.40)        | (13,911.85)       |
| <b>Fund 5</b>             |                     |                   |                   |
| Revenue Total:            | 55,680.53           | 0.00              | 55,680.53         |
| Expense Total:            | 37,316.87           | 6,846.17          | 44,163.04         |
| Change in Fund 5 Balance: | 18,363.66           | (6,846.17)        | 11,517.49         |





# THE EXPLORIS SCHOOL

## Budget Analysis Report

Fiscal Year: 2023 | 4/01/2023 - 4/30/2023

| Account                          | Budget       | Period Activity | YTD Activity | Remaining Budget | % Used  | EOY Projection |
|----------------------------------|--------------|-----------------|--------------|------------------|---------|----------------|
| <b>Revenues</b>                  |              |                 |              |                  |         |                |
| STATE REVENUE                    | 3,109,825.00 | 286,630.80      | 2,957,690.74 | 152,134.26       | 95.11   | 3,109,825.00   |
| LOCAL REVENUE                    | 1,426,626.82 | 133,439.21      | 1,298,748.11 | 127,878.71       | 91.04   | 1,469,376.12   |
| NCACCESS GRANT REVENUE           | 200,000.00   | 0.00            | 51,198.70    | 148,801.30       | 25.60   | 200,000.00     |
| FEDERAL REVENUE                  | 276,126.26   | 8,167.98        | 249,413.50   | 26,712.76        | 90.33   | 304,195.26     |
| FOUNDATION REVENUE               | 82,200.00    | 0.00            | 0.00         | 82,200.00        | 0.00    | 82,200.00      |
| B&A CARE REVENUE                 | 90,000.00    | 0.00            | 55,680.53    | 34,319.47        | 61.87   | 90,000.00      |
| REVENUE - ACTIVITIES             | 0.00         | (383.24)        | 157,100.28   | (157,100.28)     |         | 157,100.28     |
|                                  |              |                 |              |                  |         |                |
|                                  |              |                 |              |                  |         |                |
| Revenues                         | 5,184,778.08 | 427,854.75      | 4,769,831.86 | 414,946.22       | 92.00   | 5,412,696.66   |
|                                  |              |                 |              |                  |         |                |
|                                  |              |                 |              |                  |         |                |
| <b>Expenses</b>                  |              |                 |              |                  |         |                |
| SALARIES AND BONUSES             | 3,139,406.00 | 248,161.11      | 2,433,842.32 | 705,563.68       | 77.53   | 3,068,025.74   |
| BENEFITS                         | 659,992.90   | 53,615.24       | 502,330.06   | 157,662.84       | 76.11   | 659,221.56     |
| BOOKS AND SUPPLIES               | 78,784.13    | 1,581.52        | 60,790.72    | 17,993.41        | 77.16   | 76,347.96      |
| TECHNOLOGY                       | 94,587.00    | 4,615.12        | 69,407.15    | 25,179.85        | 73.38   | 97,313.82      |
| NON-CAP EQUIPMENT & LEASES       | 18,000.00    | 0.00            | 33,267.00    | (15,267.00)      | 184.82  | 39,367.19      |
| CONTRACTED STUDENT SERVICES      | 97,000.00    | 306.12          | 69,495.70    | 27,504.30        | 71.65   | 93,803.75      |
| FIELD TRIPS/ACTIVITIES           | 15,200.00    | 16,444.00       | 155,804.40   | (140,604.40)     | 1025.03 | 166,979.40     |
| STAFF DEVELOPMENT                | 8,000.00     | 0.00            | 2,804.39     | 5,195.61         | 35.05   | 6,000.00       |
| ADMIN SERVICES                   | 209,550.00   | 2,503.27        | 121,940.93   | 87,609.07        | 58.19   | 212,909.44     |
| INSURANCES                       | 40,450.00    | (6,282.00)      | 23,341.70    | 17,108.30        | 57.71   | 40,450.00      |
| FACILITIES                       | 468,144.00   | 17,543.31       | 376,082.26   | 92,061.74        | 80.33   | 468,144.00     |
| B&A CARE                         | 55,901.50    | 6,608.91        | 42,487.07    | 13,414.43        | 76.00   | 55,901.50      |
| CLUBS                            | 5,331.82     | 0.00            | 1,469.36     | 3,862.46         | 27.56   | 5,331.82       |
| CORONAVIRUS RELIEF FUND EXPENSES | 6,853.41     | 6,454.55        | 101,152.91   | (94,299.50)      | 1475.95 | 101,152.91     |
| VARIOUS GRANTS - NCACCESS        | 200,000.00   | 0.00            | 70,945.55    | 129,054.45       | 35.47   | 200,000.00     |
|                                  |              |                 |              |                  |         |                |
|                                  |              |                 |              |                  |         |                |
| Expenses                         | 5,097,200.76 | 351,551.15      | 4,065,161.52 | 1,032,039.24     | 79.75   | 5,290,949.09   |
|                                  |              |                 |              |                  |         |                |
| SURPLUS/(DEFICIT)                | 87,577.32    | 76,303.60       | 704,670.34   |                  |         | 121,747.57     |

Thomas, Judy & Tucker P.A.  
4700 Falls of Neuse Road Suite 400  
Raleigh, NC 27609  
919-571-7055

May 11, 2023

The Exploris School  
401 Hillsborough Street Suite A  
Raleigh, NC 27603-1791

Board of Directors:

Enclosed is the organization's 2021 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-TE 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. Return Form 8879-TE to us by May 15, 2023.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Sincerely,

Kristen Hoyle, CPA

# **TAX RETURN FILING INSTRUCTIONS**

FORM 990

**FOR THE YEAR ENDING**

June 30, 2022

---

**Prepared For:**

The Exploris School  
401 Hillsborough Street Suite A  
Raleigh, NC 27603-1791

---

**Prepared By:**

Thomas, Judy & Tucker, P.A.  
300 West Morgan Street Suite 1450  
Durham, NC 27701

---

**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-TE 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. Return Form 8879-TE to us by May 15, 2023.

|   |   |                                 |
|---|---|---------------------------------|
| Form <b>8879-TE</b>   | <b>IRS e-file Signature Authorization<br/>for a Tax Exempt Entity</b> | OMB No. 1545-0047               |
| For calendar year 2021, or fiscal year beginning <u>JUL 1</u> , 2021, and ending <u>JUN 30</u> , 20 <u>22</u> |   | 2021                            |
| Department of the Treasury<br>Internal Revenue Service<br>Name of filer <b>THE EXPLORIS SCHOOL</b>            |   | EIN or SSN<br><b>26-2407296</b> |
| Name and title of officer or person subject to tax <b>JOSH CORBAT<br/>DIRECTOR OF RESOURCES</b>               |   |                                 |

**Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b**, 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 one line in Part I.

|   |   |                              |
|---|---|------------------------------|
| <b>1a</b> Form 990 check here <input checked="" type="checkbox"/> | <b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) .....    | <b>1b</b> <u>10,914,316.</u> |
| <b>2a</b> Form 990-EZ check here <input type="checkbox"/>         | <b>b Total revenue</b> , if any (Form 990-EZ, line 9) .....                         | <b>2b</b> _____              |
| <b>3a</b> Form 1120-POL check here <input type="checkbox"/>       | <b>b Total tax</b> (Form 1120-POL, line 22) .....                                   | <b>3b</b> _____              |
| <b>4a</b> Form 990-PF check here <input type="checkbox"/>         | <b>b Tax based on investment income</b> (Form 990-PF, Part V, line 5) .....         | <b>4b</b> _____              |
| <b>5a</b> Form 8868 check here <input type="checkbox"/>           | <b>b Balance due</b> (Form 8868, line 3c) .....                                     | <b>5b</b> _____              |
| <b>6a</b> Form 990-T check here <input type="checkbox"/>          | <b>b Total tax</b> (Form 990-T, Part III, line 4) .....                             | <b>6b</b> _____              |
| <b>7a</b> Form 4720 check here <input type="checkbox"/>           | <b>b Total tax</b> (Form 4720, Part III, line 1) .....                              | <b>7b</b> _____              |
| <b>8a</b> Form 5227 check here <input type="checkbox"/>           | <b>b FMV of assets at end of tax year</b> (Form 5227, Item D) .....                 | <b>8b</b> _____              |
| <b>9a</b> Form 5330 check here <input type="checkbox"/>           | <b>b Tax due</b> (Form 5330, Part II, line 19) .....                                | <b>9b</b> _____              |
| <b>10a</b> Form 8038-CP check here <input type="checkbox"/>       | <b>b Amount of credit payment requested</b> (Form 8038-CP, Part III, line 22) ..... | <b>10b</b> _____             |

**Part II Declaration and Signature Authorization of Officer or Person Subject to Tax**

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2021 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

|  |                 |   |
|--|-----------------|---|
| <input checked="" type="checkbox"/> I authorize <b>THOMAS, JUDY &amp; TUCKER, P.A.</b> | to enter my PIN | <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>59120</b></div> |
| ERO firm name  |                 | Enter five numbers, but do not enter all zeros  |

as my signature on the tax year 2021 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 or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 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.

Signature of officer or person subject to tax

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.

**56154711112**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return 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 05/11/23

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

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

EXTENDED TO MAY 15, 2023

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

OMB No. 1545-0047

**2021**Open to Public  
Inspection**A** For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022****B** Check if applicable:

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

**C** Name of organization**THE EXPLORIS SCHOOL**

Doing business as

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

**401 HILLSBOROUGH STREET SUITE A**

Room/suite

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

**RALEIGH, NC 27603-1791****F** Name and address of principal officer: **JOSH CORBAT****SAME AS C ABOVE****D** Employer identification number**26-2407296****E** Telephone number**919-715-3690****G** Gross receipts \$ **10,914,316.****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.EXPLORIS.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1997** **M** State of legal domicile: **NC****Part I Summary**

|                                    |  |  |
|------------------------------------|--|--|
| <b>Activities &amp; Governance</b> | <b>1</b>   | Briefly describe the organization's mission or most significant activities: <b>THE EXPLORIS SCHOOL IS A DIVERSE LEARNING COMMUNITY THAT ENGAGES STUDENTS IN A CHALLENGING, RELEVANT,</b> |
|                                    | <b>2</b>   | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.  |
|                                    | <b>3</b>   | Number of voting members of the governing body (Part VI, line 1a) ..... <b>13</b>  |
|                                    | <b>4</b>   | Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>13</b>  |
|                                    | <b>5</b>   | Total number of individuals employed in calendar year 2021 (Part V, line 2a) ..... <b>89</b>   |
|                                    | <b>6</b>   | Total number of volunteers (estimate if necessary) ..... <b>150</b>  |
|                                    | <b>7a</b>  | Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>0.</b>   |
| <b>7b</b>                          | Net unrelated business taxable income from Form 990-T, Part I, line 11 ..... <b>0.</b> |  |
| <b>Revenue</b>                     | <b>8</b>   | Contributions and grants (Part VIII, line 1h) ..... <b>4,512,701.</b>  |
|                                    | <b>9</b>   | Program service revenue (Part VIII, line 2g) ..... <b>9,450.</b>   |
|                                    | <b>10</b>  | Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>140.</b>  |
|                                    | <b>11</b>  | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>1,613.</b>   |
|                                    | <b>12</b>  | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>4,523,904.</b>   |
| <b>Expenses</b>                    | <b>13</b>  | Grants and similar amounts paid (Part IX, column (A), lines 1-3) ..... <b>0.</b>   |
|                                    | <b>14</b>  | Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>0.</b>  |
|                                    | <b>15</b>  | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>3,058,457.</b>  |
|                                    | <b>16a</b>   | Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>0.</b>  |
|                                    | <b>b</b>   | Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>0.</b>  |
|                                    | <b>17</b>  | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ..... <b>1,210,451.</b>   |
|                                    | <b>18</b>  | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>4,268,908.</b>  |
| <b>19</b>                          | Revenue less expenses. Subtract line 18 from line 12 ..... <b>254,996.</b>             |  |
| <b>Net Assets or Fund Balances</b> | <b>20</b>  | Total assets (Part X, line 16) ..... <b>2,172,223.</b>   |
|                                    | <b>21</b>  | Total liabilities (Part X, line 26) ..... <b>297,905.</b>  |
|                                    | <b>22</b>  | Net assets or fund balances. Subtract line 21 from line 20 ..... <b>1,874,318.</b>   |

**Part II Signature Block**

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

|                               |  |                                |                         |   |                          |
|-------------------------------|--|--------------------------------|-------------------------|---|--------------------------|
| <b>Sign Here</b>              | Signature of officer   | Date                           |                         |   |                          |
|                               | <b>JOSH CORBAT, DIRECTOR OF RESOURCES</b><br>Type or print name and title      |                                |                         |   |                          |
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br><b>KRISTEN HOYLE, CPA</b>                        | Preparer's signature           | Date<br><b>05/11/23</b> | Check if self-employed <input type="checkbox"/> | PTIN<br><b>P00118964</b> |
|                               | Firm's name ▶ <b>THOMAS, JUDY &amp; TUCKER, P.A.</b>                           | Firm's EIN ▶ <b>56-1965804</b> |                         |   |                          |
|                               | Firm's address ▶ <b>300 WEST MORGAN STREET SUITE 1450<br/>DURHAM, NC 27701</b> | Phone no. <b>919-571-7055</b>  |                         |   |                          |

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

132001 12-09-21

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

Form 990 (2021)

THE EXPLORIS SCHOOL

26-2407296

Page **2****Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

**TO CREATE A CHALLENGING AND SUPPORTIVE LEARNING COMMUNITY THAT ENGAGES EACH STUDENT IN UNDERSTANDING AND BUILDING A CONNECTED, JUST, AND SUSTAINABLE WORLD.**

**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 \$ **4,361,114.** including grants of \$ **5,597.** ) (Revenue \$ **165,030.** )

**THE EXPLORIS SCHOOL IS A PUBLIC SCHOOL OPERATED BY A NON-PROFIT CORPORATION SERVING APPROXIMATELY 441 STUDENTS FROM KINDERGARTEN THROUGH 8TH GRADE.**

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

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

**4e** Total program service expenses **4,361,114.**Form **990** (2021)

**Part IV Checklist of Required Schedules**

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



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

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

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

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

|   | Yes          | No |
|---|--------------|----|
| <b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....  | <b>1a</b> 15 |    |
| <b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....  | <b>1b</b> 0  |    |
| <b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? ..... | <b>1c</b>    |    |



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**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

|  |       | Yes | No |
|--|-------|-----|----|
| <b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  | 2a 89 |     |    |
| <b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  | 2b    | X   |    |
| <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.   |       |     |    |
| <b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?  | 3a    |     | X  |
| <b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O   | 3b    |     |    |
| <b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a    |     | X  |
| <b>b</b> If "Yes," enter the name of the foreign country   |       |     |    |
| See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  |       |     |    |
| <b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a    |     | X  |
| <b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  | 5b    |     | X  |
| <b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?   | 5c    |     |    |
| <b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?                                    | 6a    |     | X  |
| <b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   | 6b    |     |    |
| <b>7 Organizations that may receive deductible contributions under section 170(c).</b>   |       |     |    |
| <b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?   | 7a    |     | X  |
| <b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?   | 7b    |     |    |
| <b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  | 7c    |     | X  |
| <b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year   | 7d    |     |    |
| <b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   | 7e    |     | X  |
| <b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 7f    |     | X  |
| <b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  | 7g    |     |    |
| <b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  | 7h    |     |    |
| <b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?   | 8     |     |    |
| <b>9 Sponsoring organizations maintaining donor advised funds.</b>   |       |     |    |
| <b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?  | 9a    |     |    |
| <b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?   | 9b    |     |    |
| <b>10 Section 501(c)(7) organizations.</b> Enter:  |       |     |    |
| <b>a</b> Initiation fees and capital contributions included on Part VIII, line 12  | 10a   |     |    |
| <b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   | 10b   |     |    |
| <b>11 Section 501(c)(12) organizations.</b> Enter:   |       |     |    |
| <b>a</b> Gross income from members or shareholders   | 11a   |     |    |
| <b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)   | 11b   |     |    |
| <b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?  | 12a   |     |    |
| <b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year   | 12b   |     |    |
| <b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>   |       |     |    |
| <b>a</b> Is the organization licensed to issue qualified health plans in more than one state?  | 13a   |     |    |
| <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.   |       |     |    |
| <b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans   | 13b   |     |    |
| <b>c</b> Enter the amount of reserves on hand  | 13c   |     |    |
| <b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?  | 14a   |     | X  |
| <b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O   | 14b   |     |    |
| <b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?   | 15    |     | X  |
| If "Yes," see the instructions and file Form 4720, Schedule N.   |       |     |    |
| <b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  | 16    |     | X  |
| If "Yes," complete Form 4720, Schedule O.  |       |     |    |
| <b>17 Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?                                 | 17    |     |    |
| If "Yes," complete Form 6069.  |       |     |    |

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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 on 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 | Yes | No |
|--|----|----|-----|----|
| <b>1a</b> Enter the number of voting members of the governing body at the end of the tax year .....<br>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 on Schedule O. | 13 |    |     |    |
| <b>b</b> Enter the number of voting members included on line 1a, above, who are independent .....  |    | 13 |     |    |
| <b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? .....   |    |    | 2   | X  |
| <b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .....   |    |    | 3   | X  |
| <b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....  |    |    | 4   | X  |
| <b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? .....  |    |    | 5   | X  |
| <b>6</b> Did the organization have members or stockholders? .....  |    |    | 6   | X  |
| <b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? .....   |    |    | 7a  | X  |
| <b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? .....   |    |    | 7b  | X  |
| <b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |    |    |     |    |
| <b>a</b> The governing body? .....   |    |    | 8a  | X  |
| <b>b</b> Each committee with authority to act on behalf of the governing body? .....   |    |    | 8b  | X  |
| <b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O .....  |    |    | 9   | X  |

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

|   | Yes | No |
|---|-----|----|
| <b>10a</b> Did the organization have local chapters, branches, or affiliates? .....   | 10a | X  |
| <b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? .....   | 10b |    |
| <b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .....  | 11a | X  |
| <b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990. ....   |     |    |
| <b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 .....  | 12a | X  |
| <b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....  | 12b | X  |
| <b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done .....   | 12c | X  |
| <b>13</b> Did the organization have a written whistleblower policy? .....   | 13  | X  |
| <b>14</b> Did the organization have a written document retention and destruction policy? .....  | 14  | X  |
| <b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |     |    |
| <b>a</b> The organization's CEO, Executive Director, or top management official .....   | 15a | X  |
| <b>b</b> Other officers or key employees of the organization .....  | 15b | X  |
| If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. ....   |     |    |
| <b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? .....  | 16a | X  |
| <b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? ..... | 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 (1024 or 1024-A, 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 on Schedule O)

**19** Describe on 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 ►  
**CHARTER SUCCESS SERVICES - 919-479-1442**  
**3600 N DUKE ST #103, DURHAM, NC 27704**

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

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

| (A)<br>Name and title                     | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>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) DEBORAH BROWN<br>BOARD MEMBER         | 40.00   |  |                       | X       |              |                              |        | 79,639.   | 0.   | 6,957.  |
| (2) JOSH CORBAT<br>HEAD OF SCHOOL         | 40.00   |  |                       | X       |              |                              |        | 29,703.   | 0.   | 3,847.  |
| (3) ETHAN BURTON<br>BOARD MEMBER          | 40.00   |  |                       | X       |              |                              |        | 26,445.   | 0.   | 3,741.  |
| (4) AMANDA NORTHRUP<br>EXECUTIVE DIRECTOR | 40.00   |  |                       | X       |              |                              |        | 24,542.   | 0.   | 3,014.  |
| (5) STEVEN DARROCH<br>VICE CHAIR          | 1.00  | X  |                       | X       |              |                              |        | 0.  | 0.   | 0.  |
| (6) ALANNAH RODRIGUEZ<br>TREASURER        | 1.00  | X  |                       | X       |              |                              |        | 0.  | 0.   | 0.  |
| (7) JERRY HWANG<br>CHAIR                  | 1.00  | X  |                       | X       |              |                              |        | 0.  | 0.   | 0.  |
| (8) MELISSA WEST<br>SECRETARY             | 1.00  | X  |                       | X       |              |                              |        | 0.  | 0.   | 0.  |
| (9) LEAH FRIEDMAN<br>BOARD MEMBER         | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (10) RYAN BOYCE<br>BOARD MEMBER           | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (11) ED BUCHAN<br>BOARD MEMBER            | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (12) ANDREW CIOFFI<br>BOARD MEMBER        | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (13) ERIC GRUNDEN<br>BOARD MEMBER         | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (14) COURTNEY NAPIER<br>BOARD MEMBER      | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (15) THEO KINGSBERRY<br>BOARD MEMBER      | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (16) DANA DEATON<br>PTO REPRESENTATIVE    | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| (17) MARK TOWNLEY<br>BOARD MEMBER         | 1.00  | X  |                       |         |              |                              |        | 0.  | 0.   | 0.  |

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

| Section A: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) |   |  |                       |         |              |                              |        |   |  |   |
|--|---|--|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| (A)<br>Name and title  | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|  |   | Individual trustee or director   | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
|  |   |  |                       |         |              |                              |        |   |  |   |
| <b>1b Subtotal</b> .....   |   |  |                       |         |              |                              |        | 160,329.  | 0.   | 17,559.   |
| <b>c Total from continuation sheets to Part VII, Section A</b> .....                                   |   |  |                       |         |              |                              |        | 0.  | 0.   | 0.  |
| <b>d Total (add lines 1b and 1c)</b> .....   |   |  |                       |         |              |                              |        | 160,329.  | 0.   | 17,559.   |

|   |   |   |
|---|---|---|
| 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 | 0 |
|---|---|---|

|   |   | Yes | No |
|---|---|-----|----|
| 3 | Did the organization list any <b>former</b> officer, director, 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  |

## Section B. Independent Contractors

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

| (A)<br>Name and business address  | (B)<br>Description of services | (C)<br>Compensation |
|---|--------------------------------|---------------------|
| MORNINGSTAR LAW GROUP, 421 FAYETTEVILLE STREET, STE 530, RALEIGH, NC 27601-1792 | ATTORNEY FEES                  | 407,674.            |
| 401 HILLSBOROUGH STREET, LLC<br>PO BOX 12929, RALEIGH, NC 27603                 | RENTS                          | 201,517.            |
|   |                                |                     |
|   |                                |                     |
|   |                                |                     |

|   |  |   |
|---|--|---|
| 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 | 2 |
|---|--|---|

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

|  |  |  |                           | (A)<br>Total revenue | (B)<br>Related or exempt<br>function revenue | (C)<br>Unrelated<br>business revenue | (D)<br>Revenue excluded<br>from tax under<br>sections 512 - 514 |
|--|--|--|---------------------------|----------------------|--|--------------------------------------|---|
| <b>Contributions, Gifts, Grants<br/>and Other Similar Amounts</b>          | <b>1 a</b> Federated campaigns .....   | <b>1a</b>  |                           |                      |  |                                      |   |
|  | <b>b</b> Membership dues .....   | <b>1b</b>  |                           |                      |  |                                      |   |
|  | <b>c</b> Fundraising events .....  | <b>1c</b>  |                           |                      |  |                                      |   |
|  | <b>d</b> Related organizations .....   | <b>1d</b>  | 47,553.                   |                      |  |                                      |   |
|  | <b>e</b> Government grants (contributions) .....   | <b>1e</b>  | 4,885,740.                |                      |  |                                      |   |
|  | <b>f</b> All other contributions, gifts, grants, and<br>similar amounts not included above ...   | <b>1f</b>  | 5,808,399.                |                      |  |                                      |   |
|  | <b>g</b> Noncash contributions included in lines 1a-1f   | <b>1g</b>  | \$ 5,790,000.             |                      |  |                                      |   |
|  | <b>h Total.</b> Add lines 1a-1f .....  |  | 10,741,692.               |                      |  |                                      |   |
|  | <b>Program Service<br/>Revenue</b>   | <b>2 a</b> AFTER SCHOOL CARE   | <b>Business Code</b>      |                      |  |                                      |   |
| <b>b</b> FIELD TRIPS AND STUDENT FEES                                      |  |  | 900099                    | 68,400.              | 68,400.                                      |                                      |   |
| <b>c</b> .....   |  |  |                           |                      |  |                                      |   |
| <b>d</b> .....   |  |  |                           |                      |  |                                      |   |
| <b>e</b> .....   |  |  |                           |                      |  |                                      |   |
| <b>f</b> All other program service revenue .....                           |  |  |                           |                      |  |                                      |   |
| <b>g Total.</b> Add lines 2a-2f .....                                      |  |  |                           | 158,016.             |  |                                      |   |
| <b>Other Revenue</b>   |  | <b>3</b> Investment income (including dividends, interest, and<br>other similar amounts) ..... |                           |                      | 7,594.                                       |                                      |   |
|  | <b>4</b> Income from investment of tax-exempt bond proceeds .....  |  |                           |                      |  |                                      |   |
|  | <b>5</b> Royalties .....   |  |                           |                      |  |                                      |   |
|  | <b>6 a</b> Gross rents .....   | <b>6a</b>  | (i) Real (ii) Personal    |                      |  |                                      |   |
|  | <b>b</b> Less: rental expenses ...   | <b>6b</b>  |                           |                      |  |                                      |   |
|  | <b>c</b> Rental income or (loss) .....   | <b>6c</b>  |                           |                      |  |                                      |   |
|  | <b>d</b> Net rental income or (loss) .....   |  |                           |                      |  |                                      |   |
|  | <b>7 a</b> Gross amount from sales of<br>assets other than inventory .....   | <b>7a</b>  | (i) Securities (ii) Other |                      |  |                                      |   |
|  | <b>b</b> Less: cost or other basis<br>and sales expenses .....   | <b>7b</b>  |                           |                      |  |                                      |   |
|  | <b>c</b> Gain or (loss) .....  | <b>7c</b>  |                           |                      |  |                                      |   |
|  | <b>d</b> Net gain or (loss) .....  |  |                           |                      |  |                                      |   |
|  | <b>8 a</b> Gross income from fundraising events (not<br>including \$ _____ of<br>contributions reported on line 1c). See<br>Part IV, line 18 ..... | <b>8a</b>  |                           |                      |  |                                      |   |
|  | <b>b</b> Less: direct expenses .....   | <b>8b</b>  |                           |                      |  |                                      |   |
|  | <b>c</b> Net income or (loss) from fundraising events .....  |  |                           |                      |  |                                      |   |
|  | <b>9 a</b> Gross income from gaming activities. See<br>Part IV, line 19 .....  | <b>9a</b>  |                           |                      |  |                                      |   |
| <b>b</b> Less: direct expenses .....                                       | <b>9b</b>  |  |                           |                      |  |                                      |   |
| <b>c</b> Net income or (loss) from gaming activities .....                 |  |  |                           |                      |  |                                      |   |
| <b>10 a</b> Gross sales of inventory, less returns<br>and allowances ..... | <b>10a</b>   |  |                           |                      |  |                                      |   |
| <b>b</b> Less: cost of goods sold .....                                    | <b>10b</b>   |  |                           |                      |  |                                      |   |
| <b>c</b> Net income or (loss) from sales of inventory .....                |  |  |                           |                      |  |                                      |   |
| <b>Miscellaneous<br/>Revenue</b>   | <b>11 a</b> MISCELLANEOUS INCOME   | <b>Business Code</b>   | 900099                    | 7,014.               | 7,014.                                       |                                      |   |
|  | <b>b</b> .....   |  |                           |                      |  |                                      |   |
|  | <b>c</b> .....   |  |                           |                      |  |                                      |   |
|  | <b>d</b> All other revenue .....   |  |                           |                      |  |                                      |   |
|  | <b>e Total.</b> Add lines 11a-11d .....  |  |                           | 7,014.               |  |                                      |   |
|  | <b>12 Total revenue.</b> See instructions .....  |  |                           | 10,914,316.          | 165,030.                                     | 0.                                   | 7,594.  |

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**THE EXPLORIS SCHOOL**26-2407296 Page **10****Part IX Statement of Functional Expenses**

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| <b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...   |                       |                                 |  |                             |
| <b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....  | 5,597.                | 5,597.                          |  |                             |
| <b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....   |                       |                                 |  |                             |
| <b>4</b> Benefits paid to or for members .....  |                       |                                 |  |                             |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees .....   | 246,853.              | 243,085.                        | 3,768.                                 |                             |
| <b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....   |                       |                                 |  |                             |
| <b>7</b> Other salaries and wages .....   | 2,908,239.            | 2,861,624.                      | 46,615.                                |                             |
| <b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....   | 62,690.               | 62,261.                         | 429.                                   |                             |
| <b>9</b> Other employee benefits .....  | 342,825.              | 339,857.                        | 2,968.                                 |                             |
| <b>10</b> Payroll taxes .....   | 230,390.              | 226,708.                        | 3,682.                                 |                             |
| <b>11</b> Fees for services (nonemployees):   |                       |                                 |  |                             |
| <b>a</b> Management .....   |                       |                                 |  |                             |
| <b>b</b> Legal .....  | 181,751.              |                                 | 181,751.                               |                             |
| <b>c</b> Accounting .....   | 18,050.               |                                 | 18,050.                                |                             |
| <b>d</b> Lobbying .....   |                       |                                 |  |                             |
| <b>e</b> Professional fundraising services. See Part IV, line 17  |                       |                                 |  |                             |
| <b>f</b> Investment management fees .....   |                       |                                 |  |                             |
| <b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)   | 293,050.              | 91,792.                         | 201,258.                               |                             |
| <b>12</b> Advertising and promotion .....   | 172,878.              | 121,804.                        | 51,074.                                |                             |
| <b>13</b> Office expenses .....   |                       |                                 |  |                             |
| <b>14</b> Information technology .....  |                       |                                 |  |                             |
| <b>15</b> Royalties .....   |                       |                                 |  |                             |
| <b>16</b> Occupancy .....   | 105,335.              |                                 | 105,335.                               |                             |
| <b>17</b> Travel .....  | 42,043.               | 42,043.                         |  |                             |
| <b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...  |                       |                                 |  |                             |
| <b>19</b> Conferences, conventions, and meetings .....  | 7,292.                | 7,292.                          |  |                             |
| <b>20</b> Interest .....  | 27,394.               |                                 | 27,394.                                |                             |
| <b>21</b> Payments to affiliates .....  |                       |                                 |  |                             |
| <b>22</b> Depreciation, depletion, and amortization .....   | 283,233.              | 278,893.                        | 4,340.                                 |                             |
| <b>23</b> Insurance .....   | 19,689.               |                                 | 19,689.                                |                             |
| <b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) |                       |                                 |  |                             |
| <b>a</b> <b>FIELD TRIPS</b>   | 61,655.               | 61,655.                         |  |                             |
| <b>b</b> <b>OTHER PROGRAM SUPPORT</b>   | 34,325.               |                                 | 34,325.                                |                             |
| <b>c</b> <b>INSTRUCTIONAL PROGRAMS</b>  | 18,503.               | 18,503.                         |  |                             |
| <b>d</b> _____  |                       |                                 |  |                             |
| <b>e</b> All other expenses _____   |                       |                                 |  |                             |
| <b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e   | 5,061,792.            | 4,361,114.                      | 700,678.                               | 0.                          |
| <b>26</b> <b>Joint costs.</b> 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 Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

|  |  | (A)<br>Beginning of year |            | (B)<br>End of year |
|--|--|--------------------------|------------|--------------------|
| <b>Assets</b>  | <b>1</b> Cash - non-interest-bearing .....   | 1,298,363.               | <b>1</b>   | 1,409,976.         |
|  | <b>2</b> Savings and temporary cash investments .....  | 352,201.                 | <b>2</b>   | 383,992.           |
|  | <b>3</b> Pledges and grants receivable, net .....  |                          | <b>3</b>   | 5,790,000.         |
|  | <b>4</b> Accounts receivable, net .....  | 397,491.                 | <b>4</b>   | 44,933.            |
|  | <b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons ..... |                          | <b>5</b>   |                    |
|  | <b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....   |                          | <b>6</b>   |                    |
|  | <b>7</b> Notes and loans receivable, net .....   |                          | <b>7</b>   |                    |
|  | <b>8</b> Inventories for sale or use .....   |                          | <b>8</b>   |                    |
|  | <b>9</b> Prepaid expenses and deferred charges .....   | 19,593.                  | <b>9</b>   | 23,299.            |
|  | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....   | <b>10a</b> 1,117,628.    |            |                    |
|  | <b>b</b> Less: accumulated depreciation .....  | <b>10b</b> 995,264.      |            |                    |
|  |  | 88,917.                  | <b>10c</b> | 122,364.           |
|  | <b>11</b> Investments - publicly traded securities .....   |                          | <b>11</b>  |                    |
|  | <b>12</b> Investments - other securities. See Part IV, line 11 .....   |                          | <b>12</b>  |                    |
|  | <b>13</b> Investments - program-related. See Part IV, line 11 .....  |                          | <b>13</b>  |                    |
|  | <b>14</b> Intangible assets .....  |                          | <b>14</b>  | 525,624.           |
| <b>15</b> Other assets. See Part IV, line 11 .....                               | 15,658.  | <b>15</b>                | 15,658.    |                    |
| <b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) ..... | 2,172,223.   | <b>16</b>                | 8,315,846. |                    |
| <b>Liabilities</b>   | <b>17</b> Accounts payable and accrued expenses .....  | 297,905.                 | <b>17</b>  | 51,465.            |
|  | <b>18</b> Grants payable .....   |                          | <b>18</b>  |                    |
|  | <b>19</b> Deferred revenue .....   |                          | <b>19</b>  |                    |
|  | <b>20</b> Tax-exempt bond liabilities .....  |                          | <b>20</b>  |                    |
|  | <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....  |                          | <b>21</b>  |                    |
|  | <b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....     |                          | <b>22</b>  |                    |
|  | <b>23</b> Secured mortgages and notes payable to unrelated third parties .....   |                          | <b>23</b>  | 537,539.           |
|  | <b>24</b> Unsecured notes and loans payable to unrelated third parties .....   |                          | <b>24</b>  |                    |
|  | <b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....  |                          | <b>25</b>  |                    |
|  | <b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....  | 297,905.                 | <b>26</b>  | 589,004.           |
| <b>Net Assets or Fund Balances</b>   | <b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>  |                          |            |                    |
|  | <b>27</b> Net assets without donor restrictions .....  | 1,874,318.               | <b>27</b>  | 7,726,842.         |
|  | <b>28</b> Net assets with donor restrictions .....   |                          | <b>28</b>  |                    |
|  | <b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>   |                          |            |                    |
|  | <b>29</b> Capital stock or trust principal, or current funds .....   |                          | <b>29</b>  |                    |
|  | <b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....   |                          | <b>30</b>  |                    |
|  | <b>31</b> Retained earnings, endowment, accumulated income, or other funds .....   |                          | <b>31</b>  |                    |
|  | <b>32</b> <b>Total net assets or fund balances</b> .....   | 1,874,318.               | <b>32</b>  | 7,726,842.         |
|  | <b>33</b> <b>Total liabilities and net assets/fund balances</b> .....  | 2,172,223.               | <b>33</b>  | 8,315,846.         |

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

|           |  |           |             |
|-----------|--|-----------|-------------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12)  | <b>1</b>  | 10,914,316. |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25)   | <b>2</b>  | 5,061,792.  |
| <b>3</b>  | Revenue less expenses. Subtract line 2 from line 1   | <b>3</b>  | 5,852,524.  |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | <b>4</b>  | 1,874,318.  |
| <b>5</b>  | Net unrealized gains (losses) on investments   | <b>5</b>  |             |
| <b>6</b>  | Donated services and use of facilities   | <b>6</b>  |             |
| <b>7</b>  | Investment expenses  | <b>7</b>  |             |
| <b>8</b>  | Prior period adjustments   | <b>8</b>  |             |
| <b>9</b>  | Other changes in net assets or fund balances (explain on Schedule O)   | <b>9</b>  | 0.          |
| <b>10</b> | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | <b>10</b> | 7,726,842.  |

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

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

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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) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....  |          |          |          |          |          |           |
| <b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....   |          |          |          |          |          |           |
| <b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....   |          |          |          |          |          |           |
| <b>4 Total.</b> Add lines 1 through 3 .....  |          |          |          |          |          |           |
| <b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) ..... |          |          |          |          |          |           |
| <b>6 Public support.</b> Subtract line 5 from line 4.  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total                |
|---|----------|----------|----------|----------|----------|--------------------------|
| <b>7</b> Amounts from line 4 .....  |          |          |          |          |          |                          |
| <b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....  |          |          |          |          |          |                          |
| <b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....   |          |          |          |          |          |                          |
| <b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....   |          |          |          |          |          |                          |
| <b>11 Total support.</b> Add lines 7 through 10   |          |          |          |          |          |                          |
| <b>12</b> Gross receipts from related activities, etc. (see instructions) .....   |          |          |          |          | 12       |                          |
| <b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ..... |          |          |          |          |          | <input type="checkbox"/> |

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

|   |    |   |
|---|----|---|
| <b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....   | 14 | % |
| <b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....  | 15 | % |
| <b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....  |    |   |
| <input type="checkbox"/>  |    |   |
| <b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....   |    |   |
| <input type="checkbox"/>  |    |   |
| <b>17a 10% -facts-and-circumstances test - 2021.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....    |    |   |
| <input type="checkbox"/>  |    |   |
| <b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... |    |   |
| <input type="checkbox"/>  |    |   |
| <b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....  |    |   |
| <input type="checkbox"/>  |    |   |

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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) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....   |          |          |          |          |          |           |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose ..... |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....   |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....  |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5 .....   |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....  |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....           |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b .....  |          |          |          |          |          |           |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| <b>9</b> Amounts from line 6 .....   |          |          |          |          |          |           |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ..... |          |          |          |          |          |           |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....                           |          |          |          |          |          |           |
| <b>c</b> Add lines 10a and 10b .....   |          |          |          |          |          |           |
| <b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....      |          |          |          |          |          |           |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....                                  |          |          |          |          |          |           |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)   |          |          |          |          |          |           |

**14 First 5 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**

|   |           |   |
|---|-----------|---|
| <b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) ..... | <b>15</b> | % |
| <b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....                       | <b>16</b> | % |

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

|   |           |   |
|---|-----------|---|
| <b>17</b> Investment income percentage for <b>2021</b> (line 10c, column (f), divided by line 13, column (f)) ..... | <b>17</b> | % |
| <b>18</b> Investment income percentage from <b>2020</b> Schedule A, Part III, line 17 .....                         | <b>18</b> | % |

**19a 33 1/3% support tests - 2021.** 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 - 2020.** 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 ..... ☐

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV** Supporting Organizations *(continued)*

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

**Section B. Type I Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i> |     |    |
| <b>1</b>  |     |    |
| <b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>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.</i>   |     |    |
| <b>2</b>  |     |    |

**Section C. Type II Supporting Organizations**

|  | Yes | No |
|--|-----|----|
| <b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i> |     |    |
| <b>1</b>   |     |    |

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

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

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

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



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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                               | <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)  | 8              |                             |

| Section B - Minimum Asset Amount |   | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|---|----------------|-----------------------------|
| 1                                | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): |                |                             |
| a                                | Average monthly value of securities   | 1a             |                             |
| b                                | Average monthly cash balances   | 1b             |                             |
| c                                | Fair market value of other non-exempt-use assets  | 1c             |                             |
| d                                | <b>Total</b> (add lines 1a, 1b, and 1c)   | 1d             |                             |
| e                                | <b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):                                  |                |                             |
| 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 0.015 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 0.035.   | 6              |                             |
| 7                                | Recoveries of prior-year distributions  | 7              |                             |
| 8                                | <b>Minimum Asset Amount</b> (add line 7 to line 6)  | 8              |                             |

| Section C - Distributable Amount |   |   | Current Year |
|----------------------------------|---|---|--------------|
| 1                                | Adjusted net income for prior year (from Section A, line 8, column A)   | 1 |              |
| 2                                | Enter 0.85 of line 1.   | 2 |              |
| 3                                | Minimum asset amount for prior year (from Section B, line 8, column A)  | 3 |              |
| 4                                | Enter greater of line 2 or line 3.  | 4 |              |
| 5                                | Income tax imposed in prior year  | 5 |              |
| 6                                | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).   | 6 |              |
| 7                                | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). |   |              |

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

| Section D - Distributions  |           | Current Year |
|--|-----------|--------------|
| <b>1</b> Amounts paid to supported organizations to accomplish exempt purposes   | <b>1</b>  |              |
| <b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity               | <b>2</b>  |              |
| <b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations   | <b>3</b>  |              |
| <b>4</b> Amounts paid to acquire exempt-use assets   | <b>4</b>  |              |
| <b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )  | <b>5</b>  |              |
| <b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.   | <b>6</b>  |              |
| <b>7</b> <b>Total annual distributions.</b> Add lines 1 through 6.   | <b>7</b>  |              |
| <b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions. | <b>8</b>  |              |
| <b>9</b> Distributable amount for 2021 from Section C, line 6  | <b>9</b>  |              |
| <b>10</b> Line 8 amount divided by line 9 amount   | <b>10</b> |              |

| Section E - Distribution Allocations (see instructions)  | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2021 | (iii)<br>Distributable<br>Amount for 2021 |
|--|-----------------------------|--|---|
| <b>1</b> Distributable amount for 2021 from Section C, line 6  |                             |  |   |
| <b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.   |                             |  |   |
| <b>3</b> Excess distributions carryover, if any, to 2021   |                             |  |   |
| <b>a</b> From 2016   |                             |  |   |
| <b>b</b> From 2017   |                             |  |   |
| <b>c</b> From 2018   |                             |  |   |
| <b>d</b> From 2019   |                             |  |   |
| <b>e</b> From 2020   |                             |  |   |
| <b>f</b> <b>Total</b> of lines 3a through 3e   |                             |  |   |
| <b>g</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>h</b> Applied to 2021 distributable amount  |                             |  |   |
| <b>i</b> Carryover from 2016 not applied (see instructions)  |                             |  |   |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.  |                             |  |   |
| <b>4</b> Distributions for 2021 from Section D, line 7: \$   |                             |  |   |
| <b>a</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>b</b> Applied to 2021 distributable amount  |                             |  |   |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.  |                             |  |   |
| <b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. |                             |  |   |
| <b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.                        |                             |  |   |
| <b>7</b> <b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.   |                             |  |   |
| <b>8</b> Breakdown of line 7:  |                             |  |   |
| <b>a</b> Excess from 2017  |                             |  |   |
| <b>b</b> Excess from 2018  |                             |  |   |
| <b>c</b> Excess from 2019  |                             |  |   |
| <b>d</b> Excess from 2020  |                             |  |   |
| <b>e</b> Excess from 2021  |                             |  |   |

Schedule A (Form 990) 2021

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



**Schedule B**  
(Form 990)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

THE EXPLORIS SCHOOL

Employer identification number

26-2407296

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), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), 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).

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Page **2**

|                      |                                |
|----------------------|--------------------------------|
| Name of organization | Employer identification number |
| THE EXPLORIS SCHOOL  | 26-2407296                     |

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

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|------------|---|----------------------------|---|
| 1          | DURHAM COUNTY PUBLIC SCHOOLS<br>511 CLEVELAND ST., PO BOX 30002<br>DURHAM, NC 27702                 | \$ 15,443.                 | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 2          | WAKE COUNTY PUBLIC SCHOOL SYSTEM<br>5625 DILLARD DRIVE<br>CARY, NC 27518                            | \$ 1,324,682.              | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 3          | NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION<br>301 N. WILMINGTON ST.<br>RALEIGH, NC 27601       | \$ 3,157,896.              | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 4          | JOHNSTON COUNTY PUBLIC SCHOOLS<br>2320 US 70 BUSINESS HWY EAST, PO BOX 1336<br>SMITHFIELD, NC 27577 | \$ 26,275.                 | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 5          | U.S. DEPARTMENT OF EDUCATION<br>400 MARYLAND AVENUE, SW<br>WASHINGTON, DC 20202                     | \$ 357,866.                | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 6          | CAPITAL CITY URBAN DEVELOPMENT, LLC<br>PO BOX 1149<br>PEMBROKE, NC 28372                            | \$ 5,790,000.              | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input checked="" type="checkbox"/><br>(Complete Part II for noncash contributions.) |

|                      |                                |
|----------------------|--------------------------------|
| Name of organization | Employer identification number |
| THE EXPLORIS SCHOOL  | 26-2407296                     |

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

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions | (d)<br>Type of contribution   |
|------------|---|----------------------------|---|
| 7          | THE EXPLORIS FOUNDATION<br>401 HILLSBOROUGH STREET<br>RALEIGH, NC 27603 | \$ 47,553.                 | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
|            |   |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            |   |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            |   |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            |   |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            |   |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            |   |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            |   |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |



|                            |                                |
|----------------------------|--------------------------------|
| Name of organization       | Employer identification number |
| <b>THE EXPLORIS SCHOOL</b> | <b>26-2407296</b>              |

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

OMB No. 1545-0047

**2021**Open to Public  
Inspection

Name of the organization

THE EXPLORIS SCHOOL

Employer identification number

26-2407296

**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 (for example, 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 FASB 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 FASB 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 FASB 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) 2021

Schedule D (Form 990) 2021

THE EXPLORIS SCHOOL

26-2407296 Page 2

**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 make significant use of its collection items (check all that apply):

a ☐ Public exhibitiond ☐ Loan or exchange programb ☐ 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 Term 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

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

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

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   |                                      | 744,131.                        | 708,995.                     | 35,136.        |
| d Equipment  |                                      | 373,497.                        | 286,269.                     | 87,228.        |
| e Other  |                                      |                                 |                              |                |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) |                                      |                                 |                              | 122,364.       |

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

THE EXPLORIS SCHOOL

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**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

| (a) Description of investment   | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) .....   |                |   |
| (2) .....   |                |   |
| (3) .....   |                |   |
| (4) .....   |                |   |
| (5) .....   |                |   |
| (6) .....   |                |   |
| (7) .....   |                |   |
| (8) .....   |                |   |
| (9) .....   |                |   |
| <b>Total.</b> (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) .....   |                |
| <b>Total.</b> (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) .....   |                |
| <b>Total.</b> (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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☐

Schedule D (Form 990) 2021





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

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

**THE EXPLORIS SCHOOL**

Employer identification number

**26-2407296****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 on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or 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 .....
- THE EXPLORIS SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS NOT REQUIRED TO FILE FORM 5578. THEREFORE, SCHEDULE E IS NOT APPLICABLE.**

- 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.
- THE EXPLORIS SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS NOT REQUIRED TO FILE FORM 5578. THEREFORE, SCHEDULE E IS NOT APPLICABLE.**

- 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 990-EZ.****Schedule E (Form 990) 2021**

**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 IS ORGANIZED AS A CHARTER SCHOOL UNDER NORTH CAROLINA GENERAL  
STATUTE 115C-238.29A. ACCORDINGLY, IT RECEIVES BOTH FEDERAL AND STATE  
FUNDING AS ITS PRIMARY MEANS OF SUPPORT.

LINE 7 - EXPLANATION OF RACIAL NONDISCRIMINATION COMPLIANCE:

THE EXPLORIS SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS NOT REQUIRED TO FILE  
FORM 5578. THEREFORE, SCHEDULE E IS NOT APPLICABLE.

**SCHEDULE I**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

**THE EXPLORIS SCHOOL****Employer identification number****26-2407296****Part I** **General Information on Grants and Assistance****1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....☐ **Yes**☒ **No****2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**Part II** **Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| <b>1 (a)</b> Name and address of organization or government | <b>(b)</b> EIN | <b>(c)</b> IRC section (if applicable) | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of noncash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of noncash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--|---------------------------------|---|--|--|---|
|   |                |  |                                 |   |  |  |   |
|   |                |  |                                 |   |  |  |   |
|   |                |  |                                 |   |  |  |   |
|   |                |  |                                 |   |  |  |   |
|   |                |  |                                 |   |  |  |   |
|   |                |  |                                 |   |  |  |   |
|   |                |  |                                 |   |  |  |   |
|   |                |  |                                 |   |  |  |   |

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .....**3** Enter total number of other organizations listed in the line 1 table .....**LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.****Schedule I (Form 990) 2021**

Part III can be duplicated if additional space is needed.

**Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**SCHEDULE M  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Noncash Contributions**

OMB No. 1545-0047

**2021**Open to Public  
Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization

THE EXPLORIS SCHOOL

Employer identification number

26-2407296

**Part I Types of Property**

|   | (a)<br>Check if<br>applicable | (b)<br>Number of<br>contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line 1g | (d)<br>Method of determining<br>noncash contribution amounts |
|---|-------------------------------|---|--|--|
| 1 Art - Works of art .....  |                               |   |  |  |
| 2 Art - Historical treasures .....                                    |                               |   |  |  |
| 3 Art - Fractional interests .....                                    |                               |   |  |  |
| 4 Books and publications .....  |                               |   |  |  |
| 5 Clothing and household goods .....                                  |                               |   |  |  |
| 6 Cars and other vehicles .....                                       |                               |   |  |  |
| 7 Boats and planes .....  |                               |   |  |  |
| 8 Intellectual property .....   |                               |   |  |  |
| 9 Securities - Publicly traded .....                                  |                               |   |  |  |
| 10 Securities - Closely held stock .....                              |                               |   |  |  |
| 11 Securities - Partnership, LLC, or<br>trust interests .....         |                               |   |  |  |
| 12 Securities - Miscellaneous .....                                   |                               |   |  |  |
| 13 Qualified conservation contribution -<br>Historic structures ..... |                               |   |  |  |
| 14 Qualified conservation contribution - Other ...                    |                               |   |  |  |
| 15 Real estate - Residential .....                                    |                               |   |  |  |
| 16 Real estate - Commercial .....                                     |                               |   |  |  |
| 17 Real estate - Other .....  |                               |   |  |  |
| 18 Collectibles .....   |                               |   |  |  |
| 19 Food inventory .....   |                               |   |  |  |
| 20 Drugs and medical supplies .....                                   |                               |   |  |  |
| 21 Taxidermy .....  |                               |   |  |  |
| 22 Historical artifacts .....   |                               |   |  |  |
| 23 Scientific specimens .....   |                               |   |  |  |
| 24 Archeological artifacts .....                                      |                               |   |  |  |
| 25 Other ▶ ( <u>.76 ACRE TRAC</u> )                                   | X                             | 1   | 5,790,000.   | APPRAISED VALUE  |
| 26 Other ▶ ( _____ )  |                               |   |  |  |
| 27 Other ▶ ( _____ )  |                               |   |  |  |
| 28 Other ▶ ( _____ )  |                               |   |  |  |

29 Number of Forms 8283 received by the organization during the tax year for contributions  
for which the organization completed Form 8283, Part V, Donee Acknowledgement .....

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it  
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for  
exempt purposes for the entire holding period? .....

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

Yes No

|     |  |   |
|-----|--|---|
|     |  |   |
| 30a |  | X |
| 31  |  | X |
| 32a |  | X |
| 33  |  |   |

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

Schedule M (Form 990) 2021

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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

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

OMB No. 1545-0047

**2021**Open to Public  
Inspection

Name of the organization

THE EXPLORIS SCHOOL

Employer identification number

26-2407296

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

RELATIONSHIP-BASED EDUCATION. THROUGH EXPERIENTIAL, PROJECT-BASED

LEARNING, WE EMPOWER STUDENTS TO FOSTER A JUST AND SUSTAINABLE WORLD.

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

THE BOARD OF DIRECTORS WILL REVIEW THE FORM 990 BEFORE FILING.

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

ANNUALLY, THE BOARD REVIEWS AND SIGNS FORMS INDICATING AWARENESS AND

AGREEMENT TO ADHERE TO THE CONFLICTS/NEPOTISM POLICY. THEN, ALL CONTRACTS

ABOVE \$5,000 HAVE TO BE REVIEWED/RATIFIED BY THE FULL BOARD.

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

THE COMPENSATION OF THE DIRECTORS IS APPROVED BY THE BOARD OF DIRECTORS.

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

ALL OF THE ORGANIZATION'S DISCLOSURE POLICIES, FINANCIAL STATEMENTS AND TAX

RETURNS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XII LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.



**SCHEDULE R  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

**THE EXPLORIS SCHOOL**

Employer identification number

**26-2407296****Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a)<br>Name, address, and EIN (if applicable)<br>of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling<br>entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------------|
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |
|  |                         |   |                     |                           |                                     |

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

| (a)<br>Name, address, and EIN<br>of related organization                             | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Exempt Code<br>section | (e)<br>Public charity<br>status (if section<br>501(c)(3)) | (f)<br>Direct controlling<br>entity | (g)<br>Section 512(b)(13)<br>controlled<br>entity? |    |
|--|-------------------------|---|-------------------------------|---|-------------------------------------|--|----|
|  |                         |   |                               |   |                                     | Yes  | No |
| THE EXPLORIS SCHOOL PTO - 27-1719653<br>401 HILLSBOROUGH STREET<br>RALEIGH, NC 27603 | SUPPORT                 | NORTH CAROLINA                                      | 501(C)(3)                     | LINE 11   |                                     |  | X  |
| THE EXPLORIS FOUNDATION - 81-4851793<br>401 HILLSBOROUGH STREET<br>RALEIGH, NC 27603 |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |
|  |                         |   |                               |   |                                     |  |    |

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

Schedule R (Form 990) 2021



**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

|   | Yes       | No |
|---|-----------|----|
| <b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?                          |           |    |
| <b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....  | <b>1a</b> | X  |
| <b>b</b> Gift, grant, or capital contribution to related organization(s) .....  | <b>1b</b> | X  |
| <b>c</b> Gift, grant, or capital contribution from related organization(s) .....  | <b>1c</b> | X  |
| <b>d</b> Loans or loan guarantees to or for related organization(s) .....   | <b>1d</b> | X  |
| <b>e</b> Loans or loan guarantees by related organization(s) .....  | <b>1e</b> | X  |
| <b>f</b> Dividends from related organization(s) .....   | <b>1f</b> | X  |
| <b>g</b> Sale of assets to related organization(s) .....  | <b>1g</b> | X  |
| <b>h</b> Purchase of assets from related organization(s) .....  | <b>1h</b> | X  |
| <b>i</b> Exchange of assets with related organization(s) .....  | <b>1i</b> | X  |
| <b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....   | <b>1j</b> | X  |
| <b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....   | <b>1k</b> | X  |
| <b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....   | <b>1l</b> | X  |
| <b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....  | <b>1m</b> | X  |
| <b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....  | <b>1n</b> | X  |
| <b>o</b> Sharing of paid employees with related organization(s) .....   | <b>1o</b> | X  |
| <b>p</b> Reimbursement paid to related organization(s) for expenses .....   | <b>1p</b> | X  |
| <b>q</b> Reimbursement paid by related organization(s) for expenses .....   | <b>1q</b> | X  |
| <b>r</b> Other transfer of cash or property to related organization(s) .....  | <b>1r</b> | X  |
| <b>s</b> Other transfer of cash or property from related organization(s) .....  | <b>1s</b> | X  |
| <b>2</b> If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. |           |    |

| (a)<br>Name of related organization | (b)<br>Transaction<br>type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-------------------------------------|----------------------------------|------------------------|--|
| (1) THE EXPLORIS FOUNDATION         | C                                | 47,553.                | FMV  |
| (2)                                 |                                  |                        |  |
| (3)                                 |                                  |                        |  |
| (4)                                 |                                  |                        |  |
| (5)                                 |                                  |                        |  |
| (6)                                 |                                  |                        |  |

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

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

[illegible]

Schedule R (Form 990) 2021

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

# Coversheet

## Directors Report

|                          |  |
|--------------------------|--|
| <b>Section:</b>          | III. Meeting Items                                 |
| <b>Item:</b>             | A. Directors Report                                |
| <b>Purpose:</b>          | FYI  |
| <b>Submitted by:</b>     |  |
| <b>Related Material:</b> | May 2023 Exploris Leadership Team Board Report.pdf |



# The Exploris School

## Directors Report

**To:** Board Members  
**From:** Ethan, Josh, & Deb  
**Re:** Monthly Board Report

**Date:** May 25, 2023

The following information is provided to the Board of Directors:

### Enrollment

| Grade Level           | Active Enrollment | Class Sizes | Withdrawals Since 4/27/23 | 2023/2024 Applications | Open Seats | Acceptances for 23-24 SY | # Remaining on the Waitlist |
|-----------------------|-------------------|-------------|---------------------------|------------------------|------------|--------------------------|-----------------------------|
| Kindergarten          | 30                | 15          | 0                         | 216                    | 34         | 33                       | 131                         |
| 1 <sup>st</sup> Grade | 34                | 17          | 0                         | 99                     | 6          | 6                        | 88                          |
| 2 <sup>nd</sup> Grade | 37                | 18/19       | 0                         | 109                    | 5          | 5                        | 100                         |
| 3 <sup>rd</sup> Grade | 38                | 19          | 0                         | 89                     | 1          | 1                        | 86                          |
| 4 <sup>th</sup> Grade | 38                | 19          | 0                         | 102                    | 0          | 0                        | 100                         |
| 5 <sup>th</sup> Grade | 36                | 18          | 0                         | 88                     | 0          | 0                        | 85                          |
| 6 <sup>th</sup> Grade | 75                | 18/19       | 0                         | 187                    | 40         | 40                       | 92                          |
| 7 <sup>th</sup> Grade | 74                | 18/19       | 0                         | 100                    | 1          | 1                        | 95                          |
| 8 <sup>th</sup> Grade | 74                | 18/19       | 0                         | 58                     | 3          | 3                        | 53                          |
| <b>Total</b>          | <b>436</b>        |             | <b>0</b>                  | <b>1048</b>            | <b>90</b>  | <b>89</b>                | <b>830</b>                  |

### Student Support Team Report

| Month     | In School Suspension<br># students / # days | Out of School Suspension<br># students / # days | Behavior Referrals<br>Major/minor |
|-----------|---|---|-----------------------------------|
| August    | ES: 0/0<br>MS: 0/0                          | ES: 1/2<br>MS: 0/0                              | ES: 2/0<br>MS: 0/0                |
| September | ES: 1/5<br>MS: 2/5                          | ES: 4/6<br>MS: 2/1                              | ES: 5/8<br>MS: 4/5                |
| October   | ES: 1/1<br>MS: 1/1                          | ES: 1/2<br>MS: 3/3                              | ES: 2/11<br>MS: 4/8               |
| November  | ES: 2/2<br>MS: 2/1                          | ES: 4/8<br>MS: 2/2                              | ES: 6/33<br>MS: 4/8               |
| December  | ES: 0/0<br>MS: 1/5                          | ES: 0/0<br>MS: 2/2                              | ES: 0/13<br>MS: 2/8               |
| January   | ES: 3/2.5<br>MS: 5/4                        | ES: 3/3<br>MS: 6/7.5                            | ES: 6/8<br>MS: 10/19              |
| February  | ES: 2/1.5<br>MS: 3/3                        | ES: 2/2<br>MS: 1/2                              | ES: 3/28<br>MS: 4/16              |
| March     | ES: 4/4<br>MS: 3/3                          | ES: 3/3<br>MS: 2/2                              | ES: 11/23<br>MS: 4/25             |
| April     | ES: 3/3<br>MS: 0/0                          | ES: 1/2<br>MS: 0/0                              | ES: 4/19<br>MS: 0/15              |
| May       | ES: 2/1                                     | ES: 2/2   | ES: 4/28                          |

|              |              |                |               |
|--------------|--------------|----------------|---------------|
|              | MS: 1/1      | MS: 3/9        | MS: 17/24     |
| <b>Total</b> | <b>36/23</b> | <b>42/58.5</b> | <b>92/272</b> |

## Updates on Goals/Issues for Discussion

**School Improvement Plan (SIP) Progress:** [Linked here](#) is the 2022-2023 Board approved School Improvement Plan. The Kaizen Team is still in the process of creating progress indicators and inputting them into the NCStar platform. In the interim:

### Target Area #1 Student Support Alignment Progress:

- The staff participated in the annual completion of the Facilitated Assessment of MTSS (FAM-S), led by Jill Hemingway, our MTSS lead. The FAM-S is a tool for school-level implementation of the Multi-Tiered System of Support. The purpose of its administration and [resulting data](#) is to help school and district-level personnel identify and prioritize implementation steps around the six critical components of NC MTSS:
  - Leadership, Building Capacity/Infrastructure for Implementation
  - Communication and Collaboration
  - Data-based Problem-solving
  - Three-tiered Instruction/Intervention Model
  - Data-Evaluation
- Jill aggregated the data and presented to Leadership to help guide our next steps, partially around Professional Learning for next year. We will incorporate the FAM-S into the annual Measures of Excellence Report in June.
- The leadership team along with Michelle Duncan, Student Services Coordinator, and Koren Morgan, Business Manager, worked on completion of the Individuals with Disabilities Education Act (IDEA) grant for the 2023-2024 school year.

### Target Area #2 Instructional Alignment Progress:

- We have been holding conversations and gathering data around which digital tools and programs will best serve our school, specifically iXL and iReady. We are discussing both the academic uses and the costs/benefits of each program in an effort to streamline and create universal pathways for these tools.
- The leadership team has been meeting with Leah Ruto in her new role as Instructional Coach to plan for the overall themes, structure and focus of professional learning for next year, including the pre-service workweek and goals for onboarding new staff.
- We have completed the spring benchmark testing through NWEA MAP and are preparing for the state level EOG and EOC tests, which begin on May 26th.
- Deb facilitated a middle school math team meeting to get vertical alignment and review measures to make math placements, communications to families about math placements, and scheduling challenges specifically with balancing teaching loads for Math 8, Math 1, and Math 2.
- On Wed. May 17th the 7th grade visited Jireh Family Farms as a follow up to their unit on the concept of "Inheritance" and a study of agricultural history in NC.
- Every grade-level participated in student led portfolio conferences, including the culminating Passage Portfolios for 8th grade students.
- Summer Programs planned:



- Read to Achieve Summer Camp (July 10-28): Reading-focused summer program for rising 2nd, 3rd and 4th grade students.
- Kindergarten Readiness Camp (August 2-4): 3-day prep program focused on students coming to kindergarten with an Individualized Education Plan (IEP) or minimal pre-k experience.
- 6th Grade readiness Camp (orientation): Opportunity for incoming 6th graders new to Exploris to meet staff and get to know the Exploris learning process.

### Target Area #3 Community Engagement Progress:

- Spring Fling: The PTO very successfully hosted an exciting day with our families! The craft fair was a huge hit!
- Washington, D.C. Trip: Our 7th grade students had a great time in D.C.! Our teachers report that this group was incredibly well-behaved and represented our school well in the Nation's Capital.
- Outward Bound: The 8th grade team led another transformational trip to the NC mountains with our students! It rained for a whole day this year, but our students' spirits were high upon their return. OB continues to be a hugely impactful cumulative experience for our young adults.
- On May 10th a team from Maureen Joy Charter School in Durham visited both Exploris campuses as part of their own reflection and redesign process. They were visiting schools with exceptional and innovative models.
- Middle Grades Dance: The City of Raleigh Museum wasn't ready for us! (Only kidding! They were wonderful hosts!) Our students tore up the dance floor and made amazing memories in downtown Raleigh.
- MS Drama Club Show: We have some burgeoning thespians on our hands! The recent Drama Club show was a smashing success.
- Passage Portfolios: 8 community members joined us at Passage Portfolios this year! Our students love having the input from members of our amazing community.
- Graduation: Please join us! 9:00 a.m. at the Raleigh Little Theater outdoor amphitheater.

### **Human Resources Update**

#### **Resignations presented to the Board**

| Name        | Position                                     | Notes                      |
|-------------|--|----------------------------|
| Leigh Arias | Middle School Interventions Teaching Partner | Leigh is moving to Indiana |

#### **New Hire Profiles for Approval**

| Name        | Position                | Licensure             |
|-------------|-------------------------|-----------------------|
| Keith Knox  | Elementary Crew Teacher |                       |
| Nadia White | Elementary Crew Teacher | Masters-level License |

#### **Retirements presented to the Board**

| Name       | Position                  | Notes                                       |
|------------|---------------------------|---|
| Leah Perry | Middle School Global Arts | Leah is retiring after a career at Exploris |

#### **Anticipated Vacancies for 23-24 School year (based on newly created positions or previous resignations)**

| Position               | Notes  |
|------------------------|--|
| 4th grade Crew Teacher | Vacancy created with the resignation of Denise Ziemack |

|  |   |
|--|---|
| 5th grade Crew teacher<br>Coach            | Vacancy created with the transition of Leah Ruto to Instructional   |
| 6th grade Humanities Teacher               | Vacancy created with the resignation of Devon Rose  |
| 7th grade Humanities Teacher (2 positions) | Vacancy created with the resignation of Amanda Whittington and with the transition of Mary McWay to Global Arts |
| MS EC Teacher                              | New position being created due to rising case loads   |
| MS Interventions Teaching Partner          | Vacancy created with the resignation of Leigh Arias   |

### Fiscal Operations Update

- 1. Budget Amendments Requested:** Please see the Budget Revision in the packet
  - a. None
- 2. Unpaid Invoices (Time frame for payment)**
  - a. None
- 3. Identified Potential Short/Long Term Issues**
  - a. None

### Important Dates (Board Attendance Requested)

June 5th: Elementary Field Day

June 8th: 5th grade Parade and Graduation

June 9th: 8th grade Graduation ceremony outside in the Raleigh Rose Garden at 9:00 am