

Camino Nuevo Charter Academy

Finance Committee Meeting

Published on February 28, 2022 at 12:58 PM PST

Date and Time

Thursday March 3, 2022 at 3:00 PM PST

Location

https://caminonuevo-org.zoom.us/j/95471454313?pwd=djNXUyszVkxqSlBvUkgwb0YzL2dWdz09

Topic: CNCA Finance Committee

Time: Mar 3, 2022 03:00 PM Pacific Time (US and Canada)

Join Zoom Meeting

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Meeting ID: 954 7145 4313

Passcode: mf62zF One tap mobile

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In accordance with Mayor Garcetti's "Safer at Home" City Order (Link) and Governor Newsome's State Executive Order(Link) CNCA will be holding Board Meetings via ZOOM video conference and telephone. No physical CNCA school locations will be open to the public.

This meeting is open to the public through the telephone 1 (669) 900-9128 (US Toll) and ZOOM video conference. To ensure meeting safety, there will be an online ZOOM waiting room set up for participants 10 minutes prior to the meeting. Attendees will be

welcomed in prior to the start of the meeting at 3:00 pm. The waiting room will be checked regularly so that anyone joining the meeting late can still join.

Members of the public who wish to address the Board regarding items on this agenda or who need special accommodations should contact Ruby Rodriguez in the Chief Executive Officer's office at 213-417-3400 ext. 1401 or ruby.rodriguez@pueblonuevo.org Speakers are limited to no more than 2 minutes each. Speakers may also sign up in person the day of the meeting.

Agenda	Purpose	Presenter	Time
I. Opening Items			3:00 PM
A. Record Attendance		Gil Flores	2 m
B. Call the Meeting to Order		Gil Flores	1 m
II. Approve Minutes			3:03 PM
A. November 02, 2021, 2021 Finance Committee Meeting	Approve Minutes	Gil Flores	2 m
III. Public Comment			3:05 PM
A. Public Comment	Discuss	Gil Flores	2 m
IV. SY 22-23 Enrollment Update: February 2022			3:07 PM
A. SY 22-23 Enrollment Update: February 2022	Discuss	Crystal Day	20 m
Current status of school forecasts			
V. Financials			3:27 PM
A. Financials	Discuss	Sonia Oliva	20 m
VI. TK Expansion Costs			3:47 PM
A. TK Expansion Costs	Discuss	Sonia Oliva	20 m
VII. Review of Taxes			4:07 PM
A. Review of Taxes	Vote	Adriana Abich	21 m
VIII. Closing Items			4:28 PM
A. Adjourn Meeting	Vote	Gil Flores	2 m

Cover Sheet

November 02, 2021, 2021 Finance Committee Meeting

Section: II. Approve Minutes

Item: A. November 02, 2021, 2021 Finance Committee Meeting

Purpose: Approve Minutes

Submitted by:

Related Material: Minutes for Finance Committee Meeting on November 2, 2021



Camino Nuevo Charter Academy

Minutes

Finance Committee Meeting

Date and Time

Tuesday November 2, 2021 at 3:00 PM

Location

Join Zoom Meeting

https://caminonuevo-org.zoom.us/j/99757318849? pwd=cXR2WEZyOFJNWEpncDhmSU1qbXZ4Zz09

Meeting ID: 997 5731 8849

Passcode: rX74Hm One tap mobile

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Ruby.Rodriguez@caminonuevo.org. Speakers are limited to no more than 2 minutes each. Speakers may also sign up in person the day of the meeting.

Committee Members Present

C. Smet (remote), G. Flores (remote), J. Ortega (remote)

Committee Members Absent

None

Guests Present

A. Abich (remote), R. Rodriguez (remote), soliva@exed.org (remote)

I. Opening Items

A. Record Attendance

B. Call the Meeting to Order

G. Flores called a meeting of the Finance Committee of Camino Nuevo Charter Academy to order on Tuesday Nov 2, 2021 at 3:02 PM. Cindy Smet made a motion to amend the agenda to reflect that the minutes being approved were from September 1, 2021, not March 17, 2021. Jazmin Ortega seconded the motion to amend and it passed unanimously.

II. Approve Minutes

A. March 17, 2021 Finance Committee Meeting

- C. Smet made a motion to approve the minutes from Finance Committee Meeting on 09-01-21.
- J. Ortega seconded the motion.

The minutes for September 1, 2021 were approved.

The committee **VOTED** to approve the motion.

III. Public Comment

A. Public Comment

There was no public comment.

IV. FY21-22 Budget Update

A. FY21-22 Budget Update

Sonia Oliva presented the budget update as of September 30, 2021. She highlighted that ADA is low as compared to other years. This could be somewhat accounted for by the timing of capturing ADA for students on independent study. Nevertheless, ADA is low enough to cause her to revise the forecast/budget down from 95% ADA to 89% or 90% which puts some sites in the red. Additionally there is Covid related budget pressure because as teachers have to quarantine due to Covid exposures, substitutes have to be hired. Even in light of these cost pressures, our cash position is still solid.

V. Gift Acceptance Policy

A. Gift Acceptance Policy

This item has been tabled until a VP of Finance and Business Services is hired.

VI. Fiscal Policy Review

A. Fiscal Policy Review

A few changes were recommended including substituting VP of Finance and Business Services for CFO throughout the document and increasing the limit on food expense at PDs.

VII. ECE Update

A. ECE Update

The CEO gave an overview of the status of the ECE which has been running deficits since the state funding levels were reduced to \$5,000 per student per year some years back. Importantly, the State is now prioritizing Transitional Kindergarten in its funding. They have made \$100,000 available for schools sites planning to add Transitional Kindergarten and the ADA is about \$14,000 per TK student as compared to \$5,000 per ECE student. It makes sense for all our sites with available classrooms to consider adding TK. It has become increasingly difficult to get full enrollment in our schools and the addition of full day TK will be attractive to families.

At Burlington one ECE classroom has already transitioned to a TK for Burlington. Transitioning to three TK classrooms would mean that Burlington could offer a full day bilingual TK to 60 four and five year old students. This is attractive to families.

The credentialing for TK staff is different than it is for ECE staff and HR has begun discussions with staff in the event that PNEDG decides to fully transition out of ECE and Burlington decides to use the remaining ECE classrooms for TK. There are questions to be answered such as whether adding two more TK classes would warrant a material revision. Nevertheless, the Committee felt that CNCA should explore the possibility of transitioning the remaining two ECE classes from PNEDG to Burlington TK classes.

VIII. 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 4:30 PM.

Respectfully Submitted, C. Smet

Documents used during the meeting

- 21-22 Budget Summary CNCA Consolidated 10.29.21.pdf
- GiftMemo w. sample policy.pdf
- SAMPLE Gift Acceptance Policies.pdf
- CNCA Fiscal Policies.Revision_09.08.20.pdf
- CNCA Finance Committee 10.29.pdf

Cover Sheet

SY 22-23 Enrollment Update: February 2022

Section: IV. SY 22-23 Enrollment Update: February 2022 Item: A. SY 22-23 Enrollment Update: February 2022

Purpose: Discuss

Submitted by:

Related Material: SY 2022-2023 Enrollment Update Feb 2022.pdf



SY 2022-2023 Enrollment Update





February 2022

Agenda

- Shift to Strategic Enrollment Management
- Context: External and Internal Trends
- CNCA Enrollment History
- Goal Framework
- Current Tactics
- Applications
- Potential Attrition
- Enrollment Forecast | TK and Network

Shift to Strategic Enrollment Management



Research and Market Trends **Data Analytics Goal-Minded Effective Team** Customer Service Approach: Inform, Connect, and Personalize Support and Accountability

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Context: External and Internal Trends

	EXTENERAL		INTERNAL
Decreasing	Decreasing LAUSD Enrollment steadily decreasing – 8.1% pre-pandemic (18/19 to 22/23)	Increased	CNCA increased applications last year by 10%
Decreasing	Decreasing Live Births within LAUSUD decreasing – 5% year over year	Exceeded	CNCA was enrolled at 100.56% the week before school
Decreasing	The number of charter schools has reduced from 228 to 225, 3 less	Reduced	Enrollment 2 months into school reduced to 97%
Increasing	Increasing LAUSD Charter enrollment projected to increase by more than 3%	Retained	CNCA only retained 67% of CAS 5 th to 6 th

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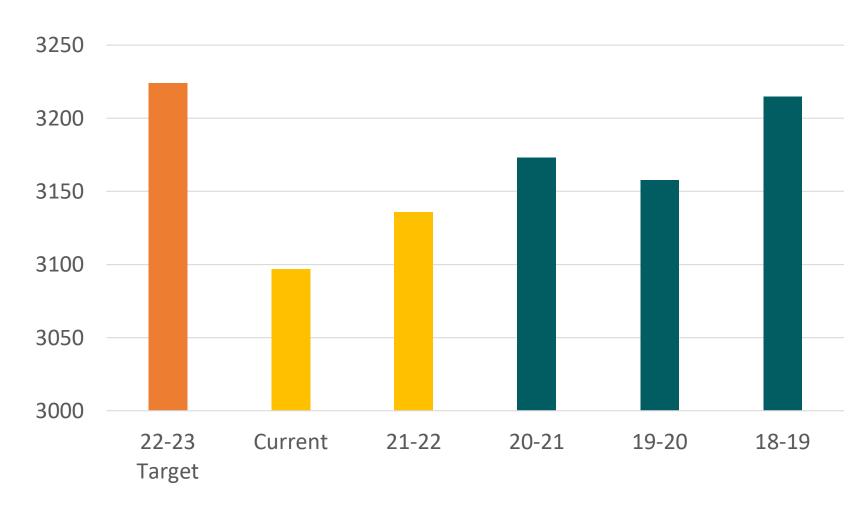
Market: Current Enrollment Trends near CNCA- Cisneros

Competitor Schools	2021	2020	2019	2018	Enrollment	Change from 2021 to 2018
Rosemont (2-5)	216	246	265	299	reduction	28%
Mayberry (K-5)	180	191	260	285	reduction	37%
Micheltorena (K-5)	385	408	388	404	reduction	5%
Commonwealth (K-5)	549	602	662	656	reduction	16%
Gabriella (K-8)	468	459	465	433	increase	8%
CNCA- Cisneros (K-8)	598	605	639	625	reduction	4%

^{*}California School Dashboard (caschooldashboard.org)

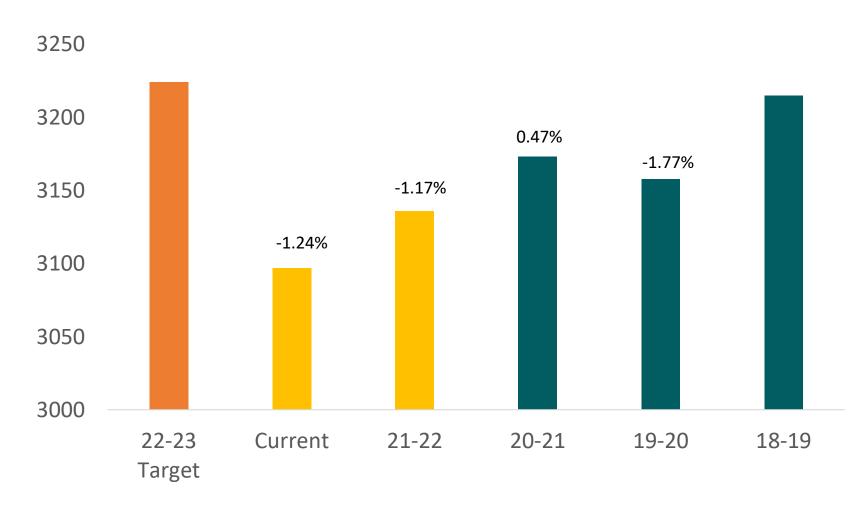
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CNCA Network | 3 Year Enrollment History (current schools)



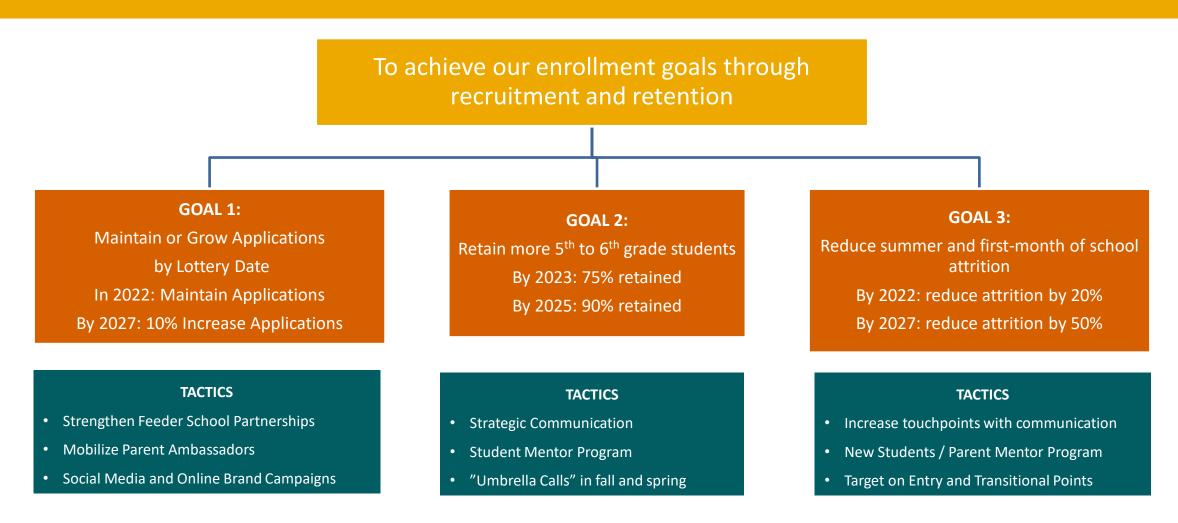
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CNCA Network | 3 Year Enrollment History (current schools) w/ % Changes



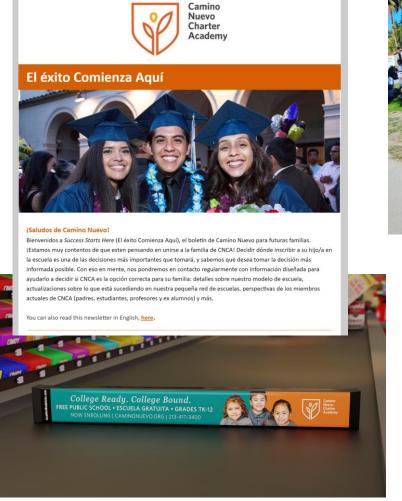
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Strategy- Multi-Year Goal Framework



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Snapshot of Current Tactics











- Strategic (and Personalized)
 Communication
 - Success Starts Here (2)
 - Virtual Events (+10)
- CNCA Parent Community Leaders (3)
 - Growing Enrollment
 - Adding to the Sense of Belonging
 - Mentoring / Welcoming
 New Families

LACFEPS Collaboration

- 2 In-person recruitment fairs
- Retention Dashboard Development
- Recruitment and Retention Think Tank

CNCA Network | Application History Submitted by Feb. 23

As of February 23	22-23	21-22	20-21	now compared 2 yr
ALL CNCA	917	900	796	up by around 15%
ТК	78	42	48	up 62%
Kinder	224	203	213	up slightly (5%)
TK-8th	607	454	517	up 17%
6th to 8th	172	80	121	up around 42%
9th	283	266	271	up slightly (4%)

CELEBRATE!

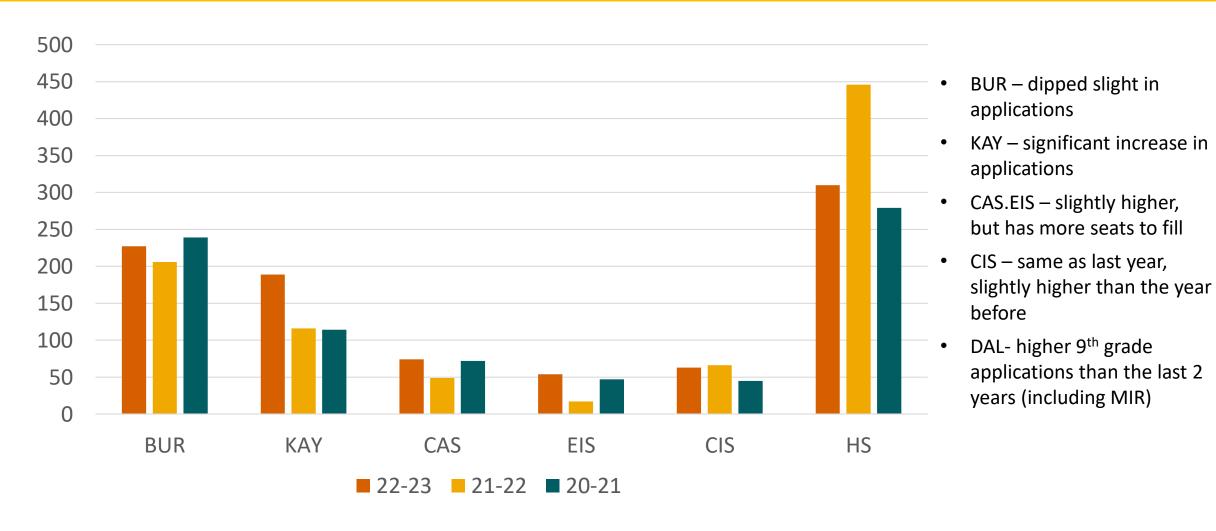
 We are continuing to increase our applications. Interest is high, but we have to continue to monitor yield.

CAUTION

 We have more seats to fill this year than we did last year. We need to continue to retain students AND increase applications to meet targets

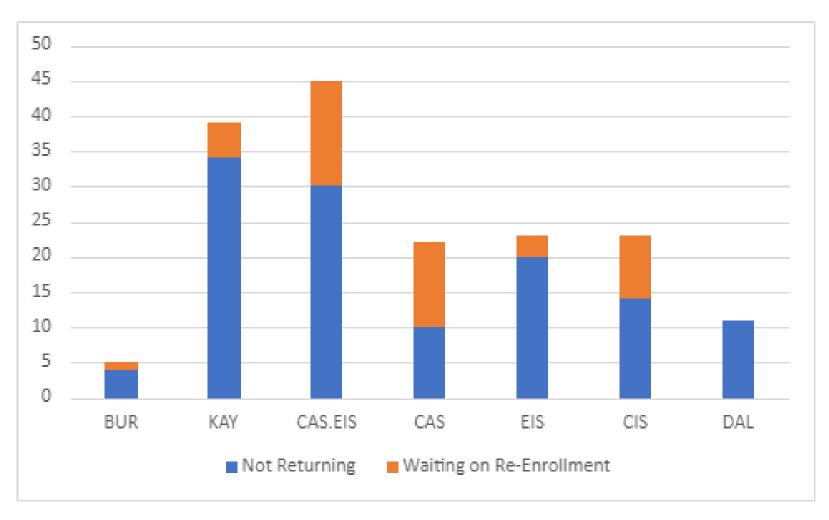
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CNCA Network | Applications Submitted by School – 3 year (2/23)



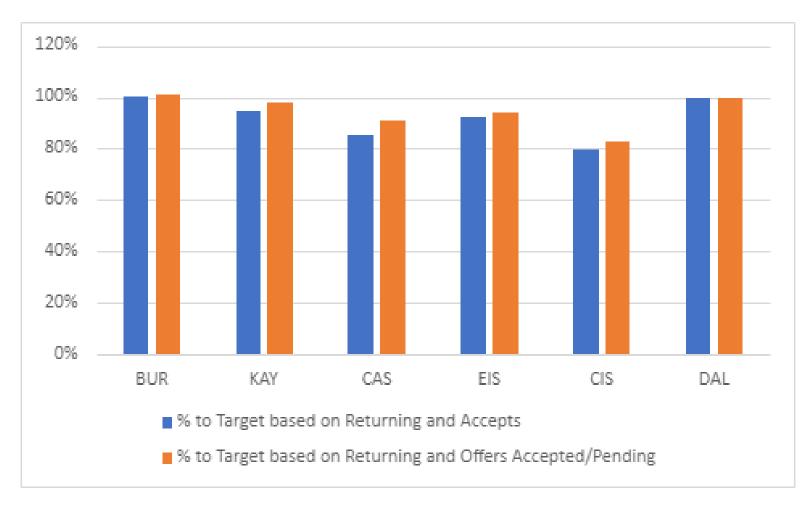
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CNCA Network | Potential Attrition for 22-23 as of Feb. 23



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CNCA Network | Percentage Toward Meeting Enrollment Goals as of 2/26

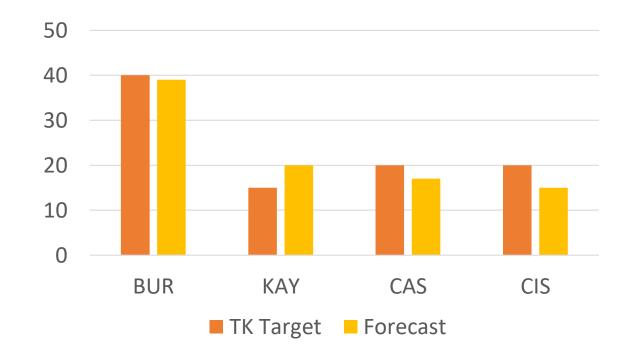


- CNCA is 91.8% enrolled toward our 22-23 targets
- Based on current data and historical data, these schools are tracking to meet targets:
 - BUR, KAY, EIS, and DAL
 - CAS at 97%, and CIS at 91%

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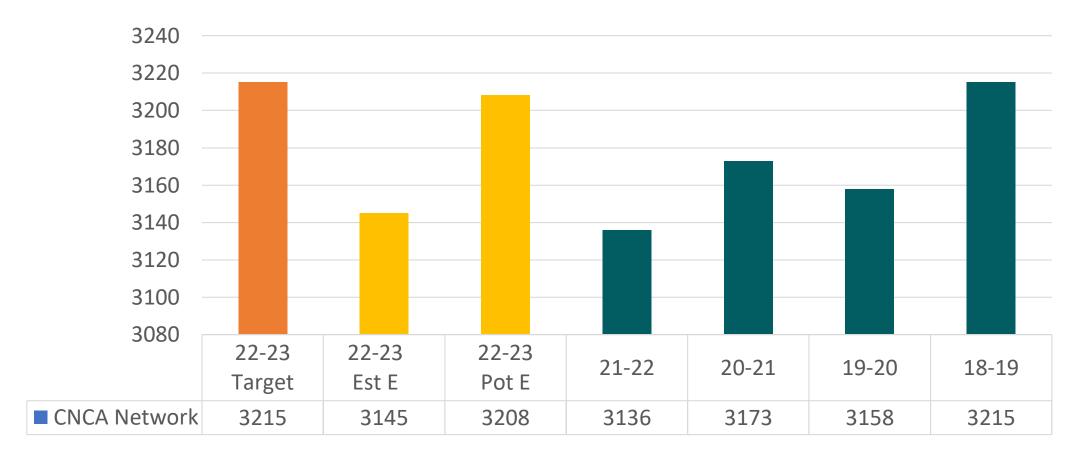
CNCA TK Expansion

TK Enrollment	Target	Current Accepts	Pending	Forecast
BUR	40	31	2	39
KAY	15	12	2	20
CAS	20	8	3	17
CIS	20	6	1	15
	95	57	8	91



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CNCA Network | 22-23 First Day Enrollment Forecast



Est E - Students Returning, Newly Accepts as of 2/23, plus 2yr avg applications (March to July) w/ 70% yield

Pot E- Student Returning, Pending Returning, Newly Accepts, and Pending Accepts as of 2/23, plus 2yr avg applications (March to July) w/ 70% yield

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Feedback/Questions

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Cover Sheet

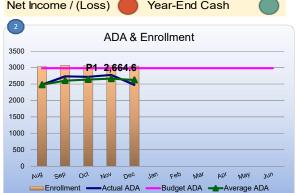
Financials

Section: V. Financials Item: A. Financials Purpose: Discuss

Submitted by:

Related Material: 01.22 - CNCA Consolidated - Financial Packet.pdf





KEY POINTS

The average ADA percentage through Month 5 is at 86.3%. For Month 6 and onward CNCA is projecting to have a 92% ADA rate. This would result on an overall P2 rate of 88% which is 7% less than the original budget. Revisions to Month 1 and 2 attendance reports are expected to happen to properly account for independent study taking place.

ADA is 285 under budget resulting in reduced funding accross all of the charters.

A net loss of \$644K is projected, which is \$1.5M under budget.

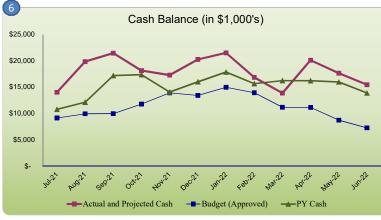
Forecast includes ESSER spending plan.

Cash remains strong and is projected to end at 107 days cash on hand as of 06/30/2022.

Average Daily Attendance Analysis						
Category	Actual through Month 5	Forecasted P2	Budgeted P2	Better/ (Worse)	Prior Month Forecast	Prior Year P2
Enrollment	3,044	3,069	3,139	(70)	3,088	3,367
ADA %	86.3%	88.0%	95.0%	-7.0%	89.5%	95.0%
Average ADA	2,622.76	2,696.99	2,982.05	(285.06)	2,762.74	3,218.84

	LCFF Supplemental & Concentration Grant Factors						
	Category	Budget	Forecast	Variance	Prior Year		
٦	Unduplicated Pupil %	94.7%	93.6%	-1.1%	94.9%		
1	3-Year Average %	95.5%	95.2%	-0.3%	96.3%		
1	District UPP C. Grant Cap	85.1%	85.2%	0.1%	85.1%		

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5	Forecast	VS. Bu	dget	VS. Las	t Month		FY 21-22 YTD		Histo	rical
INCOME STATEMENT	As of 01/31/22	FY 21-22	Variance					Variance		
INCOME STATEMENT	AS 01 0 1/3 1/22	Budget	B/(W)	Prior Month FC	Variance B/(W)	Actual YTD	Budget YTD	B/(W)	FY 20-21	FY 19-20
Local Control Funding Formula	32,960,366	35,221,394	(2,261,028)		(16,167)	-,,	19,284,529	646,207	33,411,308	33,437,300
Federal Revenue	12,656,316	4,758,199	7,898,117	13,119,043	(462,726)		1,567,474	2,553,668	8,544,443	3,792,642
State Revenue	4,826,067	4,567,013	259,054	4,586,738	239,328	3,336,797	2,120,587	1,216,210	2,578,594	2,107,752
Other Local Revenue	2,639,097	2,209,619	429,479	2,602,885	36,212		1,273,025	414,660	2,587,536	2,379,954
Grants/Fundraising	349,369	112,500	236,869	163,169	186,200	347,941	74,796	273,145	263,396	257,740
					(1= 1=0)					
TOTAL REVENUE	53,431,216	46,868,725	6,562,491	53,448,368	(17,153)		24,320,410	5,103,890		41,975,388
Total per ADA	19,811	15,717	4,094	19,818	(6)				14,721	14,128
w/o Grants/Fundraising	19,682	15,679	4,003	19,757	(75)				14,639	14,041
Certificated Salaries	16,366,662	15,864,204	(502,459)	16,476,292	109,629	8,945,730	8,840,051	(105,679)	12,866,595	13,306,587
Classified Salaries	6,439,570	5,465,700	(973,870)	6,588,152	148,582	3,406,038	2,989,015	(417,023)	3,627,635	3,815,754
Benefits	6,995,351	6,862,074	(133,277)	7,214,164	218,813	3,777,313	3,897,919	120,606	4,779,613	5,002,395
Student Supplies	4,783,438	3,557,052	(1,226,386)	4,770,232	(13,206)	2,869,160	1,977,361	(891,800)	5,238,611	2,615,362
Operating Expenses	18,059,723	12,943,770	(5,115,953)	17,795,835	(263,888)	8,255,934	7,593,184	(662,750)	13,715,921	14,721,963
Other	1,430,102	1,291,310	(138,792)	1,434,696	4,593	800,859	742,211	(58,648)	1,299,959	1,247,575
TOTAL EXPENSES	54,074,846	45,984,109	(8,090,737)	54,279,371	204,525	28,055,034	26,039,741	(2,015,293)	41,528,335	40,709,636
Total per ADA	20,050	15,420	(4,630)	20,126	(76)				12,902	13,702
NET INCOME / (LOSS)	(643,631)	884,615	(1,528,246)	(831,003)	187,372	1,369,266	(1,719,331)	3,147,245	5,856,942	1,265,752
OPERATING INCOME	575,888	1,965,342	(1,389,454)	393,110	182,779	2,063,866	(1,083,379)	3,147,245	6,938,656	2,285,091
EBITDA	786,472	2,175,925	(1,389,454)	603,693	182,779	2,170,125	(977,120)	3,147,245	7,156,901	2,513,327



Year-End Cash Balance				
Projected	Budget	Variance		
15,448,196	7,258,652	8,189,544		



7				
Balance Sheet	6/30/2021	12/31/2021	1/31/2022	6/30/2022 FC
Assets				
Cash, Operating	13,877,874	20,256,534	21,497,141	15,448,196
Cash, Restricted	0	0	0	0
Accounts Receivable	8,076,064	97,842	95,517	4,277,454
Due From Others	185,032	183,733	187,478	180,762
Other Assets	305,180	43,553	43,684	247,447
Net Fixed Assets	39,997,763	39,692,405	39,659,399	39,148,656
Total Assets	62,441,913	60,274,067	61,483,219	59,302,514
Liabilities				
A/P & Payroll	2,018,499	1,625,375	1,682,379	2,280,493
Due to Others	2,436,714	2,089,519	2,217,773	1,647,223
Deferred Revenue	1,588,033	8,571	8,571	8,571
Total Debt	10,625,881	10,432,443	10,432,443	10,237,071
Total Liabilities	16,669,127	14,155,908	14,341,166	14,173,358
Equity				
Beginning Fund Bal.	39,915,845	45,772,786	45,772,786	45,772,786
Net Income/(Loss)	5,856,942	345,372	1,369,266	(643,631)
Total Equity `	45,772,786	46,118,159	47,142,052	45,129,155
Total Liabilities & Equity	62,441,913	60,274,067	61,483,218	59,302,514

Available Line of Credit				
Days Cash on Hand	82	139	148	107
Cash Reserve %	22.3%	38.2%	40.7%	29.2%

Camino Nuevo Charter Academy
Consolidated Budaet Summary

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SSAE 23.814 24.324 17.687 18.066 16.335 16.685 9.744 9.952 26.079 26.637 15.938 16.279 14.019 14.320 97.538 99.626 8296 Title IV PCSGP 8297 Facilities Incentive Grant 13.714 1.142.984 1 541 22 1 934 093 1 473 51 17 771 812 780 17 771 2 286 29 1 658 833 31 486 8 563 425 8299 All Other Federal Revenue Total 8100-8299 · Other Federal Income 1,125,703 2,552,568 1,005,856 2,751,247 832,636 2,119,029 387,849 1,143,943 1,220,486 3,262,972 810,975 2,376,318 595,181 1,713,211 4,758,199 12,656,316 8300-8599 · Other State Revenue 8520 Child Nutrition - State 47,612 31,976 42,917 17,479 35,879 15,224 12,339 6,816 48,218 22,040 32,289 17,908 17,435 12,393 188.471 101,796 9.484 11.534 11,534 7,901 4.477 4.478 12,377 10.431 10,431 20.425 20,425 64,252 8550 Mandate Block Grant 9,484 7.899 64,251 84.075 83,422 99.323 99.626 67.118 62.085 38.048 36.825 105.165 98.910 86.355 88.336 72.390 74.232 447,308 444.525 8561 State Lottery - Non Prop 20 8562 State Lottery - Prop 20 27.465 33.266 32,445 39.728 21.925 24.758 12,429 14.685 34.354 39,443 28.209 35.226 23.647 29.602 146.120 177.265 111,540 116.688 131.768 139.354 89.043 50.476 51 510 139,519 138.353 114,564 123,562 96.037 103,833 593,428 621,790 8560 Lottery Revenue 86 843 8587 State Grant Pass-Through 8591 SR740 295,637 333,923 123,147 123 147 123,147 123,147 299 926 299,926 718,710 756,996 8592 State Mental Health 177,559 203,483 177,559 203,483 177,559 203,483 177,559 203,483 124,387 203,483 657,065 813,931 8593 After School Education & Safety 8594 Supplemental Categorical Block Grant 422,026 345,289 2.345.088 8599 State Revenue - Other 466.55 517.858 564,431 403.200 205.264 199,443 550,553 602.64 472,152 515.230 382,499 318.443 2.467.302 1.102.043 Total 8300-8599 · Other State Income 1.063.857 1.162.108 881.636 936.280 655.671 716.649 395.703 385.394 1.051.374 753.824 870,615 816.323 755.020 4,567,013 4.826.067 8600-8799 · Other Local Revenue 8631 Sale of Equipment & Supplies 8634 Food Service Sales 8650 Leases & Rentals 15,000 10,000 10,000 12,000 12,000 5,000 5,000 17,000 17,000 10,000 10,000 14,000 14,000 66,000 66,000 8660 Interest & Dividend Income 15.000 8662 Net Increase (Decrease) in Fair Value of Investments 8681 Intra-Agency Fee Income 8682 Childcare & Enrichment Program Fees 8689 All Other Fees & Contracts 8692 Grants 10.000 69,310 100.000 108 000 2 500 47 840 53,214 2 500 101,054 10,000 112,500 349,200 60.836 8694 In Kind Donations 8695 Contributions & Events 169 8696 Other Fundraising 8697 E-Rate 13,440 14,776 14,776 29,552 29,55 14,776 16,741 16,741

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	CNCA - Burlington		CNCA#2 - K	ayne Siart	0 0 0		CNCA#3 - Eisner		CNCA#3 - Consolidated		CNCA#4 - Cisneros		CNHS#2 Lar		Cent Adminis		Camino Consoli	
	2021-22 Budget - Approved	2021-22 Forecast																
8698 SELPA Grants	-	35,744	-	56,922	-	22,937	-	12,845	-	35,782	-	22,999	-	27,606	-	-	-	179,053
8699 All Other Local Revenue	-	4,697	-	4,383	-	16,510	-	43	-	16,553	-	4,258	-	5,294	-	-	-	35,185
8792 Transfers of Apportionments - Special Education	386,128	397,838	456,155	475,038	308,248	292,012	174,739	175,784	482,988	467,795	396,600	422,317	332,463	355,739	-	-	2,054,334	2,118,728
Total 8600-8799 · Other Income-Local	424,568	536,044	580,931	669,137	337,524	406,086	194,515	261,757	532,040	667,843	421,376	535,202	363,204	429,393	-	-	2,322,119	2,837,619
Prior Year Adjustments																		
8999 Other Prior Year Adjustment	-	54,482	-	13,630	-	7,085	-	17,387	-	24,472	-	14,833	-	43,429	-	-	-	150,847
Total Prior Year Adjustments	-	54,482	-	13,630		7,085		17,387		24,472		14,833		43,429	-	-	-	150,847
TOTAL INCOME	9,125,239	10,371,173	10,035,559	11,514,522	7,055,448	7,739,514	3,822,378	4,406,633	10,877,827	12,146,147	8,541,597	10,140,630	8,288,503	9,258,744	-	-	46,868,725	53,431,216
opense																		
1000 · Certificated Salaries	1,856,591	1,945,139	2 462 252	2,810,111	1,494,941	1,514,515	881,270	898.061	2,376,211	2,412,576	2,308,249	2,523,126	2 027 127	1,943,630			11,041,541	11.634.583
1110 Teachers' Salaries 1120 Teachers' Hourly	1,850,591	1,945,139	2,463,353 42,000	735	1,494,941	1,514,515	881,270	43.445	2,370,211	43.445	13,090	2,523,126	2,037,137	1,943,630	-	-	55,090	44.180
1170 Teachers' Salaries - Substitute	53,723	53,723	61,050	38,034	82,510	83,128	24,050	24,050	106,560	107,178	64,750	37,029	51,870	51,870		-	337,953	287,833
1175 Teachers' Salaries - Stipend/Extra Duty	105,410	171,895	99,870	167,204	110,450	149,220	28,540	71,250	138,990	220,470	80,120	171,322	103,255	207,515			527,645	938,405
1211 Certificated Pupil Support - Librarians	-	- 171,033	-	107,204	-	143,220	20,540	71,230	-	-		171,322	103,233	207,313	_	_	527,045	-
1213 Certificated Pupil Support - Guidance & Counseling	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_
1215 Certificated Pupil Support - Psychologist	69,273	59,032	81,571	69,789	50,956	47,100	30,292	26,721	81,249	73,821	67,462	60,704	62,228	50,805	-	-	361,782	314,152
1299 Certificated Pupil Support - Other	110,963	88,346	204,657	104,483	81,624	70,489	48,523	39,991	130,146	110,480	107,846	90,882	99,678	76,034	-	-	653,291	470,225
1300 Certificated Supervisors' & Administrators' Salaries	505,530	402,496	502,580	464,382	436,923	426,998	298,939	298,170	735,862	725,168	498,610	479,111	644,320	606,127	-	-	2,886,903	2,677,286
1900 Other Certificated Salaries	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total 1000 · Certificated Salaries	2,701,489	2,720,631	3,455,081	3,654,738	2,257,404	2,291,451	1,311,614	1,401,688	3,569,018	3,693,139	3,140,127	3,362,174	2,998,488	2,935,982	-	-	15,864,204	16,366,662
2000 · Classified Salaries																		
2111 Instructional Aide & Other Salaries	447,441	481,502	408,968	512,043	342,671	346,441	103,508	114,251	446,178	460,692	588,855	615,885	309,820	218,497	-	-	2,201,262	2,288,619
2121 After School Staff Salaries	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2131 Classified Teacher Salaries	161,585	226,347	-	42,743	74,400	41,303	65,150	-	139,550	41,303	18,500	-	-	-	-	-	319,635	310,393
2200 Classified Support Salaries	113,209	141,981	142,574	120,594	102,671	102,450	55,785	66,470	158,456	168,920	108,776	108,334	80,127	86,463	-	-	603,142	626,293
2300 Classified Supervisors' & Administrators' Salaries	-	-	-	-	-	-	-	-	-	-	-	3,098	-	45,391	-	-	-	48,489
2400 Classified Office Staff Salaries	211,705	222,055	178,385	200,574	205,625	220,192	142,096	138,511	347,721	358,703	194,110	203,072	218,365	224,291	-	-	1,150,286	1,208,695
2900 Other Classified Salaries	202,264	390,972	221,242	345,673	201,473	338,304	116,296	158,111	317,769	496,416	272,049	411,726	178,050	312,295	-	-	1,191,375	1,957,081
Total 2000 · Classified Salaries	1,136,204	1,462,858	951,169	1,221,627	926,840	1,048,691	482,835	477,343	1,409,674	1,526,034	1,182,290	1,342,115	786,362	886,937	-	-	5,465,700	6,439,570
3000 · Employee Benefits	457,092	441,741	584,600	604,665	381,953	370,712	221,925	233.030	603,878	603,741	531,310	553,225	507,344	485,275			2,684,223	2.688.647
3111 STRS - State Teachers Retirement System 3212 PERS - Public Employee Retirement System	260,304	329,571	217,913	270,357	212,339	238,626	110,617	106.769	322,956	345,394	270,863	295,171	180,155	196,332	-	-	1,252,192	1,436,825
3213 PARS - Public Agency Retirement System	200,304	323,371	217,515	270,337	212,333	238,020	110,017	100,703	322,930	343,334	270,803	233,171	100,133	150,332		_	1,232,132	1,430,823
3311 OASDI - Social Security	70,445	91,756	58,972	76,005	57,464	67,684	29,936	29,560	87,400	97,244	73,302	83,228	48,754	55,836		_	338,873	404,069
3331 MED - Medicare	55,647	60,181	63,891	70,065	46,172	48,050	26,020	27,103	72,191	75,154	62,675	67,684	54,880	55,191	_	_	309,284	328,275
3401 H&W - Health & Welfare	322,253	355,396	379,682	387,133	297,972	276,381	108,085	124,417	406,057	400,798	353,643	343,867	316,147	318,491	-	-	1,777,782	1,805,684
3501 SUI - State Unemployment Insurance	47,204	20,739	54,197	24,145	39,166	16,558	22,072	9,340	61,238	25,898	53,166	23,326	46,554	19,090	-	-	262,358	113,198
3601 Workers' Compensation Insurance	47,595	44,050	46,730	56,146	29,531	36,550	20,342	20,597	49,874	57,147	50,820	49,614	42,343	45,723	-	-	237,361	252,680
3751 OPEB, Active Employees	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3901 Other Retirement Benefits	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3902 Other Benefits	-	(8,150)	-	(3,885)	-	(6,617)	-	776	-	(5,841)	-	(4,929)	-	(11,223)	-	-	-	(34,028)
Total 3000 · Employee Benefits	1,260,539	1,335,286	1,405,985	1,484,630	1,064,597	1,047,943	538,996	551,592	1,603,593	1,599,535	1,395,778	1,411,186	1,196,178	1,164,714	-	-	6,862,074	6,995,351
4000 · Supplies																		
4111 Core Curricula Materials	24,800	344,800	108,300	314,537	16,571	274,210	12,107	127,411	28,678	401,621	27,755	353,841	31,900	54,754	-	-	221,433	1,469,554
4211 Books & Other Reference Materials	1,000	1,809	7,000	10,050	3,325	3,325	375	935	3,700	4,260	4,000	4,250	13,000	13,000	-	-	28,700	33,369
4311 Student Materials	48,800	73,043 18.600	58,001	103,321 18.000	53,247	73,595	29,095	42,007	82,341	115,602	33,328	56,528	51,420	92,420	-	-	273,889	440,914
4351 Office Supplies	18,600 13,720	18,600 41,529	18,000	18,000 34,315	19,200 21,600	19,200 46,742	12,000 12,000	17,000 32,142	31,200 33,600	36,200 78.884	15,600 18,000	15,600 66,142	18,000	18,000	-	-	101,400 100,120	106,400 263,812
4371 Custodial Supplies 4391 Food (Non Nutrition Program)	13,720 11,150	41,529 11,150	12,000 8,600	34,315 10,100	21,600 14,000	46,742 14,000	9,000	9,000	23,000	78,884 23,000	18,000 12,567	12,609	22,800 11,250	42,942 18,950	-	-	100,120 66,567	263,812 75,809
4391 Food (Non Nutrition Program) 4392 Uniforms	9,800	9,800	5,000	10,100	8,565	8,190	4,005	3,795	12,570	11,985	4,000	4,000	15,620	15,560		-	46,990	53,122
4393 PE & Sports Equipment	4,000	12,000	5,000	10,000	7,000	10,000	4,000	7,000	11,000	17,000	6,000	6,000	2,500	2,500			28,500	47,500
4395 Before & After School Program Supplies	4,000		3,000	10,000	7,000	10,000	4,000	7,000	11,000		0,000		2,300	2,300			20,300	
4399 All Other Supplies	12,190	27,145	17,091	34,888	11,413	26,338	8,551	21,509	19,964	47,847	18,318	32,312	30,024	55,012	_	-	97,587	197,204
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	CNCA - Burlington		0 0 0		t CNCA#3 - Castellanos		CNCA#3 - Eisner		CNCA#3 - Consolidated		CNCA#4 - Cisneros		CNHS#2 - Dalzell Lance		Central Administration		Camino Nuevo - Consolidated	
	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast
4390 Other Supplies	37,140	60,095	35,691	66,765	40,978	58,528	25,556	41,304	66,534	99,832	40,885	54,921	59,394	92,022	-	-	239,644	373,635
4411 Non Capitalized Equipment	16,309	79,725	12,409	120,126	18,288	38,129	9,156	33,614	27,444	71,742	15,648	58,132	61,898	119,289	-	-	133,708	449,015
4711 Nutrition Program Food & Supplies	598,524	419,204	530,244	323,861	466,679	285,126	176,667	135,623	643,346	420,750	449,383	291,623	236,661	191,303	-	-	2,458,158	1,646,740
4713 CACFP Supper Food & Supplies	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total 4000 · Supplies	758,893	1,038,805	781,645	990,976	639,888	798,856	276,956	430,036	916,843	1,228,892	604,598	901,036	495,073	623,729	-	-	3,557,052	4,783,438
5000 · Operating Services																		
5211 Travel & Conferences	12,000	17,000	60,250	60,250	8,000	8,597	1,597	1,597	9,597	10,194	5,000	26,600	20,620	25,620	-	-	107,467	139,664
5311 Dues & Memberships	9,205	9,055	11,310	11,265	6,497	5,823	3,170	3,938	9,667	9,761	8,210	8,295	16,500	16,940	-	-	54,892	55,315
5451 General Insurance			-				25,277	25,277	25,277	25,277			3,904	3,998	-	-	29,181	29,275
5511 Utilities	144,523	144,523	104,466	104,466	142,541	142,541	49,505	45,756	192,046	188,298	127,924	127,924	120,870	110,103	-	-	689,829	675,314
5521 Security Services	40,740	57,404	1,400	2,460	500	1,500	2,300	2,300	2,800	3,800	500	657	5,090	14,441	-	-	50,530	78,763
5531 Housekeeping Services	86,550	123,150	72,000	182,775	106,000	147,700	24 605	26,934	106,000	174,634	114,300	137,100	66,723	89,783	-	-	445,573	707,442
5599 Other Facility Operations & Utilities	41,237	42,104	44,993	48,441	61,875	64,039	21,685	24,119	83,560	88,159	69,955	69,955	55,841	64,609	-	-	295,586	313,269
5611 School Rent - Private Facility	575,176	593,640	-	-	-	=	218,928	218,928	218,928	218,928	-	=	533,202	552,202	-	-	1,327,306	1,364,770
5613 School Rent - Prop 39	- 0.00		44.000	40.050	-		6.908	-5.000	6.908	-	4 000	- 2.020	25.005		-	-	-	
5619 Other Facility Rentals	8,011	11,458 44,009	14,638	18,958	38,071	3,924	-,	6,908 19,641	-,	10,832	1,000	3,820	35,866	39,726 56,838	-	-	66,423	84,795
5621 Equipment Lease	44,009 43,000		26,459	26,459	44,000	38,071 44.000	19,641 25,000		57,712	57,712	30,205 40,000	30,205 60,000	54,412 35,000	73,500	-	-	212,798 217,000	215,224 352,823
5631 Vendor Repairs	16,800	68,323 16,800	30,000 32,000	82,000 40,000	21,465	21,090	17,400	25,000 17,400	69,000 38,865	69,000	12,000	15,000	48,300	32,000	-	-	147,965	352,823 142,290
5812 Field Trips & Pupil Transportation	16,800		32,000	40,000 3,706	21,465	1,004	17,400	2,505	38,865	38,490 3.509	15,000	15,000	48,300	32,000	-	-		28,092
5821 Legal 5823 Audit	-	1,996 694	-	1,035	-	1,004 554	-	2,505 529	-	1,083	15,000	15,000	-	597	-	-	15,000	28,092 4,337
5831 Advertisement & Recruitment	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	10,000	10,000	5,000	5,000	5,000	5,000	-	-	30,000	30,000
5841 Contracted Substitute Teachers	5,000	12,000	5,000	225,000	5,000	72,261	5,000	36,000	10,000	108,261	5,000	151,000	1,800	73,240	-	-	1,800	569,501
5842 Special Education Services	330,000	385,910	459,250	396,650	209,000	244.500	104,500	145,375	313,500	389,875	197,500	327,150	185,300	284,000	-	-	1,485,550	1,783,585
5843 Non Public School	330,000	365,910	75,185	75,185	209,000	244,300	104,500	145,375	313,500	369,673	2,980	8,680	185,300	284,000		-	78,165	1,765,565 83,865
5844 After School Services	177,559	203,483	177,559	203,483	177,559	203,483			177,559	203,483	124,387	203,483					657,065	813,931
5849 Other Student Instructional Services	59,280	331,392	177,555	506,427	177,555	322,002		195,607	177,555	517,608	8,840	342,894	33,689	483,436			101,809	2,181,758
5852 Professional Development	18,813	178,036	18,375	165,936	19,675	142,191	19,413	85,933	39,088	228,124	28,250	166,105	3,963	107,387			101,803	845,587
5854 Nursing & Medical (Non-IEP)	4,100	4,100	6,000	6,000	3,500	3,500	2,500	2,500	6,000	6,000	6,658	6,658	2,000	2,000			24,758	24,758
5859 All Other Consultants & Services	23,041	149,970	13,946	132,105	36,375	101,345	7,608	39,951	43,983	141,295	33,803	124,479	31,129	140,358			145,904	688,207
5861 Non Instructional Software	55,664	96,468	61,741	115,881	49,346	81,047	32,369	52,040	81,715	133,087	67,311	85,182	46,751	101,175			313,182	531,793
5865 Fundraising Cost	33,004	30,400	01,741	113,001	45,540	01,047	32,303	32,040	01,715	155,007	07,511	03,102	40,731	402	_		313,102	402
5871 District Oversight Fees	65,111	60.660	75,671	71.442	52.296	44.907	28.443	25.982	80.739	70.888	65.554	63.437	65,138	63,177			352,214	329.604
5872 Special Education Fees (SELPA)	107,190	107,671	126,630	128,564	85,570	79,030	48,508	47,574	134,078	126,604	110,097	114,296	92,292	96,277	_	_	570,287	573,412
5881 Intra-Agency Fees	1,000,487	939,205	1,084,605	1,012,440	766,046	652,203	421,412	387,475	1,187,458	1,039,678	931,968	898,344	927,906	906,550	_	_	5,132,424	4,796,218
5895 Bad Debt Expense	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	_,00.,,000	-,,	-	-	-	-	-,,	-	-	-	-	-	_	-	-	
5899 All Other Expenses	11,737	11,737	14,482	14,482	11,025	12,582	5,422	5,422	16,447	18,004	11,590	16,815	13,305	13,305		-	67,562	74,344
5911 Office Phone	20,616	20,616	9,492	9,492	13,764	9,093	7,966	7,966	21,730	17,059	9,528	9,528	16,716	16,716		-	78,082	73,411
5913 Mobile Phone	792	792	1,512	1,512	4,020	4,020	1,512	1,512	5,532	5,532	3,600	3,600	840	1,380	-	-	12,276	12,816
5921 Internet	16,800	16,800	18,470	18,470	18,470	18,470	18,470	18,470	36,940	36,940	18,470	18,470	20,926	20,926	-	-	111,605	111,605
5923 Website Hosting	-	-	-	_	-	-	-	_	-	-	-	_	-	-	-	-	_	
5931 Postage & Shipping	800	8,000	1,250	6,750	3,500	6,500	500	5,300	4,000	11,800	2,000	4,000	5,000	8,000	-	-	13,050	38,550
5999 Other Communications	-	57,321	-	67,684	-	45,828	-	25,927	-	71,754	-	59,052	-	49,193	-	-	-	305,004
Total 5000 · Operating Services	2,918,243	3,719,319	2,546,685	3,744,319	1,884,097	2,526,803	1,095,033	1,508,866	2,979,131	4,035,669	2,051,629	3,103,655	2,448,083	3,456,761	-		12,943,770	18,059,723
6000 · Capital Outlay																		
6901 Depreciation Expense	133,720	152,185	613,199	626,137	68,496	83,126	69,967	81,742	138,464	164,868	88,205	113,928	107,140	162,401	-	-	1,080,727	1,219,519
6903 Amortization Expense	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
6999 Capital Outlay	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total 6000 · Capital Outlay	133,720	152,185	613,199	626,137	68,496	83,126	69,967	81,742	138,464	164,868	88,205	113,928	107,140	162,401		-	1,080,727	1,219,519
7000 · Other Outgo																		
7438 Interest Expense	-	-	210,583	210,583	-	-	-	-	-	-	-	-	-	-	-	-	210,583	210,583
Total 7000 · Other Outgo	-	-	210,583	210,583	-	-	-	-	-	-	-	-	-	-	-	-	210,583	210,583
TOTAL EXPENSE	8,909,089	10,429,083	9,964,346	11,933,010	6,841,322	7,796,869	3,775,402	4,451,266	10,616,723	12,248,135	8,462,627	10,234,093	8,031,324	9,230,524	-	-	45,984,109	54,074,846
NET INCOME	216,150	(57,910)	71,213	(418,489)	214,126	(57,355)	46,977	(44,633)	261,103	(101,988)	78,969	(93,464)	257,180	28,220	-	-	884,615	(643,631

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eginning Cash Balance
Cash Flow from Operating Activities
Net Income
Change in Accounts Receivable
Prior Year Accounts Receivable
Current Year Accounts Receivable
Change in Due from
Change in Accounts Payable
Change in Due to
Change in Accrued Vacation
Change in Payroll Liabilities
Change in Prepaid Expenditures
Change in Deposits
Change in Deferred Revenue
Depreciation Expense
Cash Flow from Investing Activities
Capital Expenditures
Cash Flow from Financing Activities
Source - Sale of Receivables
Use - Sale of Receivables
Source - Loans
Use - Loans

Ending Cash Balance

CNCA - Bo	urlington	on CNCA#2 - Kayne Siart		CNCA#3 - Castellanos		CNCA#3 - Eisner		CNCA#3 - Consolidated		CNCA#4 - Cisneros		CNHS#2 Lar		Cen Adminis		Camino Nuevo - Consolidated	
2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast	2021-22 Budget - Approved	2021-22 Forecast
2,227,459	3,033,269	971,644	1,677,764	1,227,768	2,000,901	1,802,564	2,032,231	3,030,333	4,033,132	1,172,258	1,849,639	668,193	1,866,820	21,442	1,417,249	8,091,327	13,877,874
216,150	(57,910)	71,213	(418,489)	214,126	(57,355)	46,977	(44,633)	261,103	(101,988)	78,969	(93,464)	257,180	28,220	-	-	884,615	(643,631)
1,979,895 (2,475,412)	1,297,747 (1,116,171)	2,106,104 (2,327,299)	1,550,032 (891,744)	1,578,042 (1,669,828)	974,224 (700,114)	796,606 (992,812)	644,569 (408,375)	2,374,648 (2,662,640)	1,618,793 (1,108,489)	1,894,225 (1,941,711)	1,410,778 (745,311)	1,839,838 (2,688,370)	2,198,714 (415,739)	-	-	10,194,709 (12,095,433)	8,076,064 (4,277,454)
(18,904) (818)	2,132 9,404 181,028	- (21,873) (1,141)	3,157 (7,414) 247,868	(16,743) (742)		- (7,439) (486)	- 37,662 107,362	- (24,182) (1,227)	0 27,820 232,344	(18,908) (1,036)	- (11,024) 269,655	- (15,499) (730)	(939) (292,668) (331,714)	(2,027)	(80) (6,231) (1,388,672)	- (101,393) (4,952)	4,271 (280,113) (789,491)
-	- 103,610	-	113,668	` -	- 69,168	-	46,151	-	- 115,319	-	- 112,485	-	52,903		44,123	-	542,107
(102,801)	(2,999) -	(45,354) -	(1,736)	(54,060)	(26,889)	(45,084) -	(2,078)	(99,143)	(28,967) -	(26,782)	(613) -	(99,018)	(2,824)	(15,000)	94,872	(388,098)	57,733
133,720	(232,704) 152,185	613,199	(368,840) 626,137	68,496	(187,662) 83,126	- 69,967 -	(104,924) 81,742	138,464	(292,586) 164,868	88,205	(315,342) 113,928	107,140	(369,990) 162,401	-	-	1,080,727	(1,579,462) 1,219,519
(1,540)	(101,585) -	(11,000)	(41,246) -	-	(5,786) -	(1,500) -	(38,977) -	(1,500)	(44,763) -	-	(56,414) -	-	(126,403) -	-	-	(14,040)	(370,412)
-	-	-		-	1	-	1	-	1	-	-	-	-	-	-	-	-
-	- 1	- (388,810)	- (388,810)	-		-		-		-	- 1	-	-	-	-	- (388,810)	- (388,810)
1,957,749	3,268,007	966,681	2,100,348	1,347,062	2,264,751	1,668,793	2,350,730	3,015,855	4,615,482	1,245,219	2,534,317	68,733	2,768,782	4,415	161,260	7,258,652	15,448,196

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CAMINO NUEVO CHARTER ACADEMY

Financial Analysis January 2022

Net Income

Camino Nuevo Charter Academy is projected to achieve a net loss of (\$644K) in FY21-22 compared to \$885K in the board approved budget. Reasons for this negative \$1.53M variance are explained below in the Income Statement section of this analysis.

Balance Sheet

As of January 31, 2022, the school's cash balance was \$21.50M. By June 30, 2022, the school's cash balance is projected to be \$15.45M, which represents a 29% reserve.

As of January 31, 2022, the Accounts Receivable balance was \$96K, down from \$98K in the previous month, due to the receipt of revenue earned in FY20-21.

As of January 31, 2022, the Accounts Payable balance, including payroll liabilities, totaled \$1.68M, compared to \$1.63M in the prior month.

As of January 31, 2022, CNCA had a debt balance of \$10.43M. An additional \$195K will be paid this fiscal year. Debt balance is related to 3rd St/Prop 55 Long-Term loan due back to the State.

Income Statement

Revenue

Total revenue for FY21-22 is projected to be \$53.43M, which is \$6.56M or 14.0% over budgeted revenue of \$46.87M.

Local Control Funding Formula Sources: Due to decreased enrollment and ADA, LCFF Sources are projected to be \$2.3M under budget.

Object Code 8221: Federal Nutrition Revenue is expected to be \$693K under budget. Due to participation rates for the school nutrition program being lower than budgeted. Reduced revenue is partially offset by decreased nutrition food expenses (**Object 4711**).

Object Code 8299: All Other Federal Revenue is expected to be \$8,532K over budget due to the inclusion of GEER, ESSER I, ESSER II, and ESSER III spending plans. Revenue is offset by increased expenses.

Object Code 8593: After School Education and Safety (ASES) funding is expected to be \$157K over budget due to Cisneros being awarded the full grant which had been reduced in prior years. In addition, ASES funding for all charters increased by 14.6%. This is offset by increased ASES third party provider costs (**Object 5844**).

This report will discuss revenue and expenditure variances from the Board-approved budget that are above \$100,000 and 10%.



Object Code 8692: Grant revenue is expected to be \$237K over budget based on UnidosUS grants received across the charters as well as a \$25k grant received by Eisner from The Angelo Family Charitable Foudation and a \$186K grant received from New Ventures Fund.

Object Code 8698: SELPA Grants are projected to be \$179K over budget based on STEP grants awarded to the charter schools.

Object Code 8999: Prior Year revenue is expected to \$151K over largely due to \$83K of SB740 adjustments from final appotionments and \$20K of SMAA funds received.

Expenses

Total expenses for FY21-22 are projected to be \$54.07M, which is \$8.09M or 17.6% over budgeted expenditures of \$45.98M.

Object Code 1110: Teacher Salaries is projected to be \$593K over budget as a result of additional intervention teacher positions added with ESSER funds as well as increased teacher costs based on final teacher bargaining agreement.

Object Code 1175: Teacher Stipends expense is projected to be \$411K over budget largely as result of FY21-22 Recognition Stipends given to all returning teachers. In addition, Dalzell Lance increased their intervention program for both summer and Saturday school. These increases are funded by ESSER or Expanded Learning Oportunity funds (ELO).

Object Code 1299: Certificated Pupil Support expense is projected to be \$183K under budget as a result of multiple open positions for the SPED Program.

Object Code 2900: Other Classified salaries are projected to be \$766K over budget. This is related to additional positions added with ESSER funds as well as Health Clerks added across the sites with LACOE COVID funds.

Object Code 3112: PERS expense is projected to be \$185K over budget as a result of increases classified salaries being funded by one-time funds.

Object Code 3501: State Unemployment Insurance expense is projected to be \$149K under budget based on final SUI percentage decreasing from 1.23% to 0.50%.

Additional one-time funds were used to cover expenses in the following budget line items:

- **Object Code 4111:** Core Curricula Materials are \$1.2M over budget. This includes new curriculum across all charter schools.
- **Object Code 4311:** Student Materials are \$167K over budget. This includes addition of student software.
- **Object Code 4371:** Custodial Supplies are \$164K over budget due to increased COVID related cleaning materials.
- **Object Code 4390:** Other Supplies are \$134K over budget. This includes personal protective equipment (PPE) as well as COVID tests.
- **Object Code 4411:** Non Capitalized Equipment is \$315K over budget due to planned technology purchases
- Object Code 5841: Contracted Substitute Teachers expense is \$568K over budget.

This report will discuss revenue and expenditure variances from the Board-approved budget that are above \$100,000 and 10%.



- **Object Code 5849:** Other Student Instructional Services expense is \$2,080K over budget. This includes Independent Study for the first school semester as well as Mental Health Program Fee.
- Object Code 5852: Professional Development expense \$737K over budget.
- Object Code 5859: All Other Consultants & Services is \$542K over budget. This
 includes COVID coordinator expenses across all sites as well as increased technology
 services.
- **Object Code 5999:** Other Communications expense is \$305K over budget. This includes student hotspots for the school year.
- **Object Code 6901:** Depreciation expense is \$139K over budget. This includes depreciation for increased capital equipment purchases being made.

Object Code 4711: Nutrition Program Food expense is projected to be \$811K under budget due to lower participation rates in the school nutrition program. This is offset by decreased nutrition revenue (**Object Code 8220, 8520**).

Object Code 5531: Housekeeping Services expense is projected to be \$262K over budget due to increased school maintenance costs and the need to outsource custodial services for staff shortages and custodians being out.

Object Code 5631: Vendor Repairs are projected to be \$136K over budget due to increased HVAC and other facility repairs.

Object Code 5842: Special Education Services expense is projected to be \$298K over budget based on current expenditure trend. This is largely due to usage of SPED services and substitutes to cover for open positions.

Object Code 5844: After School Services expense is projected to be \$157K over budget. As mentioned above, this is related to Cisneros grant increase as well as an overall increase in funding.

Object Code 5861: Non Instructional Software expense is \$219K over budget due to additional programs purchased across the school sites.

ADA

Budgeted average ADA for FY21-22 is 2982.05 based on an enrollment of 3139 and a 95.0% attendance rate.

The forecast assumes an ADA of 2696.99 based on an enrollment of 3069 and an 88.0% attendance rate.

In Month 5, ADA was 2475.63 with 3044 students enrolled at the end of the month and an 82.4% ADA rate.

Average ADA for the year (through Month 5) is 2622.76 (an 86.3% ADA rate for the year to date).

This report will discuss revenue and expenditure variances from the Board-approved budget that are above \$100,000 and 10%.

CAMINO NUEVO CHARTER ACADEMY
2021-22 Cash Flow Forecast
Prepared by ExED. For use by ExED and ExED clients only. © 2021 ExED

State Schedule:		# of months remaining in F	P-2	11 P-2	10 P-2	9 P-2	8 P-2	7 P-2	6 P-2	5 P-2	4 P-1	3 P-1	2 P-1	1 P-1				
District Schedule:			P-2	P-2	P-2	P-2	P-2	P-2	P-2	P-1	P-1	P-1	P-1	P-1				
	2021-22	2021-22	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL							FORECAST	Budget Variance	
	Budget	Trend	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Accrual	Jul-21 - Jun-22	Better / (Worse) % Be	etter / (Worse)
8 - State Apportionment Schedule, FY 20-21 Version, Paid on a Lag 1 - District Apportionment Schedule, Paid on Time			0% 6%	5% 12%	5% 8%	9% 8%	9% 8%	9% 8%	9% 8%	9% 1/3	9% 1/6	4% 1/6	4% 1/6	4% 1/6	80% 0			
# of School Days in Month			0	0	16	18	16	20	19	18	14	15	20	18		174		
Enrollment	3,139	3069														3069	(70)	-2%
Unduplicated Pupil Percentage ADA	2,982.05	80% 2696.99														94% 2,696.99	0 (285)	15%
Income																		
8011-8098 · Local Control Funding Formula Sources 8011 Local Control Funding Formula	21,916,044	19,533,438	1,087,904	1,087,904	1,958,228	1,958,228	_	3,916,456	1,958,228	1,473,780	1,473,780	1,473,780	1,473,780	1,473,780	197,591	19,533,438	(2,382,605)	-11%
8012 Education Protection Account	4,819,837	5,516,413		-	1,452,612	-	_	1,452,612	-		-	1,167,797	-	-	1,443,392	5,516,413	696,576	14%
8019 Local Control Funding Formula - Prior Year		-	-	-		-	-	-	-	-	-	-	-	-	-	-	-	
8096 In Lieu of Property Taxes	8,485,513	7,910,514	523,300	1,046,600	697,733	129,314	697,733	1,266,151	697,733	918,983	459,491	459,491	459,491	459,491	95,003	7,910,514	(574,998)	-7%
8098 In Lieu of Property Taxes, Prior Year	-	-														-	-	
Total 8011-8098 · Local Control Funding Formula Sources 8100-8299 · Federal Revenue	35,221,394	32,960,366	1,611,204	2,134,504	4,108,573	2,087,542	697,733	6,635,219	2,655,961	2,392,762	1,933,271	3,101,068	1,933,271	1,933,271	1,735,987	32,960,366	(2,261,028)	-6%
8181 Special Education - Federal (IDEA)	797,102	748,334	47,689	95,380	63,586	11,785	63,585	115,387	63,586	92,783	46,391	46,391	46,391	46,391	8,987	748,334	(48,768)	-6%
8221 Child Nutrition - Federal	2,282,932	1,589,851	-	-	-	-	-	83,721	-	557,808	108,142	124,779	158,054	183,010	374,338	1,589,852	(693,080)	-30%
8223 CACFP Supper	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
8291 Title I	1,265,376	1,369,616	-	-	-	343,079		-	373,685	-	-	342,404	-	-	310,448	1,369,616	104,240	8%
8292 Title II	137,677 146,089	139,375	-	-	-	-	37,242 34,925	-	-	-	-	34,844 36,522	-	-	67,289	139,375	1,698	1%
8294 Title III 8295 Title IV, SSAE	97,538	146,089 99,626		-		25,971	34,925	-	50,856	-	-	24,906	-	-	74,642 (2,108)	146,089 99,626	2,088	2%
8296 Title IV, PCSGP	-	-	_	-	-		_	-	-	-	-	-	-	-	-	-	-	2,0
8297 Facilities Incentive Grant	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
8299 All Other Federal Revenue	31,486	8,563,425	223,759	781,748	469,979	-	-	1,235,179	-	-	-	6,254,569	-	-	(401,809)	8,563,425	8,531,939	27098%
Total 8100-8299 · Other Federal Income	4,758,199	12,656,316	271,448	877,128	533,565	380,835	135,752	1,434,287	488,127	650,590	154,534	6,864,416	204,445	229,401	431,788	12,656,316	7,898,117	166%
8300-8599 · Other State Revenue	188,471	101,796						12,806		20.250	6.043	7,976	40.404	44.500	22.020	404.706	(86,675)	-46%
8520 Child Nutrition - State 8550 Mandate Block Grant	64,252	64,252		-	-	-	-	64,251	-	28,369	6,913	7,976	10,104	11,699	23,929	101,796 64,251	(1)	-46%
8561 State Lottery - Non Prop 20	447,308	444,525	_	-	-	-	_	-	219,715	-	-	111,131	-	-	113,679	444,525	(2,782)	-1%
8562 State Lottery - Prop 20	146,120	177,265	-	-	-	-	-	-	-	-	-		-	-	177,265	177,265	31,144	21%
8560 Lottery Revenue	593,428	621,790	-	-	-	-	-	-	219,715	-	-	111,131	-	-	290,944	621,790	28,362	5%
8587 State Grant Pass-Through			-	-	-	-	-	-	-	-	-	-	-	-	-		-	
8591 SB740	718,710	756,996	-	-	-	-	-	-	-	-	-	74,981	-	-	682,014	756,996	38,286	5%
8592 State Mental Health 8593 After School Education & Safety	657,065	813,931		-	-	-	-	-	-	-	-	203,483	-	-	610,449	813,931	156,866	24%
8594 Supplemental Categorical Block Grant	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
8599 State Revenue - Other	2,345,088	2,467,302	1,180,045	-	-	-	1,194,849	-	665,131	-	-	616,826	-	-	(1,189,548)	2,467,302	122,214	5%
Total 8300-8599 · Other State Income	4,567,013	4,826,068	1,180,045	-	-	-	1,194,849	77,057	884,846	28,369	6,913	1,014,398	10,104	11,699	417,788	4,826,067	259,054	6%
8600-8799 · Other Local Revenue																		
8631 Sale of Equipment & Supplies 8634 Food Service Sales				-	-	-	-	-	-	-	-	-	-	-	-		-	
8650 Leases & Rentals		_	_	-	-	-	_	-	-	-	-	-	-	-	-	_	-	
8660 Interest & Dividend Income	66,000	66,000	5,913	5,289	0	0	12,359	9,906	0	6,507	6,507	6,507	6,507	6,507	-	66,000	-	
8662 Net Increase (Decrease) in Fair Value of Investments	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
8681 Intra-Agency Fee Income	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
8682 Childcare & Enrichment Program Fees	-	-	-	-	-	-	-	-	-	=	-	-	-	-	-	-	-	
8689 All Other Fees & Contracts 8692 Grants	112,500	349,200	111,071	-	-	21,000		29,500	186,200	-	-	-	-	-	1,429	349,200	236,700	210%
8694 In Kind Donations	-	343,200	-	_	-	21,000	_	-	100,200	-	_	_	-	_		343,200	-	210/0
8695 Contributions & Events	-	-	-	10	-	-	47	112	-	-	-	-	-	-	-	169	169	100%
8696 Other Fundraising	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
8697 E-Rate	89,284	89,284	(2,256)	-	(6,651)	-	-	-	632	9,737	13,960	11,848	27,872	16,072	18,069	89,284	-	
8698 SELPA Grants	-	179,053	-	1,950	1,950	1,950	6,902	124,548	33,950	1,950	1,950	1,950	1,950	-	3	179,053	179,053	100%
8699 All Other Local Revenue 8792 Transfers of Apportionments - Special Education	2,054,334	35,185 2,118,728	3,490 122,908	10,734 245,816	8,028 163,877	9,239 43,096	3,576 222,796	113 326,693	180,030	1 262,689	1 131,345	1 131,345	1 131,345	1 131,345	25,445	35,185 2,118,728	35,185 64,394	100% 3%
5.52 Transiers of Apportionments - Special Education	2,034,334	2,110,720	122,500	243,010	103,077	+3,030	222,130	320,033	100,030	202,003	131,343	131,343	131,343	131,343	د++,دے	2,110,728	U+,334	370

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Actuals as of 1/31/2022

CAMINO NUEVO CHARTER ACADEMY

5311 Dues & Memberships

2021-22 Cash Flow Forecast

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55.315

18.290

9.595

202

31.847

1.102

166

1.482

54.892

Actuals as of 1/31/2022 State Schedule P-2 P-2 P-2 P-2 P-2 P-2 P-2 P-2 P-1 P-1 P-1 P-1 District Schedule P-2 P-1 P-1 P-1 P-1 2021-22 2021-22 ACTUAL ACTUAL ACTUAL ACTUAL ACTUAL ACTUAL ACTUAL **Budget Variance** Trend Jul-21 Aug-21 Sep-21 Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22 Accrual ul-21 - Jun-22 Better / (Worse) % Better / (Worse) Total 8600-8799 · Other Income-Local 2,322,119 2,837,450 241,127 263,799 167,204 75,286 245,679 490,871 400,812 280,883 153,762 151,651 167,674 153,924 44,946 Prior Year Adjustments 150,847 8999 Other Prior Year Adjustment 150,847 13.050 134,384 100% 150,847 13,050 4,209 150,847 100% **Total Prior Year Adjustments** 134,384 (796) 150,847 TOTAL INCOME 46,868,725 53,431,046 3,303,824 3,275,431 4,822,392 2,678,047 2,274,013 8,636,638 4,433,955 3,352,605 2.248.480 11,131,532 2,315,494 2,328,295 2.630.509 53,431,216 6.562,491 14% Expense 1000 · Certificated Salaries 1110 Teachers' Salaries 11,041,541 11,939,057 1,025,600 1,023,508 1,043,342 1,054,676 1,058,077 1,044,952 1,076,650 1,081,369 1,073,110 1,079,009 1,068,391 5,899 (593,042) -5% 1120 Teachers' Hourly 55.090 37.600 4.467 4.364 4.219 4.328 4.437 4.318 3.572 4.324 3.008 3.948 2.256 940 44.180 10.910 20% 1170 Teachers' Salaries - Substitute 337,953 338,571 5.016 4,753 6,477 14,597 4,912 12,996 24,084 32,164 38,936 27,086 35,550 20,314 60,949 287.833 50,120 15% 1175 Teachers' Salaries - Stipend/Extra Duty 527,645 939.105 105,081 361,471 10,248 10,181 7,970 127,033 9,559 8,381 8,592 8,222 8,486 207,521 65,660 938.405 (410,760)-78% 1211 Certificated Pupil Support - Librarians 1213 Certificated Pupil Support - Guidance & Counseling 1215 Certificated Pupil Support - Psychologist 361.782 360,700 22,552 28,552 22,552 22,552 22,552 22,552 22,552 30,058 30,058 30,058 30,058 30,058 47,630 13% 1299 Certificated Pupil Support - Other 653,291 557,566 26,059 38,783 33,181 32,130 33,539 33,529 32,605 46.894 48.262 47,350 47.806 47.806 2,280 470,225 183,066 1300 Certificated Supervisors' & Administrators' Salaries 2,886,903 2.691.430 209,550 261,182 230,640 213,516 218,193 228,307 209,992 221,181 221,181 221,181 221,181 221,181 209,617 7% 1900 Other Certificated Salaries Total 1000 · Certificated Salaries 15,864,204 16,864,029 368,256 1,724,808 1,330,969 1,340,536 1,346,170 1,486,930 1,348,062 1,418,900 1,432,722 1,410,016 1,426,039 1,597,528 135,727 16,366,662 (502,459) -3% 2000 · Classified Salaries 2111 Instructional Aide & Other Salaries 2,201,262 2,727,829 230,121 200,012 201,994 182,943 161,863 108,031 230,174 278,632 193,831 254,403 154,123 61,322 2,288,619 (87,357) -4% 31,170 2121 After School Staff Salaries 2131 Classified Teacher Salaries 319,635 320,728 1,721 30,365 29,098 26,036 26,384 32,782 23,594 27,790 33,641 23,402 30,715 17,552 7,313 9,242 3% 638,561 46.018 41.094 51.271 58.621 51.648 55.852 51.547 11.453 -4% 2200 Classified Support Salaries 603.142 36.345 83.351 48.395 48.849 41.849 626.293 (23.151) 2300 Classified Supervisors' & Administrators' Salaries 56,376 3,098 2,080 4,468 4,721 5,174 4,540 4,320 4,968 4,536 4,752 4,752 1,080 (48,489) 100% 2400 Classified Office Staff Salaries 1,150,286 1,290,537 80,591 142,943 98,933 89,911 100,207 104,201 90,851 92,911 101,335 95,719 98,527 98,527 14,039 1,208,695 (58,409) -5% 2900 Other Classified Salaries 1.191.375 2 102 537 48 504 176 009 159.850 163 317 164 752 177 951 151 923 175 475 202 362 163 449 190 171 146 580 36.738 1 957 081 (765,707) -64% Total 2000 · Classified Salaries 5,465,700 7,136,568 201,428 662,790 538,368 534,575 520,855 527,990 420,033 581,941 679,558 532,585 634,420 473,080 131,946 6,439,570 (973,870) -18% 3000 · Employee Renefits 3111 STRS - State Teachers Retirement System 2,684,223 2.853.394 66.743 236,615 222,278 224,361 225,174 232,491 225,363 240,078 242,417 238,575 241,286 270,302 22,965 (4,424) 3212 PERS - Public Employee Retirement System 1.252.192 1 634 988 55,498 106.021 123,723 121,939 119,712 116,460 98.491 133,323 155.687 122.015 145.346 108.383 30,229 1.436.825 (184,634) -15% 3213 PARS - Public Agency Retirement System 42 133 3311 OASDL - Social Security 338 873 442 467 15 450 41 780 33 686 33 440 32 386 32.850 26 398 36 080 33 020 39 334 29 331 8 181 404 069 (65 195) -19% 3331 MED - Medicare 309,284 348,009 9,385 34,164 26,581 26,661 26,402 28,543 24,949 29,012 30,628 28,168 29,877 30,024 3,881 (18,991) -6% 1.777.782 1.945.560 260.797 95.348 727.339 173.236 173,236 173,236 11.467 63.450 1.805.684 (27.902) 3401 H&W - Health & Welfare (41.689) (43.766)(51.538) 70.599 193.971 -2% 3501 SUI - State Unemployment Insurance 262,358 120.003 3,205 11,781 9,166 9,225 9,104 9,842 8,603 10,004 10,561 9,713 10,302 10,353 1,338 149,160 57% 237.361 273.111 19.762 19.762 31,935 19.762 15,439 252,680 66,901 19,833 39.524 19,762 (15,319) -6% 3601 Workers' Compensation Insurance 3751 OPEB, Active Employees 3901 Other Retirement Benefits 3902 Other Benefits 34.028 100% Total 3000 · Employee Benefits 6,862,074 7,617,532 130,044 6,995,351 (133,277) 478,133 545,541 393,829 371,729 339,854 1,193,825 454,402 674,404 674,423 624,489 654,819 459,859 -2% 4000 · Supplies 4111 Core Curricula Materials 221,433 1,469,554 59,060 10,892 309,309 14,039 250,951 530,507 82,064 41,824 42,727 42,727 42,727 42,727 1,469,554 4211 Books & Other Reference Materials 28.700 32,560 1.177 4.423 3,293 8.256 6.958 (3.457)2.544 2.544 2.544 2.544 2.544 (4.669) -16% 4311 Student Materials 273,889 440,914 36,580 54,674 23,405 14,396 23,605 101,620 2,432 36,840 36,840 36,840 36,840 36,840 440,914 (167.024) 4351 Office Supplies 101.400 106.400 1.543 5,570 7.803 5,493 6.205 9,948 6.641 12.640 12.640 12.640 12.640 12.640 106.400 (5,000) -5% 4371 Custodial Supplies 100,120 263.812 2,959 31,571 9,791 12,352 (25,342) 13,412 23,129 39,188 39,188 39,188 39,188 39,188 263,812 (163,692) 4391 Food (Non Nutrition Program) 66.567 75.809 4.461 11,099 17.346 2,435 7.699 6.261 6.641 4.033 3.959 3.959 3.959 3.959 (9.242) -14% 4392 Uniforms 46,990 53,122 18,942 3,699 3,534 5,078 5,078 5,078 5,078 5,078 (6,132) -13% 47.500 4393 PE & Sports Equipment 28,500 47.500 2,853 3,200 3,159 9,010 2,414 224 1,234 5,081 5,081 5,081 5,081 5,081 (19,000) -67% 4395 Before & After School Program Supplies 4399 All Other Supplies 97.587 197.204 8.199 4.847 28.185 10.316 7.155 11.075 13.362 22.813 22.813 22.813 22.813 22.813 197.204 (99.617) -102% 4390 Other Supplies 239,644 373,635 34,454 19,146 52,389 22,224 17,959 21,093 21,639 37,006 36,931 36,931 36,931 36,931 (133,991) -56% 133,708 449.015 24.466 117.377 29.175 38,576 12.268 29,227 14.905 36.604 36.604 36.604 36,604 36.604 449.015 (315,307) -236% 4411 Non Capitalized Equipmen 4711 Nutrition Program Food & Supplies 2,458,158 1,642,912 17,400 178,385 128,609 67,370 115,710 210,003 51,529 159,068 174,224 178,772 113,764 170,646 81,260 811,417 33% 4713 CACFP Supper Food & Supplies Total 4000 · Supplies 81,260 3,557,052 4,778,801 176,462 418,790 564,904 177,742 409,614 922,767 198,881 365,714 381.698 386.246 321.238 378,120 4.783.438 (1.226.386) 5000 · Operating Services 5211 Travel & Conferences 107,467 139,664 2,560 1,456 1,335 595 5,280 149 25,658 25,658 25,658 25,658 25,658 (32,197) -30%

(11.813)

(423)

-1%

1.482

1.482

1.482

CAMINO NUEVO CHARTER ACADEMY

2021-22 Cash Flow Forecast

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Actuals as of 1/31/2022 State Schedule P-2 P-2 P-2 P-2 P-2 P-2 P-2 P-2 P-1 P-1 P-1 P-1 District Schedule P-2 P-2 P-2 P-2 P-1 P-1 P-1 P-1 2021-22 2021-22 ACTUAL ACTUAL ACTUAL ACTUAL ACTUAL ACTUAL ACTUAL **Budget Variance** Jul-21 Budget Trend Aug-21 Sep-21 Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22 Accrual Jul-21 - Jun-22 Better / (Worse) % Better / (Worse) 5451 General Insurance 29,181 29,275 14,043 3,998 5,617 5,617 (94) 0% 5511 Utilities 689.829 675.314 38.703 14.128 84.253 84.253 84.253 84.253 84.253 15.636 14.515 2% 984 23,922 34.536 20.011 106.129 5521 Security Services 50,530 78,763 5,682 1,403 (412) 142 32,210 2,862 7,375 7,375 7,375 7,375 7,375 (28,233) -56% 445,573 707,442 39,854 45,008 39,655 48,626 62,914 69,702 67,776 66,781 66,781 66,781 66,781 66,781 707,442 5531 Housekeeping Services (261,869) 5599 Other Facility Operations & Utilities 295,586 313,269 27,889 10.844 19,826 16,694 36.987 37,391 19,038 28,920 28,920 28,920 28,920 28,920 (17,683) -6% 5611 School Rent - Private Facility 1,327,306 1,364,770 213,043 106,676 106,004 106,491 87,580 106,303 125,561 162,310 116,934 116,934 116,934 1,364,770 (37,464)-3% 5613 School Rent - Prop 39 5619 Other Facility Rentals 66,423 84,795 958 6,180 360 8,058 11,223 3,306 10,942 10,942 10,942 10,942 10,942 (18,372) -28% 215.224 5621 Equipment Lease 212.798 215.224 11,325 3,142 602 1,129 51 34,529 19.034 29.082 29.082 29.082 29.082 29.082 (2.426)-1% 5631 Vendor Repairs 217,000 352,823 24,473 41,811 35,794 29,141 16,194 45,846 66,796 18,554 18,554 18,554 18,554 18,554 352,823 (135,823) 5812 Field Trips & Pupil Transportation 147,965 142.290 900 1.800 4.134 1.800 26,731 26,731 26,731 26,731 26,731 142.290 5.675 4% 94 -87% 5821 Legal 15,000 15,000 74 2,000 6,561 18,102 793 28,092 (13,092) 5823 Audit 4,337 (4,337)100% 5831 Advertisement & Recruitment 30,000 30.000 2,051 3,695 4,851 4,851 4,851 4,851 4,851 5841 Contracted Substitute Teachers 1.800 569,501 61.486 78,315 118,702 90.586 105,615 61,798 44.472 1.705 1,705 1,705 1,705 1,705 569.501 (567,701) -31539% 1,485,550 1,783,585 155,105 155,105 5842 Special Education Services 72,528 100,184 77,054 45,594 80,248 275,722 206,607 150,123 155,105 155,105 155,105 78.165 83.865 1.293 7.194 9.101 83.865 5843 Non Public School 3,836 16.934 9.101 9.101 9.101 9.101 9.101 (5.700) -7% 5844 After School Services 657,065 813,931 11,500 202,417 106,879 77,323 83,162 83,162 83,162 83,162 83,162 (156,866) 915,970 2.181.758 29.309 157.296 263.037 157.296 157.296 2.181.758 5849 Other Student Instructional Services 101.809 291.750 52.509 157.296 (2.079.949) -2043% 5852 Professional Development 108,488 845,587 38,740 39,113 2,522 69,433 4,958 61,485 250 125,818 125,818 125,818 125,818 125,818 (737,099) -679% 24,758 24.758 24,758 5854 Nursing & Medical (Non-IEP) 358 4.880 4.880 4.880 4.880 4.880 5859 All Other Consultants & Services 145,904 688,207 129,421 6,479 9,176 1,254 11,555 7,332 84,240 87,750 87,750 87,750 87,750 87,750 688,207 (542,303) -372% 313.182 531,793 28.070 25,403 59.665 7.375 18.287 18.287 18.287 18.287 18.287 531.793 (218,611) -70% 5861 Non Instructional Software 219.958 74.439 25,447 5865 Fundraising Cost 402 100 302 (402) 100% 5871 District Oversight Fees 352,214 329,604 20,048 40,093 26,729 4,874 26,729 48,583 26,729 27,164 27,164 27,164 27,164 27,164 22,610 6% 5872 Special Education Fees (SELPA) 570 287 573 412 34,120 68,240 45.496 10,974 57,276 88,416 48,724 73.389 36 694 36 694 36 694 36 694 573 412 (3,125)-1% 5881 Intra-Agency Fees 5,132,424 4,796,218 1,269,574 1,028,257 624,597 624,597 624,597 624,597 336,206 7% 5895 Bad Debt Expense 5899 All Other Expenses 67,562 74.344 3,269 1,169 1,035 3,853 28,341 5,109 11,663 3,981 3,981 3,981 3,981 3,981 (6,782) -10% 5911 Office Phone 78 082 73 411 4.459 1,347 5.515 5.758 7.340 9.521 1.384 7.618 7.618 7.618 7.618 7.618 73 411 4 671 6% 5913 Mobile Phone 12,276 12,816 1,443 1,436 2,886 1,462 1,351 912 665 665 665 665 665 (540) -4% 5921 Internet 111.605 111 605 1,821 7.185 6.360 19,248 19.248 19,248 19.248 19.248 111 60 (0) 5923 Website Hosting 13.050 38,550 900 2,242 3,831 5,420 2,786 3,209 (488) 4.130 4.130 4,130 4.130 4,130 -195% 5931 Postage & Shipping (25.500) 5999 Other Communications 305,004 41,934 266 23,920 266 23,746 23,731 23,542 33,520 33,520 33,520 33,520 33,520 (305,004) 100% 12.943.770 18,042,294 941,724 592,108 2.800.471 1.035.045 785.534 1.212.031 889.022 2.345.893 1.822.377 1.928.118 1.827.995 1.697.765 181.641 18,059,723 (5,115,953) Total 5000 · Operating Services -40% 6000 · Capital Outlay 1.080.72 1,237,828 99.023 99.277 99.382 98.274 99.894 99.662 105.269 104.788 104.822 104,653 (138,792) 6901 Depreciation Expense 99.088 105.388 -13% 6903 Amortization Expense 6999 Capital Outlay Total 6000 · Capital Outlay 1,080,727 1,237,828 99,088 99,023 99,277 99,382 98,274 99,894 99,662 105,388 105,269 104,788 104,822 104,653 1,219,519 (138,792) 7000 · Other Outgo 210.583 7438 Interest Expense 210.583 108.174 104.324 Total 7000 · Other Outgo 210,583 210,583 108,174 (1,915) 104,324 55.887.636 2.265.090 4.043.059 5,835,993 3.500.301 5.443.436 3.410.061 5.492.240 5.200.372 4.986.243 4.969.333 4.711.005 660,619 54.074.846 TOTAL EXPENSE 45.984.109 3,557,094 (8,090,737) -18% NET INCOME (2.456.590) (1.013.601) (2.139.635) (2.951.892) (2.653.839) (2.382.710) (643.631) 884.615 1.038.734 (767.628) (879.047) (1.226.287) 3.193.202 1.023.894 6.145.289 1.969.890 (1.528,246) Operating Income 575,888 EBITDA 786,472 Beginning Cash Balance 13.000.903 13.877.874 14,013,696 19,836,143 21,434,986 18,124,425 17,270,564 20,256,534 21,497,141 16,858,772 13,858,793 20,110,221 17.626.494 15,448,196 13.877.874 **Cash Flow from Operating Activities** (2,456,590) (1,013,601) (1,226,287) 3,193,202 1,023,894 (2,139,635) (2,951,892) 6,145,289 (2,653,839) (2,382,710) 1,969,890 Net Income 1,038,734 (767,628) (879,047) (643,63) Change in Accounts Receivable 7,506,841 5,819,699 793,819 14,545 2,325 1,404 21,782 1,351 70,981 8,076,064 Prior Year Accounts Receivable 911,790 438,369 Current Year Accounts Receivable (4,277,454) (4.277.454) (4.277.454 (155,997) 57,467 197,975 299,230 (3,744) (11,159) 20,246 (2,370) Change in Due from (236,282) (161,094) 303,523 Change in Accounts Payable (280,113) (147,942) 348,158 2,010,910 (3,090,012) (30,031) (63.097) 93,788 (366.028) 660,619

CAMINO NUEVO CHARTER ACADEMY 2021-22 Cash Flow Forecast

															Actuals as of	1/31/2022		
			# of months remaining in FY	12	11	10	9	8	7	6	5	4	3	2	1			
	State Schedule:			P-2	P-2	P-2	P-2	P-2	P-2	P-2	P-2	P-1	P-1	P-1	P-1			
	District Schedule:			P-2	P-2	P-2	P-2	P-2	P-2	P-2	P-1	P-1	P-1	P-1	P-1			
]	2021-22	2021-22	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL							FORECAST	Budget Variance
		Budget	Trend	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Accrual	Jul-21 - Jun-22	Better / (Worse) % Better / (Worse)
Change in Due to	i		(789,491)	159,504	97,902	(560,227)	(59,099)	-	14,724	128,254	(2,216,163)	(10)	-	(1,321)	-	1,646,945	(789,491)
Change in Accrued Vacation			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Change in Payroll Liabilities			542,107	(332,074)	410,211	467,027	19,649	11,248	2,830	(36,784)	-	-	-	-	-	-	542,107	
Change in Prepaid Expenditures			57,733	295,176	-	(13,763)	-	(1,634)	(18,152)	(131)	-	-	-	-	(203,763)	-	57,733	
Change in Deposits			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Change in Deferred Revenue			(1,579,462)	(1,579,462)	-	-	-	-	-	-	-	-	-	-	-	-	(1,579,462)
Depreciation Expense			1,219,519	99,088	99,023	99,277	99,382	98,274	99,894	99,662	105,388	105,269	104,788	104,822	104,653	-	1,219,519	
Cash Flow from Investing Activities				-	-	-	-	-	-	-	-	-	-	-	-	-		
Capital Expenditures			(370,412)	(72,709)	(28,922)	(50,544)	(35,863)	(4,660)	(96,881)	(66,657)	(12,176)	-	-	(2,000)	-	-	(370,412)
Cash Flow from Financing Activities				-	-	-	-	-	-	-	-	-	-	-	-	-		
Source - Sale of Receivables			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Use - Sale of Receivables			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Source - Loans			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Use - Loans			(388,810)	-	-	(191,523)	(1,915)	-	-	-	-	(195,372)	-			-	(388,810)
Ending Cash Balance			12,184,773	14,013,696	19,836,143	21,434,986	18,124,425	17,270,564	20,256,534	21,497,141	16,858,772	13,858,793	20,110,221	17,626,494	15,448,196	15,448,196	15,448,196	

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Cover Sheet

Review of Taxes

Section: VII. Review of Taxes Item: A. Review of Taxes

Purpose: Vote

Submitted by:

Related Material: 6-30-21 CNCA Tax Return Draft 2.23.22.pdf

Camino Nuevo Charter Academy 3435 W. Temple street Los Angeles, CA 90026

Camino Nuevo Charter Academy:

Enclosed is the organization's 2020 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Please return Form 8879-EO to us as soon as possible, but no later than by May 16, 2022 the filing deadline.

In addition, tax-exempt organizations must make available for public inspection a copy of their annual returns for the preceding three years and exemption application, if applicable. An organization generally must furnish filings to anyone who requests them in person or in writing. An exempt organization may meet this requirement by posting all the documents on its website or at another organizations site as part of a database of similar materials. Specific requirements must be met to meet this exception.

CALIFORNIA FORM 199 RETURN:

The California Form 199 return has qualified for electronic filing. After you have reviewed your return for completeness and accuracy, please sign, date and return Form 8453-EO to our office. We will then transmit your return to the FTB. Do not mail the paper copy of the return to the FTB.

No payment is required.

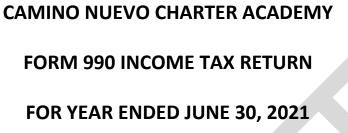
A few final reminders relating to your tax return filings:

- There are substantial penalties for failure to properly disclose and report foreign financial
 accounts and foreign activity. Please make sure you have informed us of any foreign financial
 accounts or foreign activity so that we have the necessary information to complete any required
 disclosures or filings.
- Be sure to review the returns prior to signing as you have final responsibility for all information included in the returns. Please contact us if you have any questions or concerns.
- We recommend you keep a paper or electronic copy of your tax returns permanently. Supporting documentation should be kept for a minimum of seven years based on IRS guidance.

CLA exists to create opportunities – for our clients, our people, and our communities. We value our relationship with you and thank you for your trust and confidence in allowing us to serve you. If we can assist you in making strategic, informed decisions in areas of tax or beyond, please contact us as questions arise throughout the year.

Sincerely,

CliftonLarsonAllen LLP



Form **8879-EO**

***** THIS IS NOT A FILEABLE COPY ***** IRS e-file Signature Authorization for an Exempt Organization endar year 2020, or fiscal year beginning JUL 1 , 2020, and ending JUN 30

			, 2020, and ending UUN 30	_ , ²⁰ <u>Z T</u>	2020
Department of the Treasury Internal Revenue Service	· ·	not send to the IRS. Ke w.irs.gov/Form8879E0	ep for your records. for the latest information.		LULU
Name of exempt organization				Taxpayer id	lentification number
	CHARTER ACADEMY			95-47	71789
Name and title of officer or p					
ADRIANA ABICH CHIEF EXECUTI					
	Return and Return Info	rmation (Whole Dollar	rs Only)		
check the box on line 1a, blank, then leave line 1b,		 and the amount on that hever is applicable, blank complete more than on if any (Form 990, Part VI) 	line for the return being filed w (do not enter -0-). But, if you en	ith this form w ntered -0- on th	as e
3a Form 1120-POL che			22)		
4a Form 990-PF check			(Form 990-PF, Part VI, line 5)		
5a Form 8868 check he	re b Balance d	ue (Form 8868, line 3c)			
6a Form 990-T check he			·····		
7a Form 4720 check he	re b b Total tax (Form 4720, Part III, line 1) Davida a Oribia at ta T	7b	
	tion and Signature Authors, I declare that X I am an of				
true, correct, and comple I consent to allow my inte to receive from the IRS (a processing the return or Agent to initiate an electr software for payment of t a payment, I must contact (settlement) date. I also a confidential information nidentification number (PIN PIN: check one box only X I authorize CI as my signature a state agency. PIN on the retu As an officer or electronically firegulating char Signature of officer or person subj	e on the tax year 2020 electronic (ies) regulating charities as part rn's disclosure consent screen. The person subject to tax with respect return. If I have indicated with the sas part of the IRS Fed/State ect to tax	ount in Part I above is the smitter, or electronic retuript or reason for rejection refund. If applicable, I authobit) entry to the financial eturn, and the financial insgent at 1-888-353-4537 nos involved in the processind resolve issues related to onic return and, if applications in the processing firm and the financial insgent at 1-888 related to onic return and, if applications in the processing resolve issues related to onic return and, if applications in the firm and fi	to the best of my knowledge are amount shown on the copy of moriginator (ERO) to send the of the transmission, (b) the reach horize the U.S. Treasury and its institution account indicated institution to debit the entry to the later than 2 business days pring of the electronic payment or the payment. I have selected able, the consent to electronic findicated within this return that gram, I also authorize the aforemy will enter my PIN as my signate by of the return is being filed with a PIN on the return's disclosure	nd belief, they a the electronic return to the IF ason for any de s designated Fi the tax prepai is account. To or to the paym f taxes to recei a personal unds withdraw to enter my t a copy of the mentioned ERC ure on the tax h a state agen	return. RS and slay in nancial ration revoke ent ve al. PIN 12345 Enter five numbers, be do not enter all zeros return is being filed with 0 to enter my year 2020 cy(ies) n.
Part III Certific	ation and Authentication	n			
number (EFIN) followed b	your six-digit electronic filing ide y your five-digit self-selected Pli	N.	9540529174 Do not enter all zer	os	oonfirm.
	imeric entry is my PIN, which is return in accordance with the re usiness Returns.				
ERO's signature MARI	LEN GOMEZ		Date ▶ <u>0</u> 2	2/23/22	
		st Retain This Form is Form to the IRS I	ı - See Instructions Unless Requested To D	o So	
LHA For Paperwork Re	duction Act Notice, see instru	ıctions.			Form 8879-EO (2020)

023051 11-03-20

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

A F	or the	lpha 2020 calendar year, or tax year beginning $$ JUL $$ $$ 1 $$, $$ $$ $$ $$ 2 $$ $$ 2 $$ $$ $$ and endi	ling J	UN 30, 2021	
B c	heck if oplicabl	C Name of organization		D Employer identifie	cation number
	Addre	S CAMINO NUEVO CHARTER ACADEMY			
	Name chang Initial	Doing business as		95-47717	89
	return Final return	3/35 W TEMPLE CTPEFT	m/suite	E Telephone numbe 213-417-	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	60,583,098.
	Amen return	LOS ANGELES, CA 90020		H(a) Is this a group re	
	Application	F Name and address of principal officer: ADKIANA ABICH			? Yes X No
	pendi	3435 W. TEMPLE STREET, LOS ANGELES, CA 9	002	H(b) Are all subordinates in	ncluded? Yes No
		empt status: $X = 501(c)(3) = 501(c)($) \checkmark (insert no.) $\checkmark = 4947(a)(1)$ or	527	If "No," attach a	list. See instructions
		te: > WWW.CAMINONUEVO.ORG		H(c) Group exemptio	
	orm of I rt I	organization: X Corporation	L Year o	of formation: 1999 N	M State of legal domicile; CA
	1	Briefly describe the organization's mission or most significant activities: OPERATE	ES F	OUR K-8 SCHO	OOLS AND
Activities & Governance		TWO HIGH SCHOOLS AS CHARTER SCHOOLS IN CALI	FORN	IA.	
rna	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of	of more	than 25% of its net ass	sets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	12
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			12
S S	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			516
Ϋ́Ε̈́	6	Total number of volunteers (estimate if necessary)			12
Ę	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.
				Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		<u>45,426,967.</u>	60,244,391.
	9	Program service revenue (Part VIII, line 2g)		0.	0.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		137,472.	63,102.
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		209,687.	275,605.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		45,774,126.	60,583,098.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		24,116,527.	23,396,100.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
×		Total fundraising expenses (Part IX, column (D), line 25) 96,318.			
Ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		20,687,868.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		44,804,395.	63,767,039.
		Revenue less expenses. Subtract line 18 from line 12		969,731.	-3,183,941.
S OF				ginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)		74,424,863.	62,441,915.
ot Ag	21	Total liabilities (Part X, line 26)		<u>25,468,133.</u>	16,669,126.
		Net assets or fund balances. Subtract line 21 from line 20 Signature Block		<u>48,956,730.</u>	45,772,789.
	rt II	-			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and			knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	preparer i	nas any knowledge.	
		Signature of officer		I Date	
Sign		· -		Date	
Her	е	ADRIANA ABICH, CHIEF EXECUTIVE OFFICER Type or print name and title			
			ΙD	Date Check	PTIN
Doid		Print/Type preparer's name MARIEN COMEZ MARIEN COMEZ		2/23/22 of the complex of the comple	
Paid		MARLEN GOMEZ MARLEN GOMEZ Firm's name CLIFTONLARSONALLEN LLP	U		P01306775 41-0746749
Prep Use		Firm's name CLIFTONLARSONALLEN LLP Firm's address 2210 EAST ROUTE 66		Firm's EIN ▶	<u></u>
USE	Ulliy	GLENDORA, CA 91740		Phone no. (6	26) 857-7300
Mar	tho !!	RS discuss this return with the preparer shown above? See instructions		j Pilotie IIo. (O	X Yes No
	11 12-2				Form 990 (2020)
0020	, 12-2				1 01111 - 3 - (2020)

Form	990 (2020) CAMINO NUEVO CHARTER ACADEMY 95-4771789 Page 2
Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	
•	Briefly describe the organization's mission: THE MISSION OF CAMINO NUEVO CHARTER ACADEMY IS TO EDUCATE STUDENTS IN
	A COLLEGE PREPARATORY PROGRAM TO BE LITERATE, CRITICAL THINKERS, AND
	INDEPENDENT PROBLEM SOLVERS WHO ARE AGENTS OF SOCIAL JUSTICE WITH
	SENSITIVTY TOWARD THE WORLD AROUND THEM.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	· · · · · · · · · · · · · · · · · · ·
	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 \$52,218,704 • including grants of \$) (Revenue \$)
	CHARTER SCHOOLS PROVIDING EDUCATIONAL OPPORTUNITIES TO THE SURROUNDING
	COMMUNITY. FOR THE YEAR ENDED JUNE 30, 2021, CAMINO NUEVO CHARTER
	ACADEMY SERVED APPROXIMATELY 3,335 STUDENTS IN GRADES K - 12TH GRADE.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
) (Listenberg and or a product of the control of th
4c	(Code:) (Expenses \$
_	
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
_	(expenses 5 including grains of 5) (revenue 5)

CAMINO NUEVO CHARTER ACADEMY

95-4771789

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Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III 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? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments Х 10 or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Х 11a Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes." complete Schedule D, Part VII 11b ,..... Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Х 11d Part X, line 16? If "Yes," complete Schedule D, Part IX X 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Х Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes." complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes." 19 complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II

Form 990 (2020) CAMINO NUEVO CHARTER ACADEMY Part IV Checklist of Required Schedules (continued)

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Page 4

	Office Autor of Frequence Continued)			
00	Did the appropriation was always that \$6,000 of small and the small and the state of an always the individual and		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	20		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		\vdash
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	2 5a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	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? If "Yes," complete Schedule L, Part II	26		X
27	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? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	Х	1
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	1
Pai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
. a	Check if Schedule O contains a response or note to any line in this Part V			
	OTIONALI OCITOURIO O COTTURI DE L'OSPOTIDE OFFICIE LO AITY IIITE IL UIID FAIT V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
b				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
032004	4 12-23-20	Form	990	(2020)

Form 990 (2020) CAMINO NUEVO CHARTER ACADEMY Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

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2a Strict the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, 2a 516 b If all least one is reported on line 2a, did the organization file all inequired federal employment tax returns? b If the least one is reported on line 2a, did the organization file all inequired federal employment tax returns? Note: If the sum of lines 1 and 2a six greater than 50, you may be required to e.f. eig. eig. instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X X b If "Yes," that third a Form 980-f for this year? if "Yo," to line 3b, provide an explanation on Schedule 0 3b If "Yes," a final third a Form 980-f for this year? if "Yo," to line 3b, provide an explanation on Schedule 0 3c If "Yes to line the name of the foreign country but he if year? See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c If "Yes to line 5a or 5b, did the organization that it was or is a party to a prohibitot tax shelter transaction? 5c If "Yes to line 5a or 5b, did the organization that it was or is a party to a prohibitot tax shelter transaction? 5c If "Yes to line 5a or 5b, did the organization that it was or is a party to a prohibitot tax shelter transaction or 5c organization shelt are shelter transaction at any time during the tax year? 5d Dose the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles of carbitable contributions? 6c If "Yes to line 5a or 5b, did the organization in fell may be a shelt that the organization shelt were year shelt and the property for which it was required to the payor? 7c Organizations that wan year exhemation and property for which it was required to file payor. 7d If "Yes," indicate the number of Forms \$2822 filed during the year? 7d If "Yes," indicate the number of Forms \$2822 filed during the year? 8d Did the organization receive a					Yes	No
b If all least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions) 3	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Note: if the sum of lines 1a and 2a is greater than 250, you may be required to _r/lis (see instructions) a Did the organization have unrelated business gross income of \$1,000 or more during the year? 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 Interest any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? If year or the financial account? If year or the financial account is of the region of the provided in the pro		filed for the calendar year ending with or within the year covered by this return	516			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4b If 11 Yeas, "Indicate the flare Form 9000 Toff this year? If 11 Yeas," indicate the propertion on Schedule O 4c 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 accounts, which is a special property of the property of	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
b b "Nes", 'has it field a Form 990.T for this year? If 'No' to fine 3b, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountry? 4a X b If "Yes,' enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAF). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party nority the organization that twas or is a party to a prohibited tax shelter transaction? 5b X c If "Yes" to line 5a or 5b, did the organization file Form 8889-17? 6a Does the organization she was entitle as charitable contributions? 5b If "Yes," old the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions? 6b If "Yes," old the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170c). 8d Did the organization receive a payment in excess of 5% made party sa contribution and sprty for goods and services provided to the payor? 7a X 7b Did the organization receive any experiment in excess of 5% made party sa contribution and party for goods and services provided to the payor? 7a If Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? 7b Did the organization received a contribution of care, boats, and a payment in excess of tangible personal property for which it was required to file form 8282? 7c Did the organization received a contribution		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bark account, securities account, or other financial accounts? b if 'Yes,' enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shefter transaction at any time during the tax year? 5b If 'Yes' to line fisc art 5b, did the organization that it was or is a party to a prohibited tax shefter transaction? 5c If 'Yes' to line fisc art 5b, did the organization that it was or is a party to a prohibited tax shefter transaction? 5c If 'Yes' to line fisc art 5b, did the organization to the organization that it was or is a party to a prohibited tax shefter transaction? 5d Dest the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax edecutibles can shartable contributions? 6a X b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c) a bill the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions and expression of the organization shart that the expression of the decoration of the value of the goods or services provided? 7 Destructions of the organization receive any study of the value of the goods or services provided? 7 The Section Section of the organization receive any funds, directly or indirectly, to any premiums on a personal benefit contract? 7 The If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file afformation of qualified inte	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
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16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.				15		X
If "Yes," complete Form 4720, Schedule O.						37
	16			16		X
		If "Yes," complete Form 4/20, Schedule U.		Form	gan	(2020

CAMINO NUEVO CHARTER ACADEMY Form 990 (2020) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 12 **1a** Enter the number of voting members of the governing body at the end of the tax year 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. 12 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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 List the states with which a copy of this Form 990 is required to be filed ▶CA

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 X Upon request Other (explain on Schedule O)

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 ADRIANA ABICH - 213-417-3401

TEMPLE STREET, LOS ANGELES.

ecords -

3435 W.

CAMINO NUEVO CHARTER ACADEMY

95-4771789

Page **7**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization r	or any related	orga	niza	tion	con	npen	sate	ed any current officer, d	irector, or trustee.	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per			compensation	compensation	amount of				
	week		Cei ai	lu a u	liecto	i / ii us	(66)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or 0	stee			nsatec		(W-2/1099-MISC)	(***2/1099*****100)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee		()		and related
	below	idual	tution	ъ	Key employee	est co loyee	Je.			organizations
	line)	Indiv	Insti	Officer	Key	High emp	Former			
(1) ADRIANA ABICH	40.00									
CHIEF EXECUTIVE OFFICER	2.00			X				192,039.	0.	46,175.
(2) TAMMY STANTON	40.00]								
CHIEF FINANCIAL OFFICER	2.00			Х				0.	176,772.	10,635.
(3) LAWRENCE BOONE II	40.00	1							_	
PRINCIPAL - DAL						X		128,495.	0.	27,229.
(4) MARISOL CONDE	40.00	1								
PRINCIPAL - MIR	1000					Х		110,471.	0.	31,483.
(5) CHARLES MILLER	40.00	1						110 501		10.501
PRINCIPAL - BUR	10.00					X		119,524.	0.	19,694.
(6) MELISSA MENDOZA	40.00							100 051		00 104
PRINCIPAL - CIS	1 00					Х		109,071.	0.	28,184.
(7) CINDY LEE SMET	1.00									•
CHAIR	2.00	Х		Х				0.	0.	0.
(8) DAVID GIDLOW	1.00	٠,,								0
SECRETARY	1 00	Х		Х				0.	0.	0.
(9) SHIHO ITO	1.00	٠,,		,,					_	0
TREASURER	1.00	Х		Х				0.	0.	0.
(10) CELIA ALVARADO	1.00	х							0.	0
MEMBER (11) RACHEL HUNT	1.00	Δ						0.	0.	0.
MEMBER	1.00	х						0.	0.	0.
(12) TAMARA POWERS	1.00	^						0.	0.	<u> </u>
MEMBER	1.00	Х						0.	0.	0.
(13) LIDA JENNINGS	1.00							0.	0.	<u></u>
MEMBER	1.00	х						0.	0.	0.
(14) JENNY SALAMANCA	1.00	25						•	0.	
MEMBER	1.00	х						0.	0.	0.
(15) ELENA LOPEZ	1.00							•		
MEMBER		х						0.	0.	0.
(16) GIL FLORES	1.00	T						1		
MEMBER	=:	x						0.	0.	0.
(17) JAZMIN ORTEGA	1.00	T -								
MEMBER		Х						0.	0.	0.
	•		-	-	-		•			Form 990 (2020)

Form **990** (2020)

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Part VII	Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A)	(B) (C)							(D)	(E)			(F)	
	Name and title	Average	(44.0				l than o		Reportable	Reportable		Es	timate	ed
		hours per	box	, unles	ss per	rson i	s both	an	compensation	compensation	n	an	ount	of
		week	offic	cer an	d a di	irecto	r/trust	ee)	from	from related			other	
		(list any	ector						the	organizations		com	pensa	tion
		hours for	or dir	a.			ted		organization	(W-2/1099-MIS	iC)	fr	om the	Э
		related	stee (ruste			ensa		(W-2/1099-MISC)			_	anizati	
		organizations below	al tru	onal t		loyee	l wo						d relate	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ınizatio	วทร
(10)		, , , , , , , , , , , , , , , , , , ,	Ĕ	ü	J0	Ā.	e Ţ	요			\rightarrow			
	LI VILLAREAL	1.00	,,											^
MEMBER			Х						0.		0.			0.
											\rightarrow			
								4						
								K						
											-			
											-			
4 h Cuba	antal		<u> </u>			<u> </u>			659,600.	176,77	72	16	3,40	<u> </u>
1b Subt									0.55,000.	170,77	0.	т О .	<i>,</i> = 0	0.
	I from continuation sheets to Part VI						ا		659,600.	176,77	1	16	3,40	
	I (add lines 1b and 1c)				$\overline{}$		<u> </u>	<u> </u>				то.	3,4	50.
	number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) who	o re	eceived more than \$100,	000 of reportable	!			_
com	pensation from the organization					$\overline{}$						- 1	· I	5
											П		Yes	No
3 Did t	he organization list any former officer,	director, truste	ee, k	ey e	mpl	oye	e, or	hig	hest compensated emp	loyee on				
	la? If "Yes," complete Schedule J for si										📙	3		<u>X</u>
	any individual listed on line 1a, is the su			•					•	•				
and i	related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	for such individual		L	4	Х	
5 Did a	any person listed on line 1a receive or a	ccrue compen	sati	on fr	om a	any	unre	late	ed organization or individ	dual for services				
rend	ered to the organization? If "Yes," com	plete Schedule	J fo	or su	ich r	oers	on .					5		X
Section E	3. Independent Contractors													
1 Com	plete this table for your five highest con	mpensated ind	lepe	nder	nt cc	ontra	actor	s th	nat received more than \$	100,000 of comp	ensati	on fro	m	
	organization. Report compensation for t													
	(A)								(B)			(C	;)	
	Name and business	address							Description of s	ervices	Co		, nsatio	n
CELLCO	PARTNERSHIP, ONE V	ERIZON	WA	Y				╛	INTERNET HOT:	SPOT				
	NG RIDGE, NEW JERSEY								SERVICES			13	1,54	44.
	ORAL LEARNING NETWO							$\overline{}$	NONPUBLIC SCI	HOOT			_ , _	
	BALBOA BLVD #202 EN		Δ	91	31	6		- 1	SERVICES			12	5 2	60.

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

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Pa	I L V	Ш			a in Alain Dark VIII			
			Check if Schedule O contains a response of	or note to any line	e in this Part VIII (A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenuè excluded
						function revenue	business revenue	from tax under sections 512 - 514
								SECTIONS 212 - 214
ints	1		Federated campaigns 1a					
Gra			Membership dues 1b					
ts, An			Fundraising events 1c					
Gif ilar			Related organizations 1d	50 056 650				
ns, Sim			Government grants (contributions) 1e	59,976,678.				
Contributions, Gifts, Grants and Other Similar Amounts		f	All other contributions, gifts, grants, and	065 513				
ξĖ			similar amounts not included above 1f	267,713.				
onti od (_	Noncash contributions included in lines 1a-1f 1g \$	107,732.	60 044 004			
<u>0</u> <u>6</u>		h	Total. Add lines 1a-1f		60,244,391.			
				Business Code				
ice	2							
erv Je		b	,					
n S		С						
iran 3ev		d						
Program Service Revenue		е	0					
Ф			All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, interes		(2, 102			62 100
			other similar amounts)		63,102.			63,102.
	4		Income from investment of tax-exempt bond pr					
	5		Royalties					
			(i) Real	(ii) Personal				
	6		Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
	_		Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
•		b	Less: cost or other basis					
Revenue			and sales expenses					
eve			Gain or (loss) 7c					
	_		Net gain or (loss)					
Other	8	а	Gross income from fundraising events (not					
0			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8b					
	_		Net income or (loss) from fundraising events	P				
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a					
			Less: direct expenses 9b					
	40		Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
			Less: cost of goods sold 10b					
		C	Net income or (loss) from sales of inventory	Business Code				
ns	44	_	FCC E-RATE CREDITS	900099	241,174.			241,174.
eo ue	11		ALL OTHER LOCAL REVENUE	900099	34,431.			34,431.
illar ven		_	OTHER ESSEE REVENUE	,,,,,	54,451.			5=,=51.
Miscellaneous Revenue		۲ C	All other revenue					
Ξ			All other revenue		275,605.			
	12	U	Total. Add lines 11a-11d		60,583,098.	0.	0.	338,707.
03200		22			,000,000.	٠.	<u> </u>	Form 990 (2020)
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Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must cor	mplete column (A).	
	Check if Schedule O contains a respor				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	255,388.	227,295.	28,093.	
6	Compensation not included above to disqualified	-			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	17,992,442.	16,131,384.	1,861,058.	
8	Pension plan accruals and contributions (include				,
	section 401(k) and 403(b) employer contributions)	3,029,007.	2,650,509.	378,498.	
9	Other employee benefits		1,441,596.	162,624.	
10	Payroll taxes	515,043.		135,446.	
11	Fees for services (nonemployees):				
а	Management	5,628,866.		5,628,866.	
b	Legal	93,446.		93,446.	
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	4,457,288.		313,268.	
12	Advertising and promotion	124,520.		28,202.	96,318.
13	Office expenses	838,929.		838,924.	
14	Information technology	1,185,019.	424,571.	760,448.	
15	Royalties	2 005 514	2 (55 074	220 (40	
16	Occupancy	2,995,514.		339,640.	
17	Travel	13,988.	13,988.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	_			
20	Interest	385,721.		385,721.	
21	Payments to affiliates	4 4-4	4 = 44 == -		
22	Depreciation, depletion, and amortization	1,672,845.	1,526,750.	146,095.	
23	Insurance	30,608.		30,608.	
24	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 0.) LOSS ON DISPOSAL	17 821 062	17,821,063.		
a	INSTRUCTIONAL MATERIALS	4,048,003.			
b	NUTRITION PROGRAM FOOD	700,944.			
c d	DUES & MEMBERSHIPS	58,658.	,00,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	58,658.	
	All other expenses	315,527.	53,105.	262,422.	
25	Total functional expenses. Add lines 1 through 24e	63,767,039.		11,452,017.	96,318
26	Joint costs. Complete this line only if the organization	30,.0.,000.	3_,2_0,,010	,_,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
_0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	· · /	-	•	·	Form 990 (2020

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Form 990 (2020) Part X Balance Sheet

CAMINO NUEVO CHARTER ACADEMY

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LA	Dalance Sneet				
	Check if Schedule O contains a response or note to	any line in this Part X			
			(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		3,270,738.	1	3,882,618.
2			7,500,622.	2	9,995,256.
3	Pledges and grants receivable, net			3	
4			4,995,967.	4	8,072,844.
5					
	trustee, key employee, creator or founder, substant	ial contributor, or 35%			
	controlled entity or family member of any of these p	persons		5	
6	Loans and other receivables from other disqualified	persons (as defined			
	under section 4958(f)(1)), and persons described in	section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net			7	
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges		359,888.	9	305,178.
10a					
	basis. Complete Part VI of Schedule D1	0a 47,735,160.			
b			58,120,690.	10c	39,997,766.
11				11	
12					
13					
			176 050		100 050
15					188,253.
					62,441,915.
			4,755,400.		4,619,797.
		10.000		1 400 440	
			19,000.		1,423,448.
				21	
22					
				22	
22					
			20.693.733.		10,625,881.
		2 i). Complete i di tix		25	
26			25,468,133.		16,669,126.
	and complete lines 27, 28, 32, and 33.	, —			
27	Net assets without donor restrictions		48,950,723.	27	45,772,789.
28	Net assets with donor restrictions		6,007.	28	0.
	and complete lines 29 through 33.				
				29	
29	Capital stock or trust principal, or current funds				
29 30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equip			30	
		ment fund			
30	Paid-in or capital surplus, or land, building, or equip	oment fundne, or other funds	48,956,730. 74,424,863.	30	45,772,789. 62,441,915.
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26	Check if Schedule O contains a response or note to Check if Schedule O contains a response or note to Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or for trustee, key employee, creator or founder, substant controlled entity or family member of any of these punder section 4958(f)(1)), and persons described in Notes and loans receivables from other disqualified under section 4958(f)(1)), and persons described in Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal lines and accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part Loans and other payables to any current or former trustee, key employee, creator or founder, substant controlled entity or family member of any of these punctions and other payables to any current or former trustee, key employee, creator or founder, substant controlled entity or family member of any of these punctions and other liabilities not included on lines 17 of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check and complete lines 27, 28, 32, and 33.	Check if Schedule O contains a response or note to any line in this Part X 1	Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year 3, 270, 738. 3, 270, 738. 2 Savings and temporary cash investments 7, 500, 622. 3 Piedges and grants receivable, net 4 Accounts receivable, net 5 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 6 Loans and other receivables from other disqualified persons (as defined under section 4958(h(f))), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1 Investments - publicly traded securities 1 Investments - other securities. See Part IV, line 11 1 Investments - other securities. See Part IV, line 11 1 Intrangible assets 10 Chter assets. Sed Part IV, line 11 11 Investments - payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 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 23 Secured mortgages and notes payable to unrelated third parties. 10 Chter liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 27 Page 27 Age	Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year 3

	990 (2020) CAMINO NUEVO CHARTER ACADEMY	95-4	771789	Pag	ge 12
Par	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	60,583		
2	Total expenses (must equal Part IX, column (A), line 25)	2	63,767		
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,183		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	48,956	7.	<u>30.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	45,772	2,78	<u> 89.</u>
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	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:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
	Act and OMB Circular A-133?	-	За	x	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	and a substitution of the state		امدا	v l	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Employer identification number

				HARTER ACADE				15-4//1/89
Pa	rt I	Reason for Public (Charity Status.	(All organizations must o	omplete th	nis part.) S	ee instructions.	
Γhe	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)		
1		A church, convention of ch	urches, or associatio	n of churches described	l in sectio	n 170(b)(1)(A)(i).	
2	X	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990 or 99	90-EZ).)		
3	\Box	A hospital or a cooperative					i).	
4	一	A medical research organiz						the hospital's name.
		city, and state:		,				·····,
5		An organization operated for	or the benefit of a col	lege or university owned	d or operat	ed by a go	vernmental unit describ	ed in
J	ш	section 170(b)(1)(A)(iv). (C		logo or armorolly owner	or operat	od by d go	Vorning that arms according	54 III
6			•	antal unit described in	aaatian 47	70/LV4VAV	()	
6	H	A federal, state, or local gov	-					منامل ماند ماند ماند
7		An organization that norma		ntial part of its support i	rom a gove	ernmentai	unit or from the general	public described in
_		section 170(b)(1)(A)(vi). (C						
8	\vdash	A community trust describe						
9	Ш	An agricultural research org						· •
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of the college	e or
		university:						
10		An organization that norma						
		activities related to its exem	npt functions, subjec	t to certain exceptions;	and (2) no	more than	33 1/3% of its support f	rom gross investment
		income and unrelated busing	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)					
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	9(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he function	ns of, or to carry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3). (Check the box in
		lines 12a through 12d that	describes the type of	f supporting organization	n and com	plete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	anization operated, si	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustees of the s	upporting
		organization. You must o	complete Part IV, Se	ections A and B.				
b		Type II. A supporting org	anization supervised	or controlled in connec	tion with its	s supporte	ed organization(s), by ha	ving
		control or management o	f the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or manage the sup	ported
		organization(s). You mus			•			•
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,
		its supported organization					• •	,
d		Type III non-functionally						zation(s)
		that is not functionally int						* *
		requirement (see instructi	-		•		=	
е		Check this box if the orga		-				
·		functionally integrated, or					Type i, Type ii, Type iii	
f	Ente	er the number of supported of						
'		vide the following information						
9		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10	in your governi	No	support (see instructions)	support (see instructions)
		· · · · · · · · · · · · · · · · · · ·		above (see instructions))	1.00	- 110		
								<u> </u>
								<u> </u>
					 			-
rot:								<u> </u>

Schedule A (Form 990 or 990-EZ) 2020 CA					95-477	
Part II Support Schedule for O	rganizations	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 o	r if the organizatio	n failed to qualify u	nder Part III. If the	organization
fails to qualify under the tests li	sted below, pleas	se complete Part I	II.)			
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						
6 Public support. Subtract line 5 from line 4.						
Section B. Total Support					-	-

Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	

organization, check this box and stop here)	
Section C. Computation of Public Support Percentage		

se	ction C. Computation of Public Support Percentage			
14	Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14		%
15	Public support percentage from 2019 Schedule A, Part II, line 14	15		%
16a	33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m	ore, c	heck this box and	
	stop here. The organization qualifies as a publicly supported organization			ightharpoons
k	33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	or m	ore, check this box	
	and stop here. The organization qualifies as a publicly supported organization			
17a	10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, a	ınd lir	ne 14 is 10% or more,	
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part	VI ho	w the organization	
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			ightharpoons

b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 CAMINO NUEVO CHARTER ACADEMY

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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	slow, please comp	nete i art ii.j				
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)				1		
14 First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
Section C. Computation of Public	c Support Per	centage				
15 Public support percentage for 2020 (li	ne 8, column (f), d	ivided by line 13,	column (f))		15	9
16 Public support percentage from 2019					16	9/
		Percentage				
Section D. Computation of Inves	tment income					
17 Investment income percentage for 20)20 (line 10c, colun	nn (f), divided by l			17	
17 Investment income percentage for 2018 Investment income percentage from 2	020 (line 10c, colun 2019 Schedule A,	nn (f), divided by li Part III, line 17			18	9
17 Investment income percentage for 20 18 Investment income percentage from 2 19a 33 1/3% support tests - 2020. If the	020 (line 10c, colun 2019 Schedule A, organization did n	nn (f), divided by li Part III, line 17	on line 14, and line	e 15 is more than 3	18 33 1/3%, and line 17	9 9 7 is not
 17 Investment income percentage for 20 18 Investment income percentage from 2 19a 33 1/3% support tests - 2020. If the more than 33 1/3%, check this box an 	220 (line 10c, colun 2019 Schedule A, organization did n nd stop here. The	nn (f), divided by li Part III, line 17 not check the box organization qual	on line 14, and line	e 15 is more than 3 supported organiza	18 33 1/3%, and line 17	97 is not▶
17 Investment income percentage for 20 18 Investment income percentage from 2 19a 33 1/3% support tests - 2020. If the	220 (line 10c, colun 2019 Schedule A, organization did n nd stop here. The organization did n	mn (f), divided by li Part III, line 17 not check the box organization qual not check a box or	on line 14, and line ifies as a publicly so line 14 or line 19	e 15 is more than 3 supported organiza a, and line 16 is mo	18 33 1/3%, and line 17 34 35 37 38 38 39 39 39 39 39 39	7 is not

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

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

		Yes	No
	1		
	-		
	2		
	0-		
	3a		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	•		
	6		
	7		
	8		
	9a		
	a.		
	9b		
	9c		
	10a		
	10b		
. a	90 or 99	n-F7)	2020

Sche	dule A (Form 990 or 990-EZ) 2020 CAMINO NUEVO CHARTER ACADEMY 95-47	77178	9 Pa	age 5
	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	<u>detail in</u> Part VI. tion B. Type I Supporting Organizations	11c		
Sec	uon B. Type i Supporting Organizations			
	Did the constraint and the constraint had a figure at the fact of the constraint and the		Yes	No
1	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? 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
	tion of type in supporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	INO
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			
	and the state of t		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	;).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstruction	1 <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in 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? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Sche	edule A (Form 990 or 990-EZ) 2020 CAMINO NUEVO CHARTER ACAI	DEM?	Y 9	5-4771789 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting (
1	Check here if the organization satisfied the Integral Part Test as a qualifying tr	rust or	n Nov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must co	mplet	e Sections A through E.	1
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
<u> </u>	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 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	Distributable Amount. Subtract line 5 from line 4, unless subject to			

Schedule A (Form 990 or 990-EZ) 2020

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

emergency temporary reduction (see instructions).

Schedule A (Form 990 or 990-EZ) 2020 CAMINO NUEVO CHARTER ACADEMY

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

. u.	Type in item i anotienany integrated eee	uj(oj oupporting orga	COITE	iuea) ₋	
Secti	ion D - Distributions				Current Year
1_	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	and a different different by mile a different	(i)	(ii)	1	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2020	ons	Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
	From 2015				
	From 2016				
	From 2017				
	From 2018				
	From 2019				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
<u> </u>	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years			_	
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A	(Form 990 or 990-EZ) 2020 CAMINO NUEVO CHARTER ACADEMY	95-4771789 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a of 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 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additing (See instructions.)	or 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,

Schedule B

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2020

CAMINO NUEVO CHARTER ACADEMY

Employer identification number

95-4771789

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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 foundation Check 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (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, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

	. 490
Name of organization	Employer identification number
CAMINO NUEVO CHARTER ACADEMY	95-4771789

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	UNIDOS US FOUNDATION 1126 16TH STREET NW, SUITE 600 WASHINGTON, DC 20036	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE ANGELO FAMILY CHARITABLE FOUNDATION 245 PARK AVENUE 26TH FLOOR NEW YORK, NY 10167	\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	GENYOUTH 555 MADISON AVENUE, 5TH FLOOR NEW YORK, NY 10022	\$ 9,000.	Person X Payroll
(a)	(b)	(c)	(d)
No4_	Name, address, and ZIP + 4 GREAT PUBLIC SCHOOLS NOW 1150 S. OLIVE ST., SUITE 1325 LOS ANGELES, CA 90015	\$ 50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	CERREL ASSOCIATES 750 N SAN VICENTE BLVD SUITE 800 WEST HOLLYWOOD, CA 90069	\$ 15,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	SEE'S CANDY PO BOX 93024 LONG BEACH, CA 90809	\$ 92,732.	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

CAMINO NUEVO CHARTER ACADEMY 95-4771789

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
5	FURNITURE	\$15,000.	06/30/21		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
6	CANDY	\$ 92,732.	06/30/21		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$	<u></u>		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$	<u> </u>		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			

arrie or or	ganization		Employer Identification number				
AMINO	NUEVO CHARTER ACADEMY		95-4771789				
Part III	from any one contributor. Complete columns (a)	through (e) and the following line entry.	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the ye				
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or les	ss for the year. (Enter this info. once.) \$\bigs\\$				
(a) No.	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				
Parti							
		-	_				
L							
		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(1) -					
		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
F	Transfere e mame, adamete, al		Treatment of a district to district of				
(a) Na							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
L							
	(e) Transfer of gift						
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
							
(a) No. from		1					
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 of	nd 7IP ± 4	Relationship of transferor to transferor				
-	Transferee's name, address, ar	IU L IF † †	Relationship of transferor to transferee				
	-						

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

NIIEVO CHARTER ACADEMY

Employer identification number

Par	t I Organizations Maintaining Donor Advised F		or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6		or recounter domplete if the
	organization answered Tee on Term 600, Fair 17, line o	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) a constraint and a	(4)
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		<u> </u>
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ing that the assets held in donor advise	ad funds
J	are the organization's property, subject to the organization's exc		
6	Did the organization of property, subject to the organization of exception of the organization of the orga		
Ü	for charitable purposes and not for the benefit of the donor or do		
Par		ization answered "Yes" on Form 990. F	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (for example, recreation	`	a historically important land area
	Protection of natural habitat		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	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	·		
b			
c	Number of conservation easements on a certified historic struct		
d	Number of conservation easements included in (c) acquired afte		
_	. , .		
3	Number of conservation easements modified, transferred, release		
	year >	,	
4	Number of states where property subject to conservation easem	nent is located	
5	Does the organization have a written policy regarding the period	ic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it ho		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, har	The state of the s	
	>		
7	Amount of expenses incurred in monitoring, inspecting, handling	g of violations, and enforcing conservat	ion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above s	atisfy the requirements of section 170(h	n)(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	e to the organization's financial stateme	ents that describes the
	organization's accounting for conservation easements.	· · · · · · · · · · · · · · · · · · ·	
Par	t III Organizations Maintaining Collections of A		ner Similar Assets.
	Complete if the organization answered "Yes" on Form 99		
1a	If the organization elected, as permitted under FASB ASC 958, r	•	
	of art, historical treasures, or other similar assets held for public	,	•
	service, provide in Part XIII the text of the footnote to its financia	al statements that describes these items	S.
b	If the organization elected, as permitted under FASB ASC 958, t	·	
	art, historical treasures, or other similar assets held for public ex	hibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treasu	·	gain, provide
	the following amounts required to be reported under FASB ASC	_	
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		🕨 💲

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

Schedule D (Form 990) 2020

					-477178		age 2			
Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)									
3										
	collection items (check all that apply):									
а	Public exhibition	C			hange progra					
b	Scholarly research	€	• 🔲 (Other						
С	Preservation for future generations									
4	Provide a description of the organization's co							Part XIII.		
5	During the year, did the organization solicit or		,		,					٦
Dor	to be sold to raise funds rather than to be ma									No
Pai	t IV Escrow and Custodial Arrange reported an amount on Form 990, Pa		ete if the	organizatio	n answered	"Yes" on	Form 990, Pa	t IV, line 9, oi	•	
4-	<u> </u>	· · ·	l: 							
та	Is the organization an agent, trustee, custodi		•							٦ ٨ ٦
L	on Form 990, Part X?							Yes		」No
D	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing ta	able:				Λ m a ι ι n		
_	Paginning halange						10	Amour	IL	
	Beginning balance									
	Additions during the year									
e	Distributions during the year									
t 20	Ending balance							Yes		No
	If "Yes," explain the arrangement in Part XIII.									
Par										
	Complete	(a) Current year		rior year	(c) Two yea		(d) Three years	back (e) Fou	r vears	hack
1a	Beginning of year balance	(a) Current year	(6)	noi yeai	(C) TWO yea	13 Dack	(a) Thice years	Dack (e) Tou	ι γυαι σ	Dack
b	Contributions									
D	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
C		\								
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the curr		e (line 1o	r column (a)) held as:	L				
a	Board designated or quasi-endowment	one your ond balano	%	j, oolallii (a)	, riola ao.					
	Permanent endowment	%	_/* \							
c		%								
	The percentages on lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse		ation that	t are held ar	nd administer	red for th	e organization			
	by:						-		Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							·····		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	red on So	chedule R?				3b		
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answere	d "Yes" on Form 990), Part IV	, line 11a. S	ee Form 990	, Part X,	line 10.			
	Description of property	(a) Cost or c	other	(b) Cost	or other	(c) A	ccumulated	(d) Boo	k valu	<u>——</u>
		basis (investr	ment)	basis	(other)	de	preciation			
1a	Land			12,57	9,941.			12,57	9,9	41.
	Buildings	***			3,786.	3,	365,043.	_		
	Leasehold improvements			1,82	4,882.	1,	038,142.	78	6,7	40.
	Equipment			4,99	6,551.	3,	334,209.	1,66	2,3	42.
	Other									
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. colum	nn (B), line 1	Oc.)		>	39,99	7,7	66.

Schedule D (Form 990) 2020

UEVO CHARTER ACA	DEMY	95-4771789 Page 3
	11h Soo Form 000 Part V line	. 10
* * * * * * * * * * * * * * * * * * * *	(b) Mothod of Valuation.	oot of cha of your market value
2 \		
ed.		
(b) Dook value	(c) wellou of valuation: C	bost of end-of-year market value
3.) ▶		
	11d. See Form 990, Part X, line	ı
(a) Description		(b) Book value
(B) line 15.)		>
, ,		
(B) line 15.)		X, line 25.
, ,		
, ,		X, line 25.
, ,		X, line 25.
, ,		X, line 25.
, ,		X, line 25.
, ,		X, line 25.
, ,		X, line 25.
, ,		X, line 25.
, ,		X, line 25.
, ,		X, line 25.
, ,	11e or 11f. See Form 990, Part	X, line 25.
	(b) Book value 2.) (b) Book value (c) Book value (d) Book value (e) Book value (f) Book value	S. "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line "Line of the state of the

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 CAMINO NUEVO CHARTER ACADEMY	95-4771789 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	3
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
Total revenue, gains, and other support per audited financial statements	. 1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities 2b	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	· Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments 2b	
c Other losses 2c	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5
Part XIII Supplemental Information.	
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	⊋4; Part X, line 2; Part XI,
PART X, LINE 2:	
CNCA IS A NON-PROFIT ENTITY EXEMPT FROM THE PAYMENT OF INCOM	E TAXES UNDER
INTERNAL REVENUE CODE SECTION 501(C)(3) AND CALIFORNIA REVEN	UE AND
TAXATION CODE SECTION 23701D. ACCORDINGLY, NO PROVISION HAS	BEEN MADE FOR
INCOME TAXES. MANAGEMENT HAS DETERMINED THAT ALL INCOME TAX	POSITIONS ARE
MORE LIKELY THAN NOT OF BEING SUSTAINED UPON POTENTIAL AUDIT	OR
EXAMINATION; THEREFORE, NO DISCLOSURES OF UNCERTAIN INCOME T	AX POSITIONS

ARE REQUIRED. CNCA IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO THE EXEMPT PURPOSES. CNCA FILES EXEMPT RETURNS AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION AND WITH THE CALIFORNIA FRANCHISE TAX

Schedule D (Form 990) 2020

BOARD.

Schedule D (Form 990) 2020	CAMINO NUEVO	CHARTER	ACADEMY	95-4771789 Page 5
Schedule D (Form 990) 2020 Part XIII Supplemental Inform	mation _(continued)			
		(
-				
			\	

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

CAMINO NUEVO CHARTER ACADEMY

Employer identification number 95-4771789

Pa	rt I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
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	3	Х	
	THE POLICY IS LISTED ON THE ENROLLMENT APPLICATION, WEBSITE			
	AND POSTED IN FRONT OF THE OFFICE AT EACH SITE.			
4	Does the organization maintain the following?			
а		4a	Х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	<u> </u>		
	with student admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
-	If you answered "No" to any of the above, please explain. If you need more space, use Part II.	1.4		
5	Does the organization discriminate by race in any way with respect to:			
	Students' rights or privileges?	5a		х
	Admissions policies?	5b		Х
	Employment of faculty or administrative staff?	5c		Х
	Scholarships or other financial assistance?	5d		Х
	Educational policies?	5e		Х
	Use of facilities?	5f		X
	Athletic programs?	5g		Х
9 h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	0		
	Tryou anoword Tee to any or the above, please explain. Tryou need more space, ace that it.			
60	Does the organization receive any financial aid or assistance from a governmental agency?	6a	х	
	Has the organization's right to such aid ever been revoked or suspended?	6b		х
b	If you answered "Yes" on either line 6a or line 6b, explain on Part II.	30		<u> </u>
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
′		7	Х	
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	1 /	77	

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

Schedule E (Form 990 or 990-EZ) 2020

Schedule E (Form 990 or 990-EZ) 2020 CAMINO NUEVO CHARTER ACADEMY	95-4771789 Page 2
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and	nd 7. as
applicable. Also provide any other additional information.	,
SCH E	
FINANCIAL AID OR GOVERNMENT ASSISTANCE EXPLANATION: CAMINO	NIIEVO
I IMMCIAL AID ON GOVERNMENT ADDIDITATED DATEMATION: CAMING	HOLVO
CHARTER ACADEMY IS A NETWORK OF CHARTER SCHOOLS PRINCIPALI	A EIMDED DA
CHARTER ACADEMI IS A NEIWORK OF CHARTER SCHOOLS FRINCIPALI	II FUNDED BI
CALTEODATA AND REDEDAL MONTEC DECETTED MIDOLOU MIR CALTEOL) NT T 7
CALIFORNIA AND FEDERAL MONIES RECEIVED THROUGH THE CALIFOR	KNIA
DEDAREMENT OF EDUCATION	
DEPARTMENT OF EDUCATION.	
	_
	_

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2020

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

CAMINO NUEVO CHARTER ACADEMY

Employer identification number 95-4771789

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any parent listed on Form 200. Part VIII. Coation A. line to with respect to the filing			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
2	Province and the state of the s	4a		х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The teathy of lines to o, not the potential and provide the approache amounter for each from in a cini.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (C			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) ADRIANA ABICH	(i)	192,039.	0.	0.	33,055.	13,120.	238,214.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TAMMY STANTON	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF FINANCIAL OFFICER	(ii)	176,772.	0.	0.	10,606.	29.	187,407.	0.
(3) LAWRENCE BOONE II	(i)	128,495.	0.	0.	21,340.	5,889.	155,724.	0.
PRINCIPAL - DAL	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							(5

Schedule J (Form 990) 2020	CAMINO NUEVO CHARTER ACADEMY	95-4771789	Page 3
Part III Supplemental Informa			
Provide the information, explanat	ion, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for	Part II. Also complete this part for any additional information	1.

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

► 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 for instructions and the latest information. Open to Public Inspection

Name of the organization Employer identification number CAMINO NUEVO CHARTER ACADEMY 95-4771789

Pai	TI Types of Property							
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of de noncash contribu			s
	-		items contributed	Form 990, Part VIII, line 1g				
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications			1 = 222				
5	Clothing and household goods	X		15,000.	FAIR VALUE			
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 trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
10								
14	Qualified conservation contribution - Other							
15								
16	Real estate - Residential Real estate - Commercial							
17	Real estate - Other							
18								
19	Collectibles Food inventory	Х	1	92 732.	FAIR VALUE			
20	Drugs and medical supplies	23	_	72,732.	11111 V1111011			
21								
22	Taxidermy							
23	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()	ation douber						
29	Number of Forms 8283 received by the organization appeals to the organization appeals the organization appeals to						1	
	for which the organization completed Form 828	3, Part V, L	onee Acknowleage	ement 29			<u> </u>	N
00-		4. 11 41		and and the Donat I. Bloom of Albertain	l- 00 414-14		Yes	No
30a	During the year, did the organization receive by							1
	must hold for at least three years from the date							v
	exempt purposes for the entire holding period?					30a		X
	If "Yes," describe the arrangement in Part II.	- P 41 4	and the state of the state of		:0			v
31	Does the organization have a gift acceptance po				ions?	31		X
32a	Does the organization hire or use third parties o		-	· ·				v
	contributions?					32a		X
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	tor which column (a) is chec	eked,			

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

Schedule M	(Form 990) 2020	CAMINO	NUEVO	CHARTER	ACADEMY	95-4771789	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Information I, column (b), Idditional inform	n. Provide the number nation.	the information of contributions	required by Part I, lines 30b, 32b, and 33 s, the number of items received, or a com	, and whether the organiza bination of both. Also comp	tion olete

Schedule M (Form 990) 2020

032142 11-23-20

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2020 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CAMINO NUEVO CHARTER ACADEMY

Employer identification number 95-4771789

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION AMENDED ITS BYLAWS IN NOVEMBER 2020 AND REMOVED THE SOLE

MEMBER'S RIGHT TO APPOINT OR APPROVE THE ORGANIZATION'S DIRECTORS OF THE

BOARD.

FORM 990, PART VI, SECTION A, LINE 6:

PUEBLO NUEVO EDUCATION AND DEVELOPMENT GROUP (PNEDG) IS THE SOLE CORPORATE MEMBER OF THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7B:

PNEDG AS THE SOLE STATUTORY MEMBER HAS THE RIGHTS SET FORTH IN SECTION 5056

OF THE CALIFORNIA NONPROFIT CORPORATION LAW AND TO APPROVE ANY AMENDMENT TO

THE ORGANIZATION'S BYLAWS WHICH WOULD AFFECT THE RIGHTS OF THE SOLE

STATUTORY MEMBER.

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE ANY COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

THE FORM 990 IS PREPARED BY THE ORGANIZATION'S OUTSIDE PUBLIC ACCOUNTING

FIRM BASED ON INFORMATION PROVIDED BY MANAGEMENT. ONCE A DRAFT OF THE

RETURN IS AVAILABLE, IT IS REVIEWED BY MANAGEMENT WITH ANY CHANGES OR

REVISIONS INCORPORATED INTO THE FILING. THE REVISED RETURN IS THEN

SUBMITTED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL PRIOR TO

SUBMITTING TO THE IRS.

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization

CAMINO NUEVO CHARTER ACADEMY

Employer identification number
95-4771789

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

EACH DIRECTOR, OFFICER AND KEY EMPLOYEE SHALL ANNUALLY SIGN A STATEMENT,

WHICH AFFIRMS THAT SUCH PERSON HAS RECEIVED A COPY OF THE CAMINO NUEVO

CHARTER ACADEMY (CNCA) CONFLICT OF INTEREST POLICY. THE STATEMENT IS

DISTRIBUTED FOR SIGNATURE AND COLLECTED BY THE CNCA BOARD SECRETARY DURING

THE INITIAL BOARD MEETING OF EACH FISCAL YEAR. MONITORING IS PERFORMED

REGULARLY BY THE OFFICERS TO IDENTIFY POTENTIAL CONFLICTS OF INTEREST. ANY

QUESTION OF A CONFLICT IS ADDRESSED WITH THE INTERESTED PERSON, WHO IS

REQUIRED TO DISCLOSE THE EXISTENCE OF ANY FINANCIAL INTEREST AND BE

AFFORDED THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE BOARD AND

EXECUTIVE DIRECTOR. IF A CONFLICT OF INTEREST IS IDENTIFIED, THE

APPROPRIATE ACTION IS TAKEN, INCLUDING LIMITATIONS TO THE INDIVIDUAL'S

INFLUENCE ON RELATED BUSINESS MATTERS.

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

THE PROCESS INCLUDES THE FOLLOWING ELEMENTS: (1) REVIEW AND APPROVAL BY THE BOARD OF DIRECTORS, (2) USE OF DATA AS TO COMPARABLE COMPENSATION; AND (3) CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING. THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS PROVIDED THAT PERSONS WITH CONFLICTS OF INTEREST WITH REGARD TO THE COMPENSATION ARRANGEMENT AT ISSUE ARE NOT INVOLVED IN THIS REVIEW OR APPROVAL.

COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS ARE USED IN DETERMINING COMPENSATION.

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

BINDERS CONTAINING GOVERNANCE POLICIES, BOARD AGENDAS, MINUTES, AND

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization CAMINO NUEVO CHARTER ACADEMY	Employer identification number 95-4771789
FINANCIAL REPORTS ARE ALL AVAILABLE AT THE CNCA HOME SUPPO	RT OFFICE LOCATED
AT 3435 W. TEMPLE ST. LOS ANGELES, CA 90026.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service

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

2020 Open to Public Inspection

OMB No. 1545-0047

Name of the organization		Employer identification number
CAMINO NUEVO CHARTER ACADEMY		95-4771789

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

Name, address, and EIN Primary activity Legal domicile (state or Exempt Code Public charity Direct controlling con	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Total inco	eme End-of-yea	ar assets Direct o	(f) controllin ntity	g
(a) Name, address, and EIN of related organization GRUPO NUEVO LOS ANGELES - 45-5434395 LOS ANGELES, CA 90026 PUEBLO NUEVO EDUCATION AND DEVELOPMENT GROUP - 81-1668428, 3435 W. TEMPLE ST., LOS (b) (c) Legal domicile (state or foreign country) Legal domicile (state or foreign country) Exempt Code section Section Fublic charity status (if section 501(c)(3)) PUEBLO NUEVO EDUCATION AND Yes CALIFORNIA SUPPORT FOR CHARTER CID (d) Exempt Code section Fublic charity status (if section 501(c)(3)) PUBLIC charity status (if section 501(c)(3)) PUEBLO NUEVO EDUCATION AND LINE 12B, II DEVELOPMENT GROUP SUPPORT FOR CHARTER								
(a) Name, address, and EIN of related organization GRUPO NUEVO LOS ANGELES - 45-5434395 LOS ANGELES, CA 90026 PUBLIC ANGELES - 45-5434395 CHARTER SCHOOLS CHARTER SCHOOLS CHARTER C								
(a) Name, address, and EIN of related organization GRUPO NUEVO LOS ANGELES - 45-5434395 LOS ANGELES, CA 90026 PUEBLO NUEVO EDUCATION AND DEVELOPMENT GROUP - 81-1668428, 3435 W. TEMPLE ST., LOS (b) (c) Legal domicile (state or foreign country) Legal domicile (state or foreign country) Exempt Code section Section Fublic charity status (if section 501(c)(3)) PUEBLO NUEVO Exempt Code section Fublic charity status (if section 501(c)(3)) PUEBLO NUEVO EDUCATION AND X EDUCATION AND X EDUCATION AND								
organizations during the tax year. (a) Name, address, and EIN of related organization Primary activity Primary activity Direct controlling entity Festion Section foreign country) GRUPO NUEVO LOS ANGELES - 45-5434395 JA35 W. TEMPLE ST. LOS ANGELES, CA 90026 PUBLIC charity status (if section 501(c)(3)) PUEBLO NUEVO EDUCATION AND CHARTER SCHOOLS CALIFORNIA SUPPORT FOR CHARTER CC (d) Exempt Code Section Fublic charity status (if section 501(c)(3)) PUEBLO NUEVO EDUCATION AND LINE 12B, II DEVELOPMENT GROUP - 81-1668428, 3435 W. TEMPLE ST., LOS SUPPORT FOR CHARTER								
Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Pueblo Nuevo Los angeles - 45-5434395 Address, CA 90026 Public charity status (if section 501(c)(3)) Pueblo Nuevo Los angeles - 45-5434395 Charter schools Charter schools Charter schools California Direct controlling entity Pueblo Nuevo Exempt Code section Solicia Public charity status (if section 501(c)(3)) Yes Pueblo Nuevo Exempt Code section Solicia Public charity status (if section 601(c)(3)) Pueblo Nuevo Exempt Code section Solicia Pueblo Nuevo Education and Development group Exempt Code section Solicia Yes Pueblo Nuevo Education and Development group Exempt Code section Solicia Pueblo Nuevo Exempt Code section Solicia Final Sol	Part II Identification of Related Tax-Exempt Organizations during the tax year.	cations. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, I	pecause it had one	e or more related tax-exe	mpt	
GRUPO NUEVO LOS ANGELES - 45-5434395 3435 W. TEMPLE ST. LOS ANGELES, CA 90026 PUEBLO NUEVO EDUCATION AND DEVELOPMENT GROUP - 81-1668428, 3435 W. TEMPLE ST., LOS SUPPORT FOR CHARTER PUEBLO NUEVO EDUCATION AND DEVELOPMENT GROUP SUPPORT FOR CHARTER	Name, address, and EIN		Legal domicile (state or	Exempt Code	Public charity status (if section	Direct controlling	con	(g) 512(b)(13) trolled htity?
LOS ANGELES, CA 90026 CHARTER SCHOOLS CALIFORNIA 501C3 LINE 12B, II DEVELOPMENT GROUP PUEBLO NUEVO EDUCATION AND DEVELOPMENT GROUP - 81-1668428, 3435 W. TEMPLE ST., LOS SUPPORT FOR CHARTER	GRUPO NUEVO LOS ANGELES - 45-5434395				301(0)(3))	PUEBLO NUEVO	Yes	No
PUEBLO NUEVO EDUCATION AND DEVELOPMENT GROUP - 81-1668428, 3435 W. TEMPLE ST., LOS SUPPORT FOR CHARTER	3435 W. TEMPLE ST.	HOLDING REAL ESTATE FOR				EDUCATION AND		
- 81-1668428, 3435 W. TEMPLE ST., LOS SUPPORT FOR CHARTER	LOS ANGELES, CA 90026	CHARTER SCHOOLS	CALIFORNIA	501C3	LINE 12B, II	DEVELOPMENT GROUP	X	
		_						
ANGELES, CA 92006 SCHOOLS CALIFORNIA 501C3 LINE 7 NONE								
	ANGELES, CA 92006	SCHOOLS	CALIFORNIA	501C3	LINE 7	NONE		X

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

Page 2

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	Share of total income Share of end-of-year assets		ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General of managin partner? Yes No	(k) Percentage ownership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	tion b)(13) rolled tity?
		country)		or trusty		uoocto		Yes	No

032162 10-28-20

Page 3

art V	Transactions With Related Organizations.	Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	
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Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No		
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X		
b	Gift, grant, or capital contribution to related organization(s)	1b		X		
С	Gift, grant, or capital contribution from related organization(s)	1c		Х		
	Loans or loan guarantees to or for related organization(s)	1d		X		
е	Loans or loan guarantees by related organization(s)	1e		X		
f	Dividends from related organization(s)	1f		Х		
	Sale of assets to related organization(s)	1g		Х		
	Purchase of assets from related organization(s)	1h		Х		
i	Exchange of assets with related organization(s)	1i		Х		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X		
			Х			
k	k Lease of facilities, equipment, or other assets from related organization(s)					
-1	Performance of services or membership or fundraising solicitations for related organization(s)					
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х			
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х			
o	Sharing of paid employees with related organization(s)	10	Х			
р	Reimbursement paid to related organization(s) for expenses	1p		Х		
	Reimbursement paid by related organization(s) for expenses	1q		X		
r	Other transfer of cash or property to related organization(s)	1r		X		
s	Other transfer of cash or property from related organization(s)	1s		X		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.					
	(a) Name of related organization (b) Transaction type (a-s) (c) Amount involved Method of determining amount involved	olved				
1)						

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<u>(1)</u>				
<u>(2)</u>				
<u>(3)</u>				
(4)				
<u>(5)</u>	*			
(6)				

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95-4771789

Page 4

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocation Yes N		General of managing partner? Yes No	(k) Percentage ownership
		,	30000010 0 12 0 1 1)	res No			Yes N	6 (10111111000)	Yes NC	

Schedule R	(Form 990) 2020	CAMINO NUEVO	CHARTER	ACADEMY	95-4771789 Page 5
Part VII	(Form 990) 2020 Supplemental Info	mation			<u> </u>
		ation for responses to ques	stions on Schedu	ule R. See instructions.	
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TAXABLE YEAR **2020**

California Exempt Organization Annual Information Return

028941	12-22-20
FORM	Л

B Amended return	20	20 Annual Informati	on Return					199	9
CAMINO NUEVO CHARTER ACADEMY 2150804 **Political information Assertance control or room; and additional protections of the information and additional protection and additional protections of the information and additional protection and additional protections of the information and additional protection and additional protection and additional protections of the information and additional protection and additional prot	Calendar Ye	ar 2020 or fiscal year beginning (mm/dd/yyyy)	07/01/2020	, and ending (r	nm/dd/yyyy	/)	06	/30/2021	
Sine delines foulfile in coming and the company of	Corporation/O	rganization name			Califo	ornia corpo	oration n	umber	
Sine delines foulfile in coming and the company of	CAMINO	O NIIEVO CHARTER ACADEMY				2150	8 N 4		
A First return							001		
State Stat							771	789	
Suppose CA Process						PMB no.			
A First return		W. TEMPLE STREET			State	ZIP code			
Foreign province/states county Foreign province/states Foreign province/		NGELES					6		
B Amended return Ves X No			Foreign province/state/county					de	
B Amended return Ves X No									
C IRC Section 4947(a)(1) trust	A First ret			d the organization have	any chang	es to its	guideliı		
Described Surrendered (Virtidate) Merged/Reorganized Enter date: immediatyly yin E Check accounting method: (1)		ed return •	Yes X No no						X No
Dissolved Surrendered (Withdrawn) Merged Reorganized First Red Section 237019? Yes No If Yes, "enter the gross receipts from nonnembers sources Yes No If Yes, "enter the gross receipts from nonnembers sources Yes No Mills for granization in a group series Yes No Mills for granization in a group series Yes No Mills organization in a group sexemption Yes No No If Yes," what is the parent's name? Yes No No If Yes," what is the parent's name? Yes No No If Yes," what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No If Yes, what is the parent's name? Yes No No No If Yes, what is the parent's name? Yes No No No No No No No N		ction 4947(a)(1) trust	Yes X No J If						
If Yes, enter the gross receipts from nonmember sources \$ Less the organization a limited liability company?	D Final in								
E Check accounting method: (1)	▼								▲ N0
Federal return filed? (1) •									X No
Complete Part I complete Part I unless not required to file this form. See General Information B and C. Part I complete Part I unless not required to file this form. See General Information B and C. Part I complete Part I unless not required to file this form. See General Information B and C. 1 Gross Sales or receipts from other sources. From Side 2, Part II, line 8		<u> </u>							
G Is this a group filing? See instructions			rej	oort taxable income?				• Yes [X No
Part I Complete Part I unless not required to file this form. See General Information B and C. 1 Gross sales or receipts from other sources. From Side 2, Part II, line 8			Yes X No N Is	the organization under	audit by the	e IRS or	has the	е	
Part I Complete Part I unless not required to file this form. See General Information B and C. 1 Gross sales or receipts from other sources. From Side 2, Part II, line 8									
Part I Complete Part I unless not required to file this form. See General Information B and C. 1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	If "Yes,	' what is the parent's name?			4 pending?			Yes L	X No
1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	-		Da	te filed with IRS					
Receipts and Revenues Receipts and Revenues and Revenues and Receipts a	Part I	Complete Part I unless not required to file this fo	rm. See General Informatio	n B and C.					
Receipts and Revenues Revenues A Total gross receipts for filling requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B Cost of goods sold Cost or other basis, and sales expenses of assets sold Total costs. Add line 5 and line 6 Total costs. Add line 5 and line 6 Total gross income. Subtract line 7 from line 4 Expenses Total gross income. Subtract line 7 from line 4 Total expenses and disbursements. From Side 2, Part II, line 18 Expenses Total payments Use tax. See General Information K Total payments Lise tax See General Information K Total payments Lise tax See General Information K Belance due. Add line 12 and line 12, subtract line 11 from line 12 Lise tax balance. If line 12 is more than line 12, subtract line 11 from line 12 Total payments Lise only Date CHIEF EXECUTIV Check if seft-my knowledge and bellet, if self-wide and address Prim's name (cry ours, if self-wide and address GLENDORA, CA 91740) Total costs. Add line 5 Route 1 Like as was named this return, including accompanying schedules and statements, and to the best of my knowledge and bellet, if self-wide and address Preparer's lignature Preparer's lignature Preparer's lignature LITE Check if self-my long address and statements, and to the best of my knowledge and bellet, if self-wide and address GLENDORA, CA 91740		1 Gross sales or receipts from other sources	s. From Side 2, Part II, line 8				1	338,7	07 00
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Filing Fee Cost or other basis, and sales expenses of assets sold • 6 00	and						4	00,303,0	90 00
Total costs, Add line 5 and line 6 8 Total gross income. Subtract line 7 from line 4 9 Total expenses and disbursements. From Side 2, Part II, line 18 10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 11 Total payments 12 Use tax. See General Information K 13 Payments balance. If line 12 is more than line 12, subtract line 11 from line 12 14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12 15 Penalties and Interest. See General Information J 16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result In the 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 prepare (other than taxpayer) is based on all information of which prepare has any knowledge. Preparer's Signature of officer Preparer's Signature of officer MARLEN GOMEZ Preparer's Signature of O2/23/22 Paid Preparer's Use Only Erm's FEIN CHIEF EXECUTIV Preparer's Signature of O2/23/22 Paid Preparer's Use Only Erm's America Check if Self-employed of Telephone of T	Revenues								
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Signature of officer Signature of officer NARLEN GOMEZ Preparer's signature of signature of officer Preparer's Signature MARLEN GOMEZ Preparer's Signature of officer Preparer's Signature of officer Preparer's Signature of officer NARLEN GOMEZ O2/23/22 Check if Self-employed of Self-employed of Firm's FEIN 41-0746749 Telephone CLIFTONLARSONALLEN LLP 2210 EAST ROUTE 66 GLENDORA, CA 91740 (626) 857-7300		16 Balance due. Add line 12 and line 15. The	n subtract line 11 from the	esult	te and to the	hest of m	16	adde and belief	00
Here Signature of officer Preparer's signature of officer MARLEN GOMEZ Preparer's Signature of officer Polate Check if Self-employed Pola 06775 Prim's name (or yours, if self-employed) Or officer Preparer's Signature of officer Prin's name (or yours, if self-employed of officer) Prin's name (or yours, if self-employed of officer) Prin's name (or yours, if self-employed officer) Preparer's Signature of officer Prin's name (or yours, if self-employed officer) Or yours, if self-employed officer off	Sign	it is true, correct, and complete. Declaration of preparer (c	other than taxpayer) is based on al	I information of which prepare	arer has any k	nowledge		age and belief,	
Preparer's signature MARLEN GOMEZ Preparer's signature MARLEN GOMEZ Firm's name (or yours, if self-employed) and address GLENDORA, CA 91740 Paid Preparer's Use Only Date Ode Check if self-employed P01306775 P01306775 P01306775 P1N P01306775 P1N P1N P1N P1N P1N P1N P1N P1	Here	Signature						Telephone	
Paid Preparer's signature MARLEN GOMEZ Paid Preparer's Use Only Preparer's Signature MARLEN GOMEZ Firm's name (or yours, if self-employed) and address CLIFTONLARSONALLEN LLP 2210 EAST ROUTE 66 GLENDORA, CA 91740 D2/23/22 self-employed P01306775 Point's FEIN 41-0746749 Telephone (626) 857-7300		of officer	Спл					● PTIN	
Paid Preparer's Use Only Firm's name (or yours, if self-employed) and address Firm's name (or yours, if self-employed) and address CLIFTONLARSONALLEN LLP 2210 EAST ROUTE 66 GLENDORA, CA 91740 ● Firm's FEIN 41-0746749 ● Telephone (626) 857-7300		Preparer's MARLEN GOMEZ		02/23/22				P01306775	
Use Only Use Only 2210 EAST ROUTE 66 GLENDORA, CA 91740 • Telephone (626) 857-7300	Paid			_ • • • -					
Use Only employed 2210 EAST ROUTE 66 GLENDORA, CA 91740 (626) 857-7300	Preparer's	if self-							
GLENDORA, CA 91740 (626) 857-7300	Use Only	employed) 2210 EAST ROUTE						•	T 2 2 2
I MAY THE FIB discuss this return with the preparer shown above? See instructions • _ A Yes _ No		GLENDORA, CA 917		*:		ু ড	7		7300
		I may the FTB discuss this return with the prepare	ei Showh above? See mstruc	uuiis		▼[Δ	Yes	L No	

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Form 199 2020 Side 1

CAMINO NUEVO CHARTER ACADEMY

95-4771789

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

028951 12-22-20

	2 Interest3 Dividends				2	63,102	00
	3 Dividends			_	_		
	• Dividondo				3		00
Receipts	4 Gross rents				4		00
from	5 Gross royalties				5		00
Other	6 Gross amount received from sale	of assets (See Instructions)		•	6		00
Sources	7 Other income		SEE STA	TEMENT 3 •	7	275,605	00
	8 Total gross sales or receipts from	other sources. Add line 1 thr	ough line 7. Enter here and or	Side 1, Part I, line 1	8	338,707	00
	9 Contributions, gifts, grants, and si	milar amounts paid		•	9		00
	10 Disbursements to or for members			•	10		00
	11 Compensation of officers, director	rs, and trustees	SEE STA	TEMENT 4 •	11	255,388	
	12 Other salaries and wages			•	12 1	7,992,442	00
Expenses	13 Interest			•	13	385,721	. 00
and	14 Taxes				14	515,043	00
Disburse-	15 Rents				15	2,995,514	: 00
ments	16 Depreciation and depletion (See in	nstructions)		•	16	1,672,845	00
	17 Other expenses and disbursement	S	SEE STA	TEMENT 5 •	17 3	9,950,086	00
	18 Total expenses and disbursement	s. Add line 9 through line 17.	Enter here and on Side 1, Par	t I, line 9		3,767,039	
Schedul		Beginning of t			of taxable		
Assets		(a)	(b)	(c)		(d)	
		ì	10,771,360	` ` `	•	13,877,8	74
	ounts receivable		4,995,967		•	8,072,8	
	es receivable		, , , , ,		•		
	ries				•		
	and state government obligations				•		
	nents in other bonds				•		
	nents in stock				•		
8 Mortga					•		
-	nvestments				•		
10 a Denr	eciable assets	56,080,546		35,155,23			
h less	accumulated depreciation	10,539,797	45,540,749			27,417,8	25
		10,333,131	12,579,941	(1,131,35	•	12,579,9	
10 Othor o	ssets STMT 6		536,846		•	493,4	
			74,424,863			62,441,9	
	ssets		74,424,003			02,441,5	15
	nd net worth		4,755,400		•	4,619,7	97
	ts payable		4,733,400			<u> </u>	
	utions, gifts, or grants payable						
	and notes payable						
17 Mortga	ges payable		20,712,733		_	12,049,3	20
	abilities STMT 7		20,712,733			12,049,3	49
	stock or principal fund				•		—
	or capital surplus. Attach reconciliation		10 056 720		•	15 770 7	00
	d earnings or income fund		48,956,730 74,424,863		•	45,772,7 62,441,9	09
	abilities and net worth		-			02,441,9	13
Schedul		er books with income per ret		than \$50,000			
			L, line 13, column (d), is less				
	ome per books	<u>-3,183,9</u>		-			
	income tax	****	not included in thi				
	of capital losses over capital gains		8 Deductions in this	•			
	not recorded on books this year			me this year	🕒		
5 Expense	es recorded on books this year not		9 Total. Add line 7 a				
deducte	ed in this return		10 Net income per re				4.3
6 Total. A	dd line 1 through line 5	3,183,9	9 Subtract line 9 fro	m line 6		-3,183,9	41

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Side 2 Form 199 2020

CA 199	CASH CONTRIBUTIONS INCLUDED ON PART I, LINE 3	SI	CATEMENT 1
CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
UNIDOS US FOUNDATION	1126 16TH STREET NW, SUITE 600 WASHINGTON, DC 20036	06/30/21	59,000.
THE ANGELO FAMILY CHARITABLE FOUNDATION	245 PARK AVENUE 26TH FLOOR NEW YORK, NY 10167	06/30/21	25,000.
GENYOUTH	555 MADISON AVENUE, 5TH FLOOR NEW YORK, NY 10022	06/30/21	9,000.
GREAT PUBLIC SCHOOLS NOW	1150 S. OLIVE ST., SUITE 1325 LOS ANGELES, CA 90015	06/30/21	50,000.
TOTAL INCLUDED ON LINE 3			143,000.
CA 199	NONCASH CONTRIBUTIONS INCLUDED ON PART I, LINE 3	Sī	CATEMENT 2
CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS		
CERREL ASSOCIATES	750 N SAN VICENTE BLVD S HOLLYWOOD, CA 90069	UITE 800 W	EST
PROPERTY DESCRIPTION	DATE OF GIFT FMV OF GI	FT TO	TAL AMOUNT
FURNITURE	06/30/21 15,	000.	15,000.
CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS		
SEE'S CANDY	PO BOX 93024 LONG BEACH,	CA 90809	
PROPERTY DESCRIPTION	DATE OF GIFT FMV OF GI	FT TO	TAL AMOUNT
CANDY	06/30/21 92,	732.	92,732.
TOTAL INCLUDED ON LINE 3	107,	732.	107,732.

CAMINO NUEVO CHARTER ACADEMY

CA 199 OTHE	R INCOME	STATEMENT 3
DESCRIPTION		AMOUNT
FCC E-RATE CREDITS ALL OTHER LOCAL REVENUE		241,174. 34,431.
TOTAL TO FORM 199, PART II, LINE 7		275,605.
CA 199 COMPENSATION OF OFFICERS,	DIRECTORS AND TRUSTEES	STATEMENT 4
NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
ADRIANA ABICH 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	CHIEF EXECUTIVE OFFICER 40.00	255,388.
TAMMY STANTON 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	CHIEF FINANCIAL OFFICER 40.00	0.
CINDY LEE SMET 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	CHAIR 1.00	0.
DAVID GIDLOW 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	SECRETARY 1.00	0.
SHIHO ITO 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	TREASURER 1.00	0.
CELIA ALVARADO 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER 1.00	0.
RACHEL HUNT 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER 1.00	0.
TAMARA POWERS 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER 1.00	0.

CAMINO NUEVO CHARTER ACADEMY			95-4771789
LIDA JENNINGS 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER	1.00	0.
JENNY SALAMANCA 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER	1.00	0.
ELENA LOPEZ 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER	1.00	0.
GIL FLORES 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER	1.00	0.
JAZMIN ORTEGA 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER	1.00	0.
ARELI VILLAREAL 3435 W. TEMPLE STREET LOS ANGELES, CA 90026	MEMBER	1.00	0.
MOMAL MO HODW 100 DADM II TIND 11		_	255 200
TOTAL TO FORM 199, PART II, LINE 11		<u> </u>	255,388.

CA 199	OTHER EXPENSE	S	STATEMENT 5
DESCRIPTION			AMOUNT
LOSS ON DISPOSAL INSTRUCTIONAL MATERIALS NUTRITION PROGRAM FOOD DUES & MEMBERSHIPS PENSION PLAN CONTRIBUTIONS OTHER EMPLOYEE BENEFITS MANAGEMENT FEES LEGAL FEES OTHER PROFESSIONAL FEES ADVERTISING AND PROMOTION OFFICE EXPENSES INFORMATION TECHNOLOGY TRAVEL INSURANCE ALL OTHER EXPENSES			17,821,063. 4,048,003. 700,944. 58,658. 3,029,007. 1,604,220. 5,628,866. 93,446. 4,457,288. 124,520. 838,929. 1,185,019. 13,988. 30,608. 315,527.
TOTAL TO FORM 199, PART II, LINE	E 17		39,950,086.
CA 199	OTHER ASSETS	-	STATEMENT 6
DESCRIPTION		BEG. OF YEAR	END OF YEAR
PREPAID EXPENSES AND DEFERRED CH DUE FROM OTHERS	HARGES	359,888. 176,958.	305,178. 188,253.
TOTAL TO FORM 199, SCHEDULE L, I	LINE 12	536,846.	493,431.
CA 199	OTHER LIABILIT	TES	STATEMENT 7
		BEG. OF YEAR	END OF YEAR
DESCRIPTION			2112 01 12111
DEFERRED REVENUE UNSECURED NOTES AND LOANS PAYABI	LE	19,000. 20,693,733.	1,423,448. 10,625,881.

CA 199	FUND BAL	ANCES		STATEMENT 8
DESCRIPTION			BEG. OF YEAR	END OF YEAR
NET ASSETS WITHOUT DONOR RESTRICTIONS NET ASSETS WITH DONOR RESTRICTIONS		-	48,950,723. 6,007.	45,772,789. 0.

48,956,730.

45,772,789.



TOTAL TO FORM 199, SCHEDULE L, LINE 21

Camino Nuevo Charter Academy - Finance Committee Meeting - Agenda - Thursday March 3, 2022 at 3:00 PM 022 DO NOT MAIL THIS FORM TO THE FTB Date Accepted **FORM** TAXABLE YEAR California e-file Return Authorization for 8453-EO 2020 **Exempt Organizations** Exempt Organization name Identifying number CAMINO NUEVO CHARTER ACADEMY 95-4771789 Electronic Return Information (whole dollars only) 60,583,098 Total gross receipts (Form 199, line 4) 1 60,583,098 2 Total gross income (Form 199, line 8) 63,767,039 Total expenses and disbursements (Form 199, line 9) Part II Settle Your Account Electronically for Taxable Year 2020 Electronic funds withdrawal 4a Amount 4b Withdrawal date (mm/dd/yyyy) Part III Banking Information (Have you verified the exempt organization's banking information?) 5 Routing number Checking 6 Account number 7 Type of account: Part IV Declaration of Officer I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2020 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay. CHIEF EXECUTIVE OFFICER Sign Signature of office Date Here Declaration of Electronic Return Originator (ERO) and Paid Preparer. Part V I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2020 Handbook for Authorized e-file Providers. I will keep form FTB 8453-E0 on file for four years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge. ERO's PTIN Date Check if Check ERO's also paid if self-**ERO** MARLEN GOMEZ ₽01306775 preparer employed Must Firm's name (or yours CLIFTONLARSONALLEN Firm's FEIN 41-0746749 if self-employed) Sign 2210 EAST ROUTE 66 and address GLENDORA, ZIP code 91740 CA Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

For Privacy Notice, get FTB 1131 ENG/SP.

Firm's name (or yours

if self-employed)

and address

preparer's signature

FTB 8453-EO 2020

Paid preparer's PTIN

Paid

Must

Sign

Preparer