

# Great Oaks Charter School - Bridgeport

## GOBPT March Finance Meeting

Published on March 13, 2026 at 3:45 PM EDT

Amended on March 16, 2026 at 3:06 PM EDT

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### Date and Time

Monday March 16, 2026 at 4:00 PM EDT

### Location

375 Howard Ave. Bridgeport, CT or virtual

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### Agenda

	Purpose	Presenter	Time
<b>I. Opening Items</b>			<b>4:00 PM</b>
<b>A.</b> Record Attendance		David Zieff	1 m
<b>B.</b> Call the Meeting to Order		David Zieff	1 m
<b>C.</b> Approve Last Month's Meeting Minutes	Approve Minutes	David Zieff	1 m
Approve minutes for GOBPT February Finance Meeting on February 18, 2026			
<b>II. Administrative / Financial Overview</b>			<b>4:03 PM</b>
<b>A.</b> Financial Position	FYI	Benjamin Chan	5 m
Cash position			

	Purpose	Presenter	Time
<b>III. Review of FY26 Financials</b>			<b>4:08 PM</b>
<b>A.</b> Financial Documents	FYI	Benjamin Chan	25 m
<b>IV. New Vendors</b>			<b>4:33 PM</b>
<b>A.</b> New Vendors over \$5,000	FYI	Benjamin Chan	3 m
<b>V. Additional Items</b>			<b>4:36 PM</b>
<b>A.</b> Additional Items		Benjamin Chan	1 m
			* E-rate renewal for internet maintenance with same vendor for FY27
			* 990 approval
			* approval to seek a secured loan
			* approval to optimize credit card options
<b>VI. Closing Items</b>			<b>4:37 PM</b>
<b>A.</b> Adjourn Meeting	Vote	David Zieff	1 m

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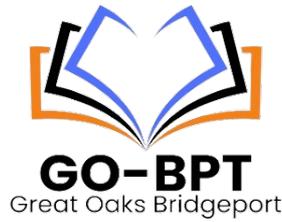
Attention: Times and Locations are subject to change.

# Coversheet

## Approve Last Month's Meeting Minutes

**Section:** I. Opening Items  
**Item:** C. Approve Last Month's Meeting Minutes  
**Purpose:** Approve Minutes  
**Submitted by:**  
**Related Material:** Minutes for GOBPT February Finance Meeting on February 18, 2026

APPROVED



## Great Oaks Charter School - Bridgeport

### Minutes

#### GOBPT February Finance Meeting

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**Date and Time**

Wednesday February 18, 2026 at 4:00 PM

**Location**

375 Howard Ave. Bridgeport, CT or virtual

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**Committee Members Present**

Bob Carlson (remote), Daniel Luciano (remote), David Zieff

**Committee Members Absent**

*None*

**Guests Present**

Benjamin Chan (remote), Farah Martin, John Scalice, Latoya Hubbard (remote)

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**I. Opening Items****A. Record Attendance****B. Call the Meeting to Order**

David Zieff called a meeting of the Finance Committee Committee of Great Oaks Charter School - Bridgeport to order on Wednesday Feb 18, 2026 at 4:03 PM.

**C. Approve Last Month's Meeting Minutes**

Bob Carlson made a motion to approve the minutes from GOBPT December Finance Meeting on 12-15-25.

David Zieff seconded the motion.

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

## II. Administrative / Financial Overview

### A. Financial Position

B. Chan went over the finances for the past month.

We will have the budget to actual through the end of January, balance sheet and the dashboard.

- Starting Cash balance as of the end of January: 1.3M
- Receivables from spEd: 145,125
- We have the 284 in reserve account
  - B. Carlson asked what kind of account is that. Is it gaining interest at all? B. Chan says it does have a small interest. Previous board suggested the school plays it safe. The interest is about 4% on the 284,133.
- Meal claim will be coming to the middle of March
- The food account will help us catch up to old invoices for the meals.

The topic of opening up an account that earns interest was discussed with the committee and CEO. B. Carlson asked what are the risks. B. Chan, CFO, reports the risk is if there was financial collapse on JP Morgan or other banks. D. Zieff suggests a motion that the finance committee recommends the school open up an interest bearing account to take care of the cash flow during the period of time. D. Zieff asked to bring up a motion of opening up an investment account. This was put into a vote and approved.

David Zieff made a motion to Approve opening up an investment account for the school.

Bob Carlson seconded the motion.

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

## III. Review of FY25 Financials

### A. Financial Documents

Fundraising:

94,000 from Spinelli/ Zieff- 5,000 each of two years and the rest from Barr.

- On the document from the Spinelli Foundation mentioned dual enrollment funding. This will help scholarships.

Federal funding in red- 182,000 missing 259k 21st Century grant.

The expenses hit but not against the grant at the moment.

Expenses:

Most everything is in line

Professional Contract- higher from the Accountants

Budget of a quarter of a million dollars on school lunches and we only spent 190,000.

Why didn't we spend the budget? B. Chan reports we plan out on what we spent last year. People ate less and get less from the USDA revenue side.

D. Zieff asked about a budget item which was the telephone item and the budget is of 20k and we spent 44k. D. Zieff asked what changed? B. Chan reports we added several new lines which caused the change. Another item was for insurance and it was about 60k and we spent 120k. B. Chan reports that this is because we are counting for right of use or ROU. because we submit this the auditor will put the ROU for the copier in the building. B. Chan states we do this upfront so that we can have this for the audit. We misclassified the ROU into that bucket which will be cleared up.

D. Zieff also asked to clear up We have a budget of 35k for accounting and auditing, we spent 51k. This wasn't a timing issue, this was for last year. This year we expect the numbers to fall very close to the audit.

B. Chan went over the school electricity usage. This chart shows that in the past off peak and peak usage over the past years. This year we are saving between 35k-45k a month.

D. Zieff asked how SAGE conversion is going. B. Chan states we are using it but it is not user friendly. The staff helping in the beginning did not set it up like we had it before with Quickbooks. B. Chan states do we stay with the system or do we switch back to Quickbooks which is easy. D. Zieff states he does not recommend we go back to Quickbooks.

B. Chan reports we are done with the audit.

#### **IV. New Vendors**

##### **A. New Vendors over \$5,000**

Two vendors were discussed for approval.

- Nicholson Events - Knowlton for staff appreciation

- Rosetta Stone - language acquisition

David Zieff made a motion to Approve Nicholson Events and Rosetta Stone to become our vendors.

Bob Carlson seconded the motion.

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

## V. Additional Items

### A. Additional Items

L. Hubbard went over a present issue with the school's elevator.

Elevator repairs need to take place. The company we have a contract with, Kone, needs to send a specialist here which isn't available until the end of March. This creates a liability issue with our students and staff.

With this being said, Robert is looking into looking at several other elevator companies. This includes the financial costs associated with the elevators. Given the urgency of it, if we find another company before the next board meeting that can do the work we will have to use them and get the approval after the work has been done.

The financial committee agreed to give approval on the new elevator company that needs to be used. B. Carlson states that the landlord might be responsible for the issues.

David Zieff made a motion to authorize the school to enter into contract or use existing contract to do necessary maintenance to the elevators of up to \$25,000.

Daniel Luciano seconded the motion.

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

## VI. 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 4:42 PM.

Respectfully Submitted,  
David Zieff

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Attention: Times and Locations are subject to change.

# Coversheet

## Financial Documents

**Section:** III. Review of FY26 Financials  
**Item:** A. Financial Documents  
**Purpose:** FYI  
**Submitted by:**  
**Related Material:** 2026-02 GO-BPT Dashboard.pdf  
FY26 26-02 Budget-to-Actual.pdf  
FY26 Balance Sheet 26-02.pdf

**Great Oaks Charter School - Bridgeport**  
**Financial Dashboard**  
 3/16/26 Meeting

<b>Cash</b>	<b>2/28/2026</b>	<b>1/31/2026</b>	<b>12/31/2025</b>
Starting Cash Balance	1,327,016	2,280,332	518,474
Deposits	267,485	11,180	2,667,261
Ending Cash Balance - Chase Operating Account	771,868	1,327,016	2,280,332
Cash Burn/Month	822,633	964,496	905,403
Cash Balance to Burn Rate (months)	0.94	1.38	2.52
Cash Balance - Chase Food Account	35,405	2,538	14,389
Cash Balance - Chase Reserve Account	284,137	284,135	284,133
Total Cash Position:	<b>1,091,410</b>	<b>1,613,689</b>	<b>2,578,854</b>
Key:	Greater than 2 months in reserve	Between 1 and 2 months in reserve	Less than 1 month in reserve

<b>Balance Sheet</b>	<b>2/28/2026</b>	<b>1/31/2026</b>	<b>12/31/2025</b>
Current Ratio (current assets to current liabilities)	1.42	2.52	2.70
Debt to Assets Ratio			

<b>Fundraising</b>	<b>Budget</b>	<b>Actual</b>	<b>Delta</b>
Capital/Building - Barr/Spinelli/Zieff	119,000	94,000	(25,000)
Operating Support			

<b>Summary of Material Expense Variances</b>	<b>Budget</b>	<b>Actual</b>	<b>Delta</b>
Enrollment	661	661	
Description			
SpEd Funding	398,167	393,834	(4,333)
State Funding	6,484,051	6,492,215	8,164
Federal Funding	968,278	875,898	(92,380)
	<b>7,850,496</b>	<b>7,761,947</b>	<b>(88,549)</b>
Personnel - Salaries	4,477,575	4,442,755	(34,820)
Personnel - Payroll Taxes	230,566	237,777	7,211
Personnel - Benefits	495,059	482,055	(13,004)
Professional/Contracted	479,575	472,971	(6,604)
School Ops	648,991	641,050	(7,941)
Facility Support	628,795	696,986	68,191
Rent	973,456	1,003,321	29,865
Subtotal	<b>7,934,017</b>	<b>7,976,915</b>	<b>42,898</b>

Missing \$259k 21st Century

Insurance (front loaded), security & phone lines  
 ROU adjustment to actual rent

**Great Oaks Charter School - Bridgeport Inc**  
**FY26 Revenues and Expenditures - Budget vs Actual**  
**As of February 28, 2026**

	<b>July - Feb Actual</b>	<b>July - Feb Budget</b>	<b>Delta</b>
Revenues over Expenditures			
Revenues			
Contributions			
Contributions			
PRIVATE & OTHER REVENUE	106,566	79,333	(27,233)
Total Contributions	106,566	79,333	(27,233)
Contributions In Kind			
Inkind Revenue Other	60,604	0	(60,604)
Total Contributions In Kind	60,604	0	(60,604)
Total Contributions	167,170	79,333	(87,836)
Grant Revenues			
Grant Revenue - Governmental			
REVENUES FROM STATE SOURCES	6,492,215	398,167	(6,094,048)
REVENUES FROM FEDERAL SOURCES	875,898	6,484,051	5,608,154
REVENUE FROM LOCAL CITY GOVERNMENT	393,834	968,278	574,444
Total Grant Revenue - Governmental	7,761,946	7,850,496	88,550
Total Grant Revenues	7,761,946	7,850,496	88,550
Other Revenue			
Tutor Housing Fees	3,000	2,667	(333)
Interest Income	21	0	(21)
Other Miscellaneous Income	9,609	0	(9,609)
Total Other Revenue	12,630	2,667	(9,964)
Total Revenues	<b>7,941,746</b>	<b>7,932,496</b>	<b>(9,250)</b>
Expenditures			
Direct			
SCHOOL OPERATIONS	2,020	3,999	1,979
Board Expenses	1,365	1,167	(198)
Classroom Supplies	7,158	3,333	(3,825)

Textbooks / Workbooks	43,662	99,094	55,432
Tech Materials < \$2500	5,042	0	(5,042)
Equipment / Furniture < \$2500	4,631	11,333	6,702
Copier Maintenance/Lease	2,865	34,873	32,009
Digital Platform/Licenses	84,843	49,160	(35,683)
Summer School Supplies	3,413	2,217	(1,196)
Student Testing & Assessment	3,375	3,854	479
Required Student Transportation	6,715	3,333	(3,381)
Student Services - other	111	0	(111)
Office Expense	37,361	28,622	(8,739)
Staff & Curr Development	71,239	11,898	(59,341)
Staff Appreciation	11,529	20,000	8,471
Memberships/Cooperatives	5,308	7,300	1,992
Staff Recruitment	149	2,000	1,851
Student Recruitment / Marketing	29,990	19,707	(10,283)
Student/Staff Uniforms	8,964	5,000	(3,964)
Student Incentives	8,133	20,000	11,867
Enrichment Programs/Trips	47,027	20,000	(27,027)
Field Trips (Non-Enrichment)	3,726	0	(3,726)
Social/Recess/Misc	8,000	0	(8,000)
Graduation	835	8,467	7,631
Student Athletics	1,500	0	(1,500)
School Meals / Lunch	235,634	279,968	44,334
Travel Related - Staff	220	0	(220)
Other School Operations	799	11,667	10,868
Medical Supplies	213	0	(213)
Other Tutor Related	5,223	2,000	(3,223)
<b>Total Direct</b>	<b>641,050</b>	<b>648,991</b>	<b>7,941</b>
<b>Personnel</b>			
<b>PR Benefits</b>			
Fringe Benefits (ER)	469,115	495,059	25,944
Retirement / Pension	12,940	0	(12,940)
<b>Total PR Benefits</b>	<b>482,055</b>	<b>495,059</b>	<b>13,004</b>
<b>PR Taxes</b>			
Salaries and Wages- Exe. Mgmt	476,387	624,131	147,744
Salaries and Wages- Academt Leadership	715,408	519,332	(196,076)

Salaries and Wages- Operations	516,429	612,405	95,976
Salaries and Wages-Gen Ed Teachers	1,152,348	1,306,187	153,838
Salaries and Wages- Elective Teachers	189,385	198,111	8,726
Salaries and Wages- MLL Teachers	184,366	0	(184,366)
Salaries and Wages- Sped Ed Teachers	337,775	540,062	202,287
Salaries and Wages- Prof. Dev. Stipend	18,500	0	(18,500)
Salaries and Wages- Extended School Stipend	106,153	0	(106,153)
Salaries and Wages- Coverage Stipend	2,650	0	(2,650)
Salaries and Wages- Operations Stipend	12,398	0	(12,398)
Salaries and Wages- Summer Stipend	63,500	153,933	90,433
Salaries and Wages- Culture	265,302	523,413	258,112
Salaries and Wages- Social Work/Guidance	230,607	0	(230,607)
Salaries and Wages- Paraprofessional	171,550	0	(171,550)
Payroll Taxes	237,777	230,566	(7,211)
Total PR Taxes	4,680,532	4,708,141	27,608
Total Personnel	5,162,587	5,203,200	40,613
Occupancy			
Rent	843,141	811,288	(31,853)
Tutor Rent	160,180	162,168	1,988
Total Occupancy	1,003,321	973,456	(29,865)
Professional Fees			
Accounting/Audit Fees	53,604	40,269	(13,335)
Legal	9,576	11,133	1,557
Tutor Fees	201,419	196,947	(4,472)
Nurse/Summer School	21,504	2,700	(18,804)
Payroll Services	87,393	81,467	(5,927)
Tech Support	84,934	84,515	(419)
Staff Appreciation	7,299	0	(7,299)
Administrative Fees	1,921	0	(1,921)
Other Professional Services	11,925	55,941	44,015
Total Professional Fees	479,575	472,971	(6,604)
General and Administrative Expenses			
Facilities			
Janitorial/Cleaning	135,680	134,248	(1,432)
Total Facilities	135,680	134,248	(1,432)
Insurance			

Insurance	100,810	73,343	(27,467)
Total Insurance	100,810	73,343	(27,467)
Interest Expenses			
Interest Expense	3,267	0	(3,267)
Total Interest Expenses	3,267	0	(3,267)
Meals and Entertainment			
Meal Staff Support	31,347	31,040	(307)
Food Service Supplies	2,783	8,041	5,257
Total Meals and Entertainment	34,131	39,081	4,950
Other Expenses			
Parent Engagement	516	0	(516)
Total Other Expenses	516	0	(516)
Repairs and Maintenance			
Maintenance/Handy Work	37,745	36,200	(1,545)
Maintenance Supplies	28,347	20,199	(8,149)
Repairs & General Maintenance	11,442	8,300	(3,142)
Waste/Pest	10,794	16,200	5,406
Storage & Other Building Related	11,167	12,008	841
HVAC	7,236	20,223	12,986
Elevator	14,237	17,941	3,704
Fire Prevention	12,277	6,475	(5,802)
Security	81,019	67,944	(13,075)
Total Repairs and Maintenance	214,263	205,489	(8,774)
Telephone			
Telephone	48,149	25,056	(23,093)
Total Telephone	48,149	25,056	(23,093)
Utilities			
Utilities	106,511	128,667	22,156
Internet	18,194	22,911	4,717
Tutor - Utilities	35,982	0	(35,982)
Total Utilities	160,686	151,578	(9,108)
Total General and Administrative Expenses	697,502	628,795	(68,706)
Total Expenditures	<b>7,984,035</b>	<b>7,927,414</b>	<b>(56,621)</b>
<b>Total Revenues over Expenditures</b>	<b>(42,289)</b>	<b>5,082</b>	<b>47,371</b>

## Great Oaks Charter School - Bridgeport Inc Balance Sheet

	Year Ending 06/30/2026 <small>Current Fiscal Year</small>	Year Ending 06/30/2025 <small>Prior Fiscal Year</small>	Year Ending 06/30/2026 <small>Difference</small>
<b>Assets</b>			
Current Assets			
Cash and Cash Equivalents	264,368.86	803,900.76	(539,531.90)
Accounts Receivable, Net	394,357.82	307,426.71	86,931.11
Other Current Assets	380,303.48	380,303.48	0.00
Total Current Assets	<u>1,039,030.16</u>	<u>1,491,630.95</u>	<u>(452,600.79)</u>
Long-term Assets			
Property & Equipment	5,109,770.99	5,053,270.75	56,500.24
Other Long-term Assets	17,150,339.00	17,091,120.98	59,218.02
Total Long-term Assets	<u>22,260,109.99</u>	<u>22,144,391.73</u>	<u>115,718.26</u>
Intangible Assets, Net			
Amortization	3,037,731.06	2,881,740.69	155,990.37
Total Intangible Assets, Net	<u>(3,037,731.06)</u>	<u>(2,881,740.69)</u>	<u>(155,990.37)</u>
<b>Total Assets</b>	<b><u>20,261,409.09</u></b>	<b><u>20,754,281.99</u></b>	<b><u>(492,872.90)</u></b>
<b>Liabilities and Net Assets</b>			
Liabilities			
Short-term Liabilities			
Accounts Payable	198,507.88	192,879.14	5,628.74
Accrued Liabilities	534,292.37	516,313.67	17,978.70
Deferred Revenue	727,210.00	0.00	727,210.00
Other Short-term Liabilities	17,127,272.61	17,862,444.07	(735,171.46)
Total Short-term Liabilities	<u>18,587,282.86</u>	<u>18,571,636.88</u>	<u>15,645.98</u>
Total Liabilities	<u>18,587,282.86</u>	<u>18,571,636.88</u>	<u>15,645.98</u>
Net Assets	<u>1,674,126.23</u>	<u>2,182,645.11</u>	<u>(508,518.88)</u>
<b>Total Liabilities and Net Assets</b>	<b><u>20,261,409.09</u></b>	<b><u>20,754,281.99</u></b>	<b><u>(492,872.90)</u></b>

# Coversheet

## Additional Items

**Section:** V. Additional Items  
**Item:** A. Additional Items  
**Purpose:**  
**Submitted by:**  
**Related Material:** 2024 Great Oaks CS - Bridgeport.pdf  
Chase credit cards.pdf  
Credit Card Purchases - Cash Back.pdf

EXTENDED TO MAY 15, 2026

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

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

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

**2024**

Open to Public Inspection

**A** For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>GREAT OAKS CHARTER SCHOOL - BRIDGEPORT</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>375 HOWARD AVENUE</b> City or town, state or province, country, and ZIP or foreign postal code <b>BRIDGEPORT, CT 06605</b> <b>F</b> Name and address of principal officer: <b>JOHN SCALICE</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>47-1159132</b> <b>E</b> Telephone number <b>203-870-8188</b> <b>G</b> Gross receipts \$ <b>12,347,596.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: <b>HTTPS://GOBPT.ORG/</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation: <b>2014</b> <b>M</b> State of legal domicile: <b>CT</b>

**Part I Summary**

	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>GREAT OAKS CHARTER SCHOOL USES HIGH-DOSAGE TUTORING &amp; A WHOLE-STUDENT APPROACH TO ACADEMIC SUCCESS.</b>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>Activities &amp; Governance</b>	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>10</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>9</b>
	<b>5</b>	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	<b>5</b>	<b>130</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>10</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>
	<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>
<b>9</b>		Program service revenue (Part VIII, line 2g)	<b>2,837,477.</b>	<b>3,296,104.</b>
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>8,170,105.</b>	<b>9,050,837.</b>
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>2.</b>	<b>29.</b>
<b>12</b>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>1,750.</b>	<b>626.</b>
			<b>11,009,334.</b>	<b>12,347,596.</b>
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>0.</b>	<b>0.</b>
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>6,945,660.</b>	<b>7,573,894.</b>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>0.</b>	<b>0.</b>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25)	<b>0.</b>	
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>4,826,527.</b>	<b>4,816,970.</b>
	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>11,772,187.</b>	<b>12,390,864.</b>
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>-762,853.</b>	<b>-43,268.</b>
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<b>20,794,732.</b>	<b>19,841,683.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>18,539,355.</b>	<b>17,629,574.</b>
			<b>2,255,377.</b>	<b>2,212,109.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>JOHN SCALICE, CHIEF EXECUTIVE OFFICER</b> Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Preparer's name <b>SACHA RICHARDS</b>	Preparer's signature <b>SACHA RICHARDS</b>
	Firm's name <b>PKF O'CONNOR DAVIES ADVISORY, LLC</b>	Date <b>03/11/26</b>
	Firm's address <b>ONE CORPORATE DRIVE, SUITE 725 SHELTON, CT 06484-6241</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P01378509</b>
		Firm's EIN <b>33-1374517</b> Phone no. <b>203-929-3535</b>

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: GREAT OAKS CHARTER SCHOOL IS A PUBLIC SCHOOL PROVIDING HIGH-DOSAGE TUTORING, DATA-DRIVEN LEARNING STRATEGIES & EXTRA-CURRICULAR OPPORTUNITIES TO STUDENTS IN GRADES 6-12 TO ENSURE SUCCESS IN THE CAREER OR COLLEGE OF THEIR CHOICE. GREAT OAKS CHARTER SCHOOL -

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 9,024,259. including grants of \$ 0. ) (Revenue \$ 9,050,837. ) EDUCATION: GO-BPT IS A PUBLIC CHARTER SCHOOL THAT PROVIDES EDUCATIONAL SERVICES TO STUDENTS FROM THE LOCAL COMMUNITY. THE SCHOOL WAS GRANTED A CHARTER FOR 661 STUDENTS FROM GRADES 6 TO 12. GO-BPT WAS ORGANIZED TO CREATE A RIGOROUS, SUPPORTIVE MIDDLE & HIGH SCHOOL PROGRAM THAT ENSURES ITS GRADUATES HAVE THE REQUISITE KNOWLEDGE & HABITS OF MIND TO EARN A DEGREE FROM A COMPETITIVE FOUR YEAR COLLEGE OR UNIVERSITY.

4b (Code: ) (Expenses \$ 2,834,534. including grants of \$ 0. ) (Revenue \$ 0. ) SPECIAL EDUCATION: GO-BPT PROVIDES SPECIAL EDUCATION SERVICES TO STUDENTS WITH IDENTIFIED NEEDS.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 11,858,793.

**Part IV Checklist of Required Schedules**

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

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

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

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		130
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	13a	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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.		
	1a	10	
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	1b	9	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed CT
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records  
**BEN CHAN - 203-870-8188**  
**375 HOWARD AVENUE, BRIDGEPORT, CT 06605**

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN SCALICE CHIEF EXECUTIVE DIRECTOR	40.00			X				188,136.	0.	3,997.
(2) LATOYA HUBBARD CHIEF OPERATING OFFICER	40.00			X				133,444.	0.	38,784.
(3) DENISE LINARES MIDDLE SCHOOL PRINCIPAL	40.00					X		125,250.	0.	22,106.
(4) BENJAMIN CHAN CHIEF FINANCIAL OFFICER	40.00			X				124,297.	0.	20,506.
(5) CHRISTOPHER PELLEGRINO HIGH SCHOOL PRINCIPAL	40.00					X		130,583.	0.	13,836.
(6) KAY-ANN HEWELL-WALKER DIRECTOR OF CURRICULUM	40.00					X		117,497.	0.	18,376.
(7) KAREN FRANCIS - BARNES DIRECTOR OF CURRICULUM	40.00					X		120,256.	0.	8,063.
(8) BRIAN FRAZIER DIRECTOR OF PROGRAMS	40.00					X		115,682.	0.	6,975.
(9) DANIEL LUCIANO DIRECTOR/TEACHER	40.00	X						71,922.	0.	8,063.
(10) BOB CARLSON CHAIRPERSON	5.00	X		X				0.	0.	0.
(11) COREY SNEED TREASURER	2.00	X		X				0.	0.	0.
(12) EVA VEGA SECRETARY	1.00	X		X				0.	0.	0.
(13) BEA BAGLEY DIRECTOR	1.00	X						0.	0.	0.
(14) DR. SELENA MORGAN DIRECTOR	1.00	X						0.	0.	0.
(15) DR. MATTHEW NWOSU DIRECTOR	1.00	X						0.	0.	0.
(16) TENSSIE RAMSAY DIRECTOR	1.00	X						0.	0.	0.
(17) ROBERT TRABER DIRECTOR	1.00	X						0.	0.	0.



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	3,183,323.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	112,781.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f			3,296,104.			
Program Service Revenue	<b>2 a</b> GOV'T PER PUPIL REVENUE	<b>Business Code</b>					
		611110	9,033,887.	9,033,887.			
	<b>b</b> TUTOR HOUSING FEES	611110	16,950.	16,950.			
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f			9,050,837.				
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		29.			29.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>					
<b>c</b> Gain or (loss)	<b>7c</b>						
<b>d</b> Net gain or (loss)							
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
Miscellaneous Revenue	<b>11 a</b> OTHER INCOME	<b>Business Code</b>					
		900099	626.			626.	
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d			626.				
<b>12 Total revenue.</b> See instructions			12,347,596.	9,050,837.	0.	655.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
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 .....	617,518.	555,766.	61,752.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	5,991,166.	5,773,753.	217,413.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	15,869.	15,311.	558.	
9 Other employee benefits .....	582,047.	562,641.	19,406.	
10 Payroll taxes .....	367,294.	352,602.	14,692.	
11 Fees for services (nonemployees):				
a Management .....				
b Legal .....	9,482.		9,482.	
c Accounting .....	65,195.		65,195.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	852,920.	831,612.	21,308.	
12 Advertising and promotion .....				
13 Office expenses .....	99,360.	97,882.	1,478.	
14 Information technology .....	279,179.	267,349.	11,830.	
15 Royalties .....				
16 Occupancy .....	1,964,530.	1,882,090.	82,440.	
17 Travel .....	48,619.	48,619.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings .....				
20 Interest .....	4,360.	4,188.	172.	
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	327,246.	314,345.	12,901.	
23 Insurance .....				
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 O.)				
a <b>FOOD SERVICES</b>	423,742.	423,742.		
b <b>CURRICULUM AND CLASSRO</b>	281,473.	280,127.	1,346.	
c <b>REPAIRS &amp; MAINTENANCE</b>	219,179.	215,407.	3,772.	
d <b>PROFESSIONAL DEVELOPMEN</b>	180,251.	173,145.	7,106.	
e All other expenses _____	61,434.	60,214.	1,220.	
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>12,390,864.</b>	<b>11,858,793.</b>	<b>532,071.</b>	<b>0.</b>
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	180,659.	<b>1</b>	517,872.
	<b>2</b> Savings and temporary cash investments .....	8,994.	<b>2</b>	286,029.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	794,342.	<b>4</b>	422,189.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	155,395.	<b>9</b>	171,487.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 5,053,270.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 2,881,741.	<b>10c</b>	2,171,529.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	17,299,937.	<b>15</b>	16,272,577.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	20,794,732.	<b>16</b>	19,841,683.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	685,908.	<b>17</b>	714,225.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	17,853,447.	<b>25</b>	16,915,349.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	18,539,355.	<b>26</b>	17,629,574.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	2,255,377.	<b>27</b>	2,212,109.
	<b>28</b> Net assets with donor restrictions .....		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	2,255,377.	<b>32</b>	2,212,109.
	<b>33</b> Total liabilities and net assets/fund balances .....	20,794,732.	<b>33</b>	19,841,683.

**Part 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	12,347,596.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,390,864.
3	Revenue less expenses. Subtract line 2 from line 1	3	-43,268.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,255,377.
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	2,212,109.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? .....
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2024)



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2023 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2024.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2023.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

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

<b>15</b> Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2023 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for <b>2024</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2023</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

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

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

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

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

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

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

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

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

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

Schedule A (Form 990) 2024

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to under distributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

Schedule A (Form 990) 2024

**Part VI**

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

Lined area for supplemental information with a large diagonal 'DRAFT' watermark.

DRAFT

**Schedule B  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

Name of the organization

GREAT OAKS CHARTER SCHOOL - BRIDGEPORT

Employer identification number

47-1159132

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private 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**

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

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ \_\_\_\_\_

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

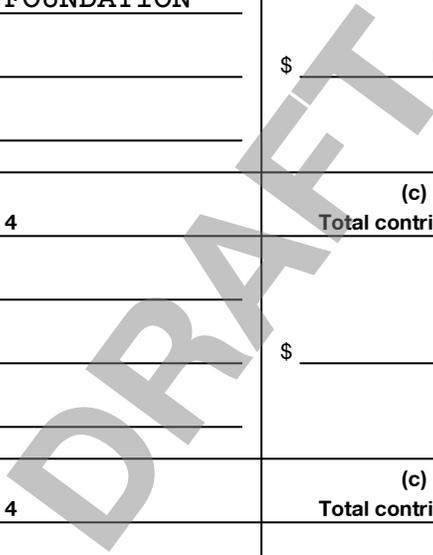
For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (Rev. 12-2024)

Name of organization  <b>GREAT OAKS CHARTER SCHOOL - BRIDGEPORT</b>	Employer identification number  <b>47-1159132</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

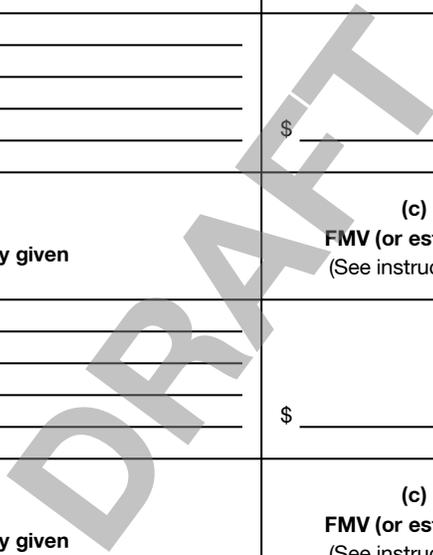
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEAR & FAR AID ASSOCIATION, INC.  P.O. BOX 717  SOUTHPORT, CT 06890	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	NICHOLAS & VIOLA SPINELLI FOUNDATION  103 HOUSATONIC DRIVE  MILFORD, CT 06460	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>GREAT OAKS CHARTER SCHOOL - BRIDGEPORT</b>	Employer identification number  <b>47-1159132</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

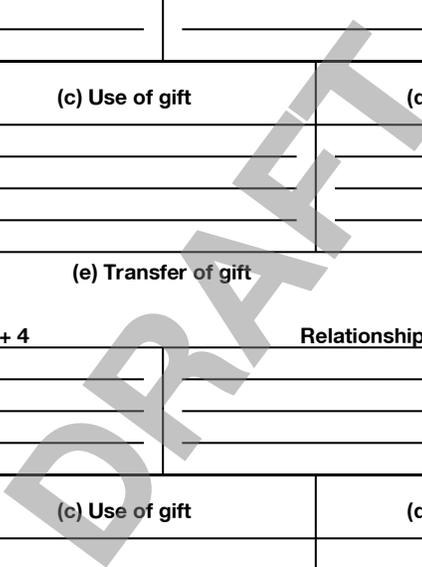
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____



Name of organization  <b>GREAT OAKS CHARTER SCHOOL - BRIDGEPORT</b>	Employer identification number  <b>47-1159132</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	



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

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

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

OMB No. 1545-0047

**Open to Public Inspection**

Name of the organization **GREAT OAKS CHARTER SCHOOL - BRIDGEPORT** Employer identification number **47-1159132**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included on line 2a .....	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

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

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

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

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

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

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

b Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) (Rev. 12-2024)

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a**  Public exhibition **d**  Loan or exchange program
- b**  Scholarly research **e**  Other \_\_\_\_\_
- c**  Preservation for future generations
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

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

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

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

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment \_\_\_\_\_ %
- b** Permanent endowment \_\_\_\_\_ %
- c** Term endowment \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes           | No |
|---|---------------|----|
| <b>(i)</b> Unrelated organizations? .....   | <b>3a(i)</b>  |    |
| <b>(ii)</b> Related organizations? .....  | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ..... | <b>3b</b>     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....				
<b>b</b> Buildings .....		2,500,000.	823,157.	1,676,843.
<b>c</b> Leasehold improvements .....		526,764.	114,453.	412,311.
<b>d</b> Equipment .....		1,869,390.	1,797,084.	72,306.
<b>e</b> Other .....		157,116.	147,047.	10,069.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) .....				2,171,529.

**Part VII Investments - Other Securities**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets**

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

(a) Description	(b) Book value
(1) RIGHT-OF-USE ASSET OPERATING LEASE	15,789,363.
(2) SECURITY DEPOSITS	350,000.
(3) RIGHT-OF-USE ASSET FINANCE LEASE	133,214.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	16,272,577.

**Part X Other Liabilities**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) RIGHT-OF-USE LIABILITY OPERATING LEASE	16,778,091.
(3) RIGHT-OF-USE LIABILITY FINANCE LEASE	137,258.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	16,915,349.

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	13,329,714.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	<b>a</b> Net unrealized gains (losses) on investments	<b>2a</b>		
	<b>b</b> Donated services and use of facilities	<b>2b</b>	982,118.	
	<b>c</b> Recoveries of prior year grants	<b>2c</b>		
	<b>d</b> Other (Describe in Part XIII.)	<b>2d</b>		
	<b>e</b> Add lines 2a through 2d	<b>2e</b>	982,118.	
<b>3</b>	Subtract line 2e from line 1		<b>3</b>	12,347,596.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
	<b>b</b> Other (Describe in Part XIII.)	<b>4b</b>		
	<b>c</b> Add lines 4a and 4b	<b>4c</b>		0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	12,347,596.

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

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

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	13,372,982.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	<b>a</b> Donated services and use of facilities	<b>2a</b>	982,118.	
	<b>b</b> Prior year adjustments	<b>2b</b>		
	<b>c</b> Other losses	<b>2c</b>		
	<b>d</b> Other (Describe in Part XIII.)	<b>2d</b>		
	<b>e</b> Add lines 2a through 2d	<b>2e</b>	982,118.	
<b>3</b>	Subtract line 2e from line 1		<b>3</b>	12,390,864.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
	<b>b</b> Other (Describe in Part XIII.)	<b>4b</b>		
	<b>c</b> Add lines 4a and 4b	<b>4c</b>		0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	12,390,864.

**Part XIII Supplemental Information**

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

**PART X, LINE 2:**

GOCS-B RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT GOCS-B HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECONITION OR DISCLOSURE. GOCS-B IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTION FOR YEARS PRIOR TO JUNE 30, 2022.

**SCHEDULE E  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Schools**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public Inspection**

Name of the organization

**GREAT OAKS CHARTER SCHOOL - BRIDGEPORT**

Employer identification number

**47-1159132**

**Part I**

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax 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 .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>AS A PUBLIC SCHOOL, SUBJECT TO OPEN ENROLLMENT, THE CHARTER SCHOOL IS NOT SUBJECT TO THE SPECIFIC GUIDELINES SET FORTH IN REV. PROC. 75-50 AND AS MODIFIED BY REV. PROC. 2019-22.</b>		
4 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? ..	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d Copies of all material used by the organization or on its behalf to solicit contributions? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
<b>THE SCHOOL IS FUNDED BY THE STATE OF CONNECICUT DEPARTMENT OF EDUCATION AND DOES NOT ISSUE SCHOLARSHIPS OR OTHER FINANCIAL ASSISTANCE</b>		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Admissions policies? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Employment of faculty or administrative staff? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Scholarships or other financial assistance? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Educational policies? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f Use of facilities? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g Athletic programs? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h Other extracurricular activities? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Has the organization's right to such aid ever been revoked or suspended? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If you answered "Yes" on either line 6a or line 6b, explain in Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain in Part II .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Schedule E (Form 990) (Rev. 12-2024)

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

**LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:**  
THE SCHOOL RECEIVES PER-PUPIL FUNDING FROM THE CT BOARD OF EDUCATION UNDER THEIR CHARTER AGREEMENT. THE SCHOOL ALSO RECEIVES VARIOUS FEDERAL AND STATE, FUNDS INCLUDING FEDERAL ENTITLEMENTS TO ASSIST WITH COVERING THE COST OF CERTAIN PROGRAMS.

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**SCHEDULE J  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization <b>GREAT OAKS CHARTER SCHOOL - BRIDGEPORT</b>	Employer identification number <b>47-1159132</b>
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**Part I Questions Regarding Compensation**

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

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

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

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

**3** Indicate which, if any, of the following the 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.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

	Yes	No
<b>1b</b>		
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

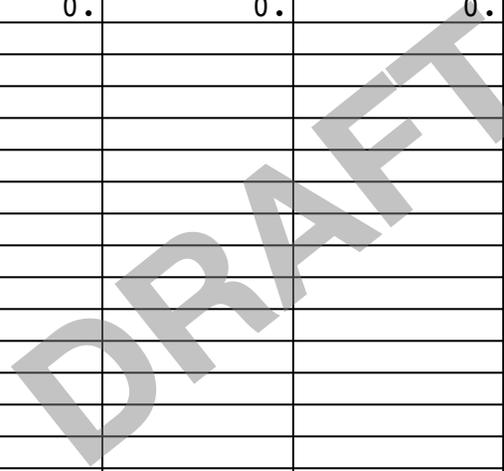
Schedule J (Form 990) (Rev. 12-2024)

**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 and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN SCALICE CHIEF EXECUTIVE DIRECTOR	(i)	187,916.	0.	220.	0.	3,997.	192,133.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) LATOYA HUBBARD CHIEF OPERATING OFFICER	(i)	133,333.	0.	111.	0.	38,784.	172,228.	0.
	(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)							



**Part III Supplemental Information**

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

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**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization <b>GREAT OAKS CHARTER SCHOOL - BRIDGEPORT</b>	Employer identification number <b>47-1159132</b>
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**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**  
**AS A PUBLIC CHARTER SCHOOL, GREAT OAKS CHARTER SCHOOL USES HIGH DOSAGE TUTORING, A RIGOROUSLY TAILORED ACADEMIC PROGRAM AND A WHOLE-STUDENT APPROACH TO HELP STUDENTS ACHIEVE SUCCESS IN THE CAREER OR COLLEGE OF THEIR CHOICE. 661 STUDENTS IN GRADES 6 TO 12 FROM THE BRIDGEPORT, CT COMMUNITY ARE ADMITTED THROUGH AN OPEN-CHOICE LOTTERY. AS A COMMUNITY, WE TAKE PRIDE IN OUR STUDENTS' SOCIAL AND EMOTIONAL DEVELOPMENT, ANCHORED IN RESTORATIVE PRACTICES AIMED AT TEACHING EMPATHY, PERSONAL ACCOUNTABILITY AND RESPONSIBILITY. WE ENCOURAGE OUR STUDENTS TO ADVOCATE FOR THEMSELVES, EACH OTHER AND THEIR COMMUNITY THROUGH SOCIAL CAUSES AND ACTIVITIES. WE FIRMLY BELIEVE THAT OUR STUDENTS WILL SHAPE THE WORLD, NOT BE DEFINED BY IT.**

**AS A SCHOOL OF INNOVATION SELECTED BY THE CENTER FOR REINVENTING PUBLIC EDUCATION AND OUR SIGNIFICANT WORK WITH THE BARR FOUNDATION, GREAT OAKS CHARTER SCHOOL BRIDGEPORT IS UNIQUE WITH ITS EMPHASIS ON INCORPORATING TUTORING INTO THE SCHOOL DAY AS A NORMAL FUNCTION FOR ALL STUDENTS. OUR AMERICORPS FELLOWS/TUTORS LIVE ON CAMPUS AND WORK FROM 7:30 AM 4 PM TO DELIVER CURRICULUM ALIGNED LESSONS IN SMALL GROUP SETTINGS TO STUDENTS OF ALL ABILITIES AND LEARNING NEEDS. PROFESSIONAL DEVELOPMENT OF AMERICORPS FELLOWS/TUTORS IS PROVIDED THROUGH IN-CLASSROOM TRAINING, TEACHER CERTIFICATION PROGRAMS AND PROFESSIONAL TRAINING TO CONTINUE WITH THEIR CAREER OPPORTUNITIES IN TEACHING AND TO BETTER SERVE OUR STUDENTS. MANY OF OUR FELLOWS/TUTORS RETURN FOR 2 YEARS WITH A HIGH PERCENTAGE ENTERING OUR SCHOOL AS FULLY-CERTIFIED TEACHERS BY YEAR 3.**

**TEACHER RETENTION AT GREAT OAKS CHARTER SCHOOL BRIDGEPORT IS CONSIDERABLY HIGH FOR A CHARTER SCHOOL ORGANIZATION IN AN URBAN SETTING. WITH A NEARLY 90% RETENTION RATE GO-BPT INVESTS IN PROFESSIONAL DEVELOPMENT THROUGH A SHORTENED SCHEDULE EVERY TUESDAY TO ALLOW TEACHERS TIME FOR DATA MEETINGS, LESSON PLANNING, DEVELOPMENT OF INSTRUCTIONAL STRATEGIES AND CELEBRATIONS OF ACHIEVEMENT.**

**AFTER SCHOOL ACTIVITIES AT GO-BPT ARE A BLEND OF ACADEMIC AND NON-ACADEMIC PROGRAMS THAT FOCUS ON SELF-DIRECTED LEARNING, COMMUNITY RELATIONSHIPS AND SOCIAL AND EMOTIONAL GROWTH. THROUGH OUR COMMUNITY PARTNERSHIPS, INCLUSIVE OF 100 BLACK MEN, MY BROTHERS/SISTERS KEEPER, AND GIRL LIVE!, STUDENTS ARE EXPOSED TO LEARNING AND LEADERSHIP OPPORTUNITIES IN AND OUTSIDE OF THE SCHOOL. GO-BPT ALSO RESPECTS CHALLENGES TO ACADEMIC ASSISTANCE AND OFFERS 24/7 LIVE TUTORING IN ALL ACADEMIC AREAS AS WELL AS AN ON-LINE ACADEMY PROGRAM FOR MULTI-LANGUAGE LEARNERS FROM 5 PM 6 PM AND ALL LEARNERS FROM 6 PM 7 PM EVERY MONDAY, WEDNESDAY AND THURSDAY. CURRENTLY, OVER 8 DIFFERENT NATIVE LANGUAGES ARE REPRESENTED BY THE STUDENT BODY.**

**ALTOGETHER, GREAT OAKS CHARTER SCHOOL BRIDGEPORT HAS SEEN A RETURN ON INVESTMENT IN STUDENT ACHIEVEMENT GROWING IN KEY AREAS OVER THE LAST 3 YEARS WHILE REDUCING ABSENTEEISM AND DISCIPLINARY ACTION.**

**FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**  
**BRIDGEPORT PROVIDES ALL STUDENTS WITH HIGH-QUALITY EDUCATION THROUGH**

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization	Employer identification number
GREAT OAKS CHARTER SCHOOL - BRIDGEPORT	47-1159132
HIGH-DOSAGE TUTORING & INDIVIDUALIZED ACADEMIC SUPPORT. OUR TEACHERS AND AMERICORPS FELLOWS/TUTORS FOSTER STRONG RELATIONSHIPS TO HELP STUDENTS THRIVE ACADEMICALLY AND SOCIALLY. THROUGH STRATEGIC LEADERSHIP, RESTORATIVE PRACTICES AND A COMMITMENT TO INNOVATION, THE SCHOOL HAS TRANSFORMED STUDENT CULTURE, IMPROVED ACADEMIC ACHIEVEMENT AND BUILT A SUSTAINABLE EDUCATOR PIPELINE. AS WE ENTER OUR SECOND DECADE, GO-BPT REMAINS DEDICATED TO CLOSING THE OPPORTUNITY GAP AND PREPARING EVERY STUDENT FOR COLLEGE AND CAREER SUCCESS.	

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

A DRAFT COPY OF THE 990 WAS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW. THE BOARD VOTED TO AUTHORIZE THE TREASURER TO APPROVE THE FINAL 990.

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

THE BOARD EXPECTS THAT DIRECTORS, ADMINISTRATORS, FACULTY, STAFF, AND OTHER EMPLOYEES OF THE SCHOOL WILL ABIDE BY THE CONFLICT OF INTEREST POLICY. THE BOARD OF DIRECTORS AFFIRMS THAT THE DIRECTORS, OFFICERS, ADMINISTRATORS, FACULTY, STAFF, AND OTHER EMPLOYEES OF THE SCHOOL HAVE AN OBLIGATION TO EXERCISE THEIR AUTHORITY AND TO CARRY OUT THE DUTIES OF THEIR RESPECTIVE POSITIONS IN WHICH THEIR PERSONAL INTERESTS ARE, OR MAY BE, IN CONFLICT WITH THE INTERESTS OF THE SCHOOL. WHERE A POTENTIAL CONFLICT OF INTEREST EXISTS IT SHALL BE THE RESPONSIBILITY OF THE PERSON INVOLVED OR ANY OTHER PERSON WITH KNOWLEDGE TO NOTIFY THE BOARD OF DIRECTORS OF THE CIRCUMSTANCES RESULTING IN THE POTENTIAL CONFLICT SO THAT THE BOARD OF DIRECTORS CAN PROVIDE SUCH GUIDANCE AND TAKE SUCH ACTION AS IT SHALL DEEM APPROPRIATE. AREAS OF POTENTIAL CONFLICT OF INTEREST ARE: FINANCIAL INTEREST, INSIDE INFORMATION, CONFLICTING INTEREST OTHER THAN FINANCIAL, AND GIFTS, AND FAVORS. NO DIRECTOR WHO DIRECTLY OR INDIRECTLY IS INVOLVED IN THE POTENTIAL CONFLICT IF INTEREST SHALL BE COUNTED IN DETERMINING THE EXTISTENCE OF QUORUM AT ANY MEETING OF THE BOARD WHERE THE POTENTIAL CONFLICT IS CONSIDERED, NOR SHALL THE DIRECTOR VOTE ON ANY ACTION OF THE BOARD REGARDING THAT POTENTIAL CONFLICT.

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

TO DETERMINE A REASONABLE AND COMPETITIVE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER THAT WILL ATTRACT AND RETAIN STRONG TALENT TO LEAD THE SCHOOL, THE BOARD CHAIR AND TREASURER WILL:

- REVIEW THE UPDATED ROLES AND RESPONSIBILITIES OF THE CHIEF EXECUTIVE OFFICER
- REVIEW THE CHIEF EXECUTIVE OFFICER'S CURRENT PERFORMANCE
- ALIGN THE PROPOSED SALARY TO THE EQUITABLE COST OF LIVING INCREASES WITHIN THE SCHOOL COMMUNITY
- SUBMIT THE RECOMMENDATION TO THE FULL BOARD FOR APPROVAL
- PERFORM THIS PROCESS AT A MINIMUM OF EVERY 2 YEARS

IN ADDITION, A SURVEY OF LOCAL CHARTER SCHOOLS WILL BE PERFORMED BASED ON AVAILABLE DATA

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

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. IN ADDITION, THE FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE ALSO AVAILABLE UPON WRITTEN REQUEST.

## FORM 990, PART XII, LINE 2C

THE SCHOOL HAS A FINANCE COMMITTEE THAT IS RESPONSIBLE FOR THE OVERSIGHT OF THE AUDIT AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT.

Name of the organization <b>GREAT OAKS CHARTER SCHOOL - BRIDGEPORT</b>	Employer identification number <b>47-1159132</b>
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**THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.**

DRAFT

 <p><b>Ink Business Cash<sup>®</sup> Credit Card</b></p> <p><a href="#">Apply Now</a> <a href="#">See details &gt;</a></p> <p><a href="#">†Pricing &amp; Terms</a></p> <p><a href="#">x Remove</a></p>	 <p><b>Ink Business Unlimited<sup>®</sup> Credit Card</b></p> <p><a href="#">Apply Now</a> <a href="#">See details &gt;</a></p> <p><a href="#">†Pricing &amp; Terms</a></p> <p><a href="#">x Remove</a></p>	 <p><b>Ink Business Premier<sup>®</sup> Credit Card</b></p> <p><a href="#">Apply Now</a> <a href="#">See details &gt;</a></p> <p><a href="#">†Pricing &amp; Terms</a></p> <p><a href="#">x Remove</a></p>
<b>New Cardmember Offer</b>		
<p><b>Earn \$750 bonus cash back</b> after you spend \$6,000 on purchases in the first 3 months after account opening.</p>	<p><b>Earn \$750 cash back</b> after you spend \$6,000 on purchases in the first 3 months after account opening.</p>	<p><b>Earn \$1,000 bonus cash back</b> after you spend \$10,000 on purchases in your first 3 months from account opening.</p>
<b>Annual Fee</b>		
\$0 <sup>†</sup>	\$0 <sup>†</sup>	<b>\$195<sup>†</sup></b>
<b>APR</b>		
<p><b>Purchases</b> 0% intro APR for 12 months from account opening on purchases.<sup>‡</sup> After that, 16.74%–24.74% variable APR.<sup>‡</sup></p> <p><b>Balance Transfers</b> 16.74%–24.74% variable APR.<sup>‡</sup></p>	<p><b>Purchases</b> 0% intro APR for 12 months from account opening on purchases.<sup>‡</sup> After that, 16.74%–24.74% variable APR.<sup>‡</sup></p> <p><b>Balance Transfers</b> 16.74%–24.74% variable APR.<sup>‡</sup></p>	<p><b>Purchases</b> Flex for Business variable APR: 17.74%–25.74%.<sup>‡</sup></p>
<b>Earning Rewards</b>		
<p>Earn 5% cash back in select business categories.</p> <p>Earn 2% cash back at gas stations and restaurants.</p> <p><b>Earn 1% cash back on all other purchases</b> – with no limit to the amount you can earn.</p>	<p><b>Earn unlimited 1.5% Cash Back rewards</b> on every purchase made for your business.</p>	<p><b>Earn 2.5% Cash Back</b> on large purchases. Large purchases earn larger rewards. Earn a total of 2.5% cash back on every purchase of \$5,000 or more. That's \$250 on a purchase of \$10,000 when redeemed.</p> <p><b>Earn 2% Cash Back</b> on every purchase. Turn all your business expenses into rewards with unlimited 2% cash back on all other business purchases.</p>
<b>Using Rewards</b>		
<p>Redeem your rewards for cash back, gift cards, travel and more through Chase Ultimate Rewards<sup>®</sup>.</p>	<p>Redeem your rewards for cash back, gift cards, travel and more through Chase Ultimate Rewards<sup>®</sup>.</p>	<p>Redeem your rewards for cash back, gift cards, travel and more through Chase Ultimate Rewards<sup>®</sup>.</p> <p>Points earned with Ink Business Premier cannot be moved to other Chase cards or transferred to Chase Travel Partners</p>

<b>Credit Card Purchases</b>	<b>2025</b>		<b>2026</b>	
<b>Monthly Ave</b>	\$	<b>9,317</b>	\$	<b>8,757</b>
1% cashback - no fee	\$	<b>1,118</b>	\$	<b>1,051</b>
<b>Business Cash card</b>				
1.5% cashback - no fee	\$	<b>1,677</b>	\$	<b>1,576</b>
<b>Business Unlimited</b>				
2% cashback	\$	2,236	\$	2,102
Card fee	\$	195	\$	195
Net @ 2% Cashback	\$	<b>2,041</b>	\$	<b>1,907</b>
<b>Business Premier</b>				