

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 for instructions and the latest information.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

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	C Name of organization GREAT OAKS CHARTER SCHOOL - BRIDGEPORT Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 375 HOWARD AVENUE City or town, state or province, country, and ZIP or foreign postal code BRIDGEPORT, CT 06605 F Name and address of principal officer: JOHN SCALICE SAME AS C ABOVE	D Employer identification number 47-1159132 E Telephone number 203-870-8188 G Gross receipts \$ 12,262,204. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I 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		
J Website: HTTPS://BRIDGEPORT.GREATOAKSCHARTER.ORG/		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2014 M State of legal domicile: CT

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: AS A PUBLIC CHARTER SCHOOL, GREAT OAKS USES HIGH-DOSAGE TUTORING, A RIGOROUSLY TAILORED ACADEMIC			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3		9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		8
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5		131
	6 Total number of volunteers (estimate if necessary)	6		8
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b		0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9 Program service revenue (Part VIII, line 2g)	2,967,670.	4,305,724.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,556,250.	7,956,457.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,055.	23.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.	
		10,524,975.	12,262,204.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,237,899.	6,885,986.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	
	b Total fundraising expenses (Part IX, column (D), line 25)	0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,912,292.	5,379,847.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,150,191.	12,265,833.		
19 Revenue less expenses. Subtract line 18 from line 12	374,784.	-3,629.		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)	4,651,040.	22,450,621.	
	22 Net assets or fund balances. Subtract line 21 from line 20	1,629,181.	19,432,391.	
		3,021,859.	3,018,230.	

Part II Signature Block

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

Sign Here	Signature of officer JOHN SCALICE, CHIEF EXECUTIVE DIRECTOR	Date			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name GARRETT M. HIGGINS	Preparer's signature GARRETT M. HIGGINS	Date 05/07/24	Check if self-employed <input type="checkbox"/>	PTIN P00543209
	Firm's name PKF O'CONNOR DAVIES ADVISORY, LLC	Firm's EIN 87-3231666	Phone no. 203-929-3535		
	Firm's address ONE CORPORATE DRIVE, SUITE 725 SHELTON, CT 06484-6241				

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

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-BRIDGEPORT SEEKS TO PROVIDE ALL STUDENTS WITH THE OPPORTUNITY TO BE SUCCESSFUL IN THE CAREER OR COLLEGE OF THEIR CHOICE. THROUGH OUR PARTNERSHIP WITH AMERICORPS, GREAT OAKS PROVIDES EMBEDDED TUTORING TO ALL STUDENTS IN GRADES 6 THROUGH 10 TO

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 \$ 8,814,486. including grants of \$ 0.) (Revenue \$ 7,956,457.) EDUCATION: GO-BPT IS A 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 6-12. GO BPT WAS ORGANIZED TO CREATE A RIGOROUS, SUPPORTIVE MIDDLE AND HIGH SCHOOL PROGRAM THAT ENSURES ITS GRADUATES HAVE THE REQUISITE KNOWLEDGE AND HABITS OF MIND TO EARN A DEGREE FROM A COMPETITIVE FOUR YEAR COLLEGE OR UNIVERSITY.

4b (Code:) (Expenses \$ 3,020,665. including grants of \$ 0.) (Revenue \$) 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 11,835,151.

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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		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)

Table with 3 columns: Question, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, excess benefit transactions, and controlled entities.

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

Table with 3 columns: Question, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b 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?

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 [X] 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			171,324.	0.	0.	
(2) LATOYA HUBBARD CHIEF OPERATING OFFICER	40.00				X		116,087.	0.	27,143.	
(3) CHRISTOPHER PELLEGRINO HIGH SCHOOL PRINCIPAL	40.00				X		125,869.	0.	16,437.	
(4) DENISE LINARES MIDDLE SCHOOL PRINCIPAL	40.00				X		123,616.	0.	15,423.	
(5) KAREN FRANCIS - BARNES DIRECTOR OF CURRICULUM	40.00				X		107,547.	0.	12,303.	
(6) BOB CARLSON CHAIRPERSON	5.00	X		X			0.	0.	0.	
(7) COREY SNEED TREASURER	2.00	X		X			0.	0.	0.	
(8) EVA VEGA SECRETARY	1.00	X		X			0.	0.	0.	
(9) BEA BAGLEY DIRECTOR	1.00	X					0.	0.	0.	
(10) DIANE GORDON DIRECTOR	1.00	X					0.	0.	0.	
(11) CHRISTOPHER MCMILLAN DIRECTOR/TEACHER	1.00	X					0.	0.	0.	
(12) SELENA MORGAN DIRECTOR	1.00	X					0.	0.	0.	
(13) TENSSIE RAMSAY DIRECTOR	1.00	X					0.	0.	0.	
(14) DAVID ZIEFF DIRECTOR	1.00	X					0.	0.	0.	

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes subtotal rows for 1b, 1c, and 1d.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists contractors like GREAT OAKS FOUNDATION and SMG CORPORATE SERVICES.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3

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	1 a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e	4,068,306.		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	237,418.		
	g	Noncash contributions included in lines 1a-1f	1g	\$		
	h	Total. Add lines 1a-1f		4,305,724.		
Program Service Revenue	2 a	GOV'T PER PUPIL REVENUE	Business Code			
			611110	7,956,457.	7,956,457.	
	b					
	c					
	d					
	e					
	f	All other program service revenue				
g	Total. Add lines 2a-2f		7,956,457.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		23.		23.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6 a	Gross rents	(i) Real			
			(ii) Personal			
	6 b	Less: rental expenses	6b			
	6 c	Rental income or (loss)	6c			
	d	Net rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory	(i) Securities			
			(ii) Other			
	7 b	Less: cost or other basis and sales expenses	7b			
	7 c	Gain or (loss)	7c			
	d	Net gain or (loss)				
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18					
8 b	Less: direct expenses	8b				
c	Net income or (loss) from fundraising events					
9 a	Gross income from gaming activities. See Part IV, line 19					
9 b	Less: direct expenses	9b				
c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances					
10 b	Less: cost of goods sold	10b				
c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11 a		Business Code			
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
12	Total revenue. See instructions		12,262,204.	7,956,457.	0.	23.

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	152,725.	137,453.	15,272.	
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	5,642,415.	5,454,378.	188,037.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	11,154.	10,708.	446.	
9 Other employee benefits	735,408.	705,992.	29,416.	
10 Payroll taxes	344,284.	330,513.	13,771.	
11 Fees for services (nonemployees):				
a Management	477,387.	462,257.	15,130.	
b Legal	6,708.		6,708.	
c Accounting	41,134.		41,134.	
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.)	299,360.	289,871.	9,489.	
12 Advertising and promotion				
13 Office expenses	263,815.	259,200.	4,615.	
14 Information technology	241,535.	233,460.	8,075.	
15 Royalties				
16 Occupancy	1,922,445.	1,866,133.	56,312.	
17 Travel	11,194.	11,194.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ..				
19 Conferences, conventions, and meetings				
20 Interest	6,628.	6,406.	222.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	454,320.	439,132.	15,188.	
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 REPAIRS & MAINTENANCE	665,507.	645,856.	19,651.	
b CURRICULUM AND CLASSROO	400,851.	400,143.	708.	
c FOOD SERVICES	373,528.	373,528.		
d PROFESSIONAL DEVELOPMEN	161,336.	155,942.	5,394.	
e All other expenses	54,099.	52,985.	1,114.	
25 Total functional expenses. Add lines 1 through 24e	12,265,833.	11,835,151.	430,682.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <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
Assets	1 Cash - non-interest-bearing	250,146.	1	418,621.
	2 Savings and temporary cash investments	124,950.	2	44,267.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	966,348.	4	1,158,593.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	130,565.	9	45,418.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,764,611.		
	b Less: accumulated depreciation	10b 2,250,163.	2,798,728.	10c 2,514,448.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	380,303.	15	18,269,274.
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,651,040.	16	22,450,621.	
Liabilities	17 Accounts payable and accrued expenses	749,597.	17	685,887.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	113,715.	24	0.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	765,869.	25	18,746,504.
	26 Total liabilities. Add lines 17 through 25	1,629,181.	26	19,432,391.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	3,021,859.	27	3,018,230.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	3,021,859.	32	3,018,230.
33 Total liabilities and net assets/fund balances	4,651,040.	33	22,450,621.	

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	12,262,204.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,265,833.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,629.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,021,859.
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	3,018,230.

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 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization <p align="center">GREAT OAKS CHARTER SCHOOL – BRIDGEPORT</p>	Employer identification number <p align="center">47-1159132</p>
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 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

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. 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 - 2021. 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
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 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>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
c 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>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, 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	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

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	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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 - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 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-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Part VI

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

DRAFT

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

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.

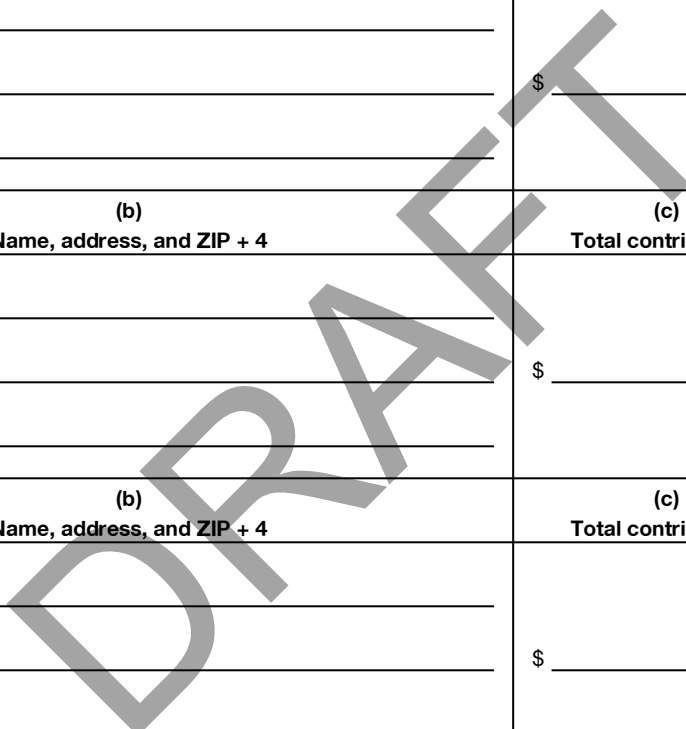
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter 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).

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

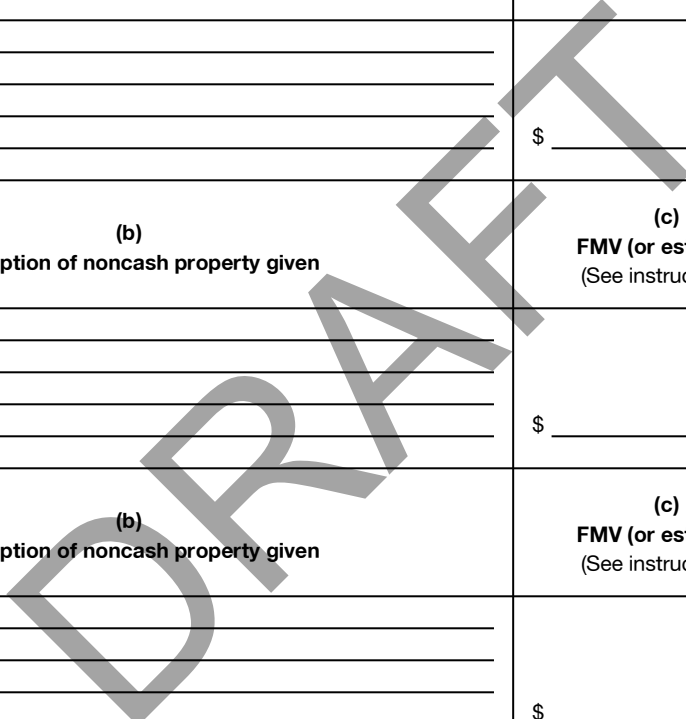
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BARR FOUNDATION 2 ATLANTIC AVENUE BOSTON, MA 02110	\$ 166,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	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 GREAT OAKS CHARTER SCHOOL - BRIDGEPORT	Employer identification number 47-1159132
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

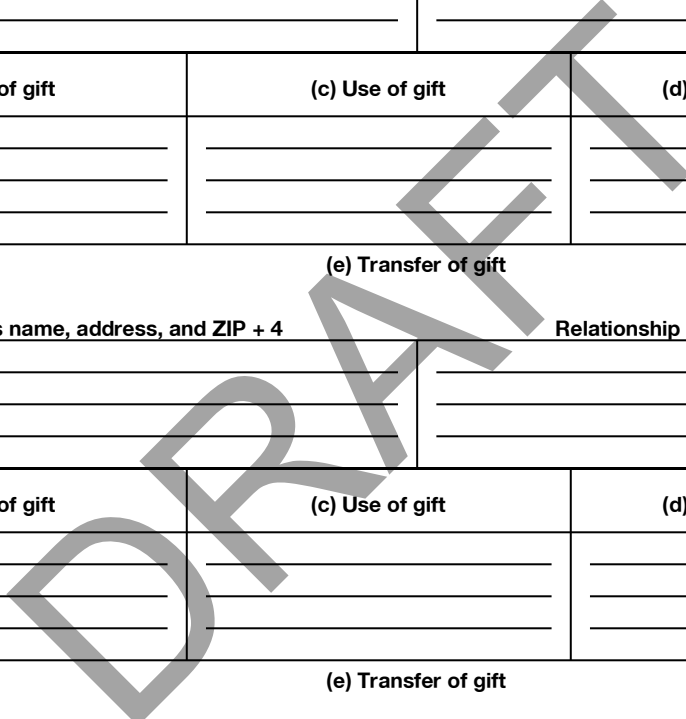
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	



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

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



SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, acquired after 2006), and questions about monitoring, expenses, and reporting.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for revenue and assets included.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

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
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 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 |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		2,500,000.	559,999.	1,940,001.
c Leasehold improvements		356,225.	68,188.	288,037.
d Equipment		1,780,270.	1,498,222.	282,048.
e Other		128,116.	123,754.	4,362.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,514,448.

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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) ROU ASSET OPERATING	17,671,623.
(2) SECURITY DEPOSITS	380,303.
(3) ROU ASSET FINANCE	217,348.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	18,269,274.

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) ROU LIABILITY OPERATING	18,528,198.
(3) ROU LIABILITY FINANCE	218,306.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	18,746,504.

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.

1	Total revenue, gains, and other support per audited financial statements		1	12,951,644.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	689,440.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	689,440.	
3	Subtract line 2e from line 1	3	12,262,204.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	0.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	12,262,204.	

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

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

1	Total expenses and losses per audited financial statements		1	12,955,273.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	689,440.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	689,440.	
3	Subtract line 2e from line 1	3	12,265,833.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	0.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	12,265,833.	

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE SCHOOL RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS WHEN THEY ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE SCHOOL HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECONITION OR DISCLOSURE. THE SCHOOL IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTION FOR PERIODS PRIOR TO JUNE 30, 2020.

SCHEDULE E
(Form 990)

Schools

OMB No. 1545-0047

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

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

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

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?	X	
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?	X	
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	X	
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. 2020-23.		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? ..		X
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
THE SCHOOL IS FUNDED BY THE STATE OF CONNECICUT DEPARTMENT OF EDUCATION AND DOES NOT ISSUE SCHOLARSHIPS OR OTHER FINANCIAL ASSISTANCE		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
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?	X	
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain on Part II	X	

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

Schedule E (Form 990) 2022

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.

DRAFT

**SCHEDULE J
(Form 990)**

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 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

GREAT OAKS CHARTER SCHOOL - BRIDGEPORT

Employer identification number

47-1159132

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 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 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
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

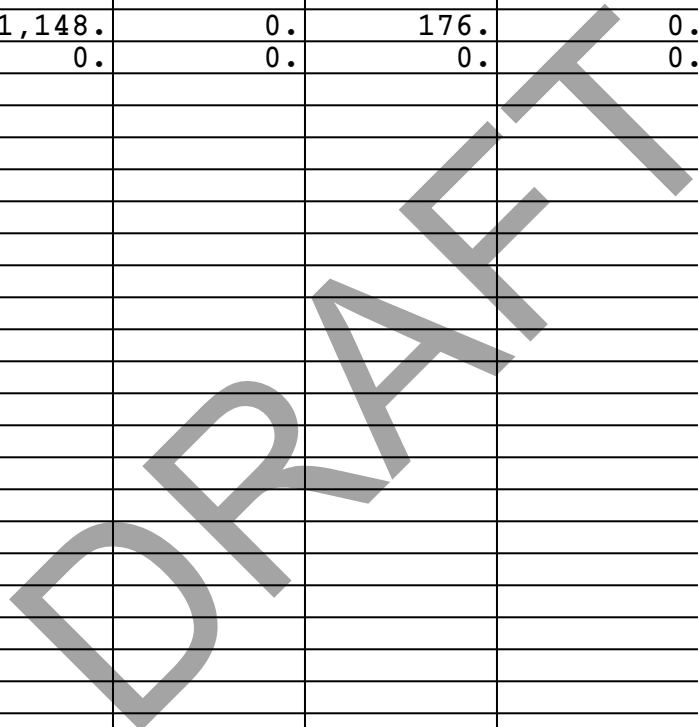
Schedule J (Form 990) 2022

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)	171,148.	0.	176.	0.	0.	171,324.	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)							
	(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.

Multiple horizontal lines for supplemental information entry.

DRAFT

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

GREAT OAKS CHARTER SCHOOL - BRIDGEPORT

Employer identification number

47-1159132

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

PROGRAM AND A WHOLE-STUDENT APPROACH TO HELP STUDENTS ACHIEVE SUCCESS

IN THE CAREER OR COLLEGE OF THEIR CHOICE. 660 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 STUDENT'S

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.

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

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 RESIDENTS LIVE ON CAMPUS AND WORK FROM 8:00 AM - 5:00 PM

TO DELIVER CURRICULUM ALIGNED LESSONS IN SMALL GROUP SETTINGS TO

STUDENTS OF ALL ABILITIES AND LEARNING NEEDS. PROFESSIONAL DEVELOPMENT

OF AMERICORPS RESIDENTS IS PROVIDED THROUGH IN-CLASSROOM TRAINING,

TEACHER CERTIFICATION PROGRAMS AND DIVERSITY AND EQUITY TRAINING TO

BETTER SERVE OUR STUDENTS AND CONTINUE THEIR PROFESSIONAL OPPORTUNITIES

IN TEACHING. MANY OF OUR RESIDENTS RETURN FOR TWO YEARS WITH A HIGH

PERCENTAGE ENTERING OUR SCHOOL AS FULLY-CERTIFIED TEACHERS BY YEAR

THREE.

Name of the organization GREAT OAKS CHARTER SCHOOL - BRIDGEPORT	Employer identification number 47-1159132
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TEACHER RETENTION AT GREAT OAKS CHARTER SCHOOL-BRIDGEPORT IS CONSIDERABLY HIGH FOR A CHARTER ORGANIZATION LOCATED IN AN URBAN SETTING. WITH A NEARLY 90% RETENTION RATE, GOBPT 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 ACHEIVEMENT.

AFTER-SCHOOL ACTIVITIES AT GOBPT ARE A BLEND OF ACADEMIC AND NON-ACADEMIC ACTIVITIES 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. GOBPT ALSO RESPECTS CHALLENGES TO ACADEMIC ASSISTANCE AND OFFERS 24/7 LIVE TUTORING IN ALL ACADEMIC AREAS AS WELL AS ONLINE 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.

ALL TOGETHER, GOBPT HAS SEEN A RETURN ON INVESTMENT IN STUDENT ACHIEVEMENT GROWING IN KEY AREAS OVER THE LAST THREE YEARS WHILE REDUCING ABSENTEEISM AND DISCIPLINARY ACTION.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: REDUCE CLASS SIZE, AND UTILIZES DATA TO TARGET LEARNING CHALLENGES AND ACCELERATE STUDENT GROWTH. BY PROVIDING ADDITIONAL OPPORTUNITIES OUTSIDE OF THE CLASSROOM FOR LEARNING THROUGH EXTRACURRICULAR

Name of the organization GREAT OAKS CHARTER SCHOOL - BRIDGEPORT	Employer identification number 47-1159132
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ACTIVITIES, COLLEGE VISITS, COMMUNITY PARTNERSHIPS, AND EXTENDED
 IN-PERSON AND ONLINE TUTORING, WE CAN CREATE AN EQUITABLE ENVIRONMENT
 FOR ALL STUDENTS.

FORM 990, PART VI, SECTION A, LINE 3:

GO-BPT SIGNED A TERMINATION AGREEMENT WITH GREAT OAKS FOUNDATION, A
 NOT-FOR-PROFIT ORGANIZATION FOR SCHOOL MANAGEMENT SERVICES, WHEREBY THE
 SCHOOL WOULD ASSUME THE RESPONSIBIITY OF THESE SERVICES IN THE THIRD
 QUARTER OF 2023.

FOR FISCAL YEAR 2023, THE SCHOOL PAID GOF FEES OF \$477,387 UNDER THE
 SERVICES AGREEMENT AND A \$196,730 TUTOR FEE.

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

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

Name of the organization

GREAT OAKS CHARTER SCHOOL - BRIDGEPORT

Employer identification number

47-1159132

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	CLOUD MANAGED	12/02/19	SL	3.00		16	12,433.				12,433.	10,706.		1,727.	12,433.
2	CLOUD MANAGED	12/02/19	SL	3.00		16	1,821.				1,821.	1,568.		253.	1,821.
3	PROFESSIONAL LICNS	02/20/20	SL	3.00		16	78.				78.	61.		17.	78.
4	IT INFRASTRUCTURE	09/03/19	SL	3.00		16	2,296.				2,296.	2,168.		128.	2,296.
11	POWERSCHOOL TRAINI	11/22/19	SL	3.00		16	4,999.				4,999.	4,304.		695.	4,999.
13	POWERSCHOOL	10/30/19	SL	3.00		16	15,677.				15,677.	13,945.		1,732.	15,677.
14	CLOUD MANAGED	09/04/19	SL	3.00		16	5,245.				5,245.	4,933.		291.	5,224.
15	CLOUD MANAGED	09/04/19	SL	3.00		16	31,795.				31,795.	29,907.		1,766.	31,673.
16	LEASEHOLD IMPROV	10/16/19	SL	20.00		16	10,935.				10,935.	1,480.		547.	2,027.
17	LEASEHOLD IMPROV	10/09/19	SL	20.00		16	47,344.				47,344.	6,453.		2,367.	8,820.
18	LEASEHOLD IMPROV	08/28/19	SL	20.00		16	13,775.				13,775.	1,957.		689.	2,646.
19	LEASEHOLD IMPROV	07/16/19	SL	20.00		16	10,935.				10,935.	1,618.		547.	2,165.
20	TELEPHONE EQUIPMEN	04/09/20	SL	3.00		16	596.				596.	442.		149.	591.
21	TELEPHONE EQUIPMENT	10/09/19	SL	3.00		16	18,338.				18,338.	16,663.		1,528.	18,191.
22	CHARGING CARTS	06/16/20	SL	3.00		16	10,242.				10,242.	6,828.		3,414.	10,242.
23	CHROMEBOOKS	06/04/20	SL	3.00		16	16,382.				16,382.	11,377.		5,005.	16,382.
24	COMPUTER EQUIPMENT	03/19/20	SL	3.00		16	882.				882.	661.		221.	882.
25	LAPTOP	02/05/19	SL	3.00		16	780.				780.	520.		0.	520.

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
26	CABLING FEE	12/17/19	SL	3.00		16	31,563.				31,563.	26,302.		5,261.	31,563.
27	PROBOOKS	11/20/19	SL	3.00		16	2,580.				2,580.	2,222.		358.	2,580.
28	SPEAKERS	10/23/19	SL	3.00		16	22,063.				22,063.	19,611.		2,452.	22,063.
29	IT INFRASTRUCTURE	10/16/19	SL	3.00		16	2,296.				2,296.	2,041.		255.	2,296.
30	DESKTOP & MONITORS	10/15/19	SL	3.00		16	1,395.				1,395.	1,279.		116.	1,395.
31	IT INFRASTRUCTURE	09/03/19	SL	3.00		16	6,991.				6,991.	6,408.		388.	6,796.
32	IT INFRASTRUCTURE	07/15/19	SL	3.00		16	2,296.				2,296.	2,296.		0.	2,296.
33	BOOKCASES	06/24/20	SL	3.00		16	593.				593.	399.		194.	593.
34	AIRPODS	04/10/20	SL	3.00		16	943.				943.	698.		236.	934.
35	PRINTER	04/10/20	SL	3.00		16	621.				621.	460.		155.	615.
36	CHAIRS	10/09/19	SL	7.00		16	1,260.				1,260.	491.		180.	671.
37	TABLES	10/09/19	SL	7.00		16	5,817.				5,817.	2,265.		831.	3,096.
38	FURNITURE	08/01/19	SL	7.00		16	80,178.				80,178.	33,389.		11,454.	44,843.
39	CHAIRS	07/23/19	SL	7.00		16	2,151.				2,151.	903.		307.	1,210.
40	COMPUTER EQUIP	10/01/18	SL	3.00		16	37,901.				37,901.	36,691.		0.	36,691.
41	FURNITURE	11/06/17	SL	7.00		16	21,383.				21,383.	14,633.		3,055.	17,688.
42	CLASSROOM FURNITUR	08/15/14	SL	7.00		16	3,941.				3,941.	3,941.		0.	3,941.
43	POWERSCHOOL	06/12/19	SL	3.00		16	7,060.				7,060.	6,986.		0.	6,986.

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
44	SECURITY SOFTWARE	09/12/18	SL	3.00		16	1,134.				1,134.	1,122.		0.	1,122.
45	SIS INTEGRATION	08/24/18	SL	3.00		16	5,750.				5,750.	5,750.		0.	5,750.
46	ESCHOOLPLUS	08/22/18	SL	3.00		16	2,100.				2,100.	2,100.		0.	2,100.
47	POWERSCHOOL	07/30/18	SL	3.00		16	6,624.				6,624.	6,624.		0.	6,624.
48	SCHOOL BUILDING	04/01/19	SL	19.00		16	2,500,000.				2,500,000.	428,421.		131,579.	560,000.
49	LEASEHOLD IMPROV.	06/24/19	SL	20.00		16	10,935.				10,935.	1,651.		547.	2,198.
50	LEASEHOLD IMPROV.	06/12/19	SL	20.00		16	10,935.				10,935.	1,669.		547.	2,216.
51	SECURITY CAMERAS	06/12/19	SL	20.00		16	141,132.				141,132.	21,537.		7,057.	28,594.
52	CABLING	04/23/19	SL	20.00		16	78,906.				78,906.	12,581.		3,945.	16,526.
53	PHONES & WALL	08/30/18	SL	3.00		16	3,926.				3,926.	3,926.		0.	3,926.
54	TELEPHONE EQUIP	12/18/17	SL	3.00		16	6,757.				6,757.	6,757.		0.	6,757.
55	TELEPHONE EQUIP	09/07/17	SL	3.00		16	22,100.				22,100.	22,100.		0.	22,100.
56	TELEPHONE EQUIP	09/06/17	SL	3.00		16	10,281.				10,281.	10,281.		0.	10,281.
57	TELEPHONE EQUIP	09/06/17	SL	3.00		16	986.				986.	986.		0.	986.
58	TELEPHONE EQUIP	10/26/16	SL	3.00		16	6,162.				6,162.	6,162.		0.	6,162.
59	NETWORK BUILDOUT	08/02/16	SL	3.00		16	6,162.				6,162.	6,162.		0.	6,162.
60	ELECTRICAL SERVICE	07/27/16	SL	3.00		16	5,425.				5,425.	5,425.		0.	5,425.
61	COMPUTER EQUIP	06/12/19	SL	3.00		16	289,750.				289,750.	289,750.		0.	289,750.

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62	CHROMEBOOKS	06/11/19	SL	3.00		16	52,910.				52,910.	52,910.		0.	52,910.
63	IT INFRASTRUCTURE	06/03/19	SL	3.00		16	2,187.				2,187.	2,187.		0.	2,187.
64	COMPUTER EQUIP	11/14/18	SL	3.00		16	2,668.				2,668.	2,668.		0.	2,668.
65	MACBOOK AIRS	08/28/18	SL	3.00		16	9,856.				9,856.	9,856.		0.	9,856.
66	CHROMEBOOK	04/09/18	SL	3.00		16	15,518.				15,518.	15,518.		0.	15,518.
67	CHROMEBOOK	04/02/18	SL	3.00		16	2,083.				2,083.	2,083.		0.	2,083.
68	COMPUTER	09/06/17	SL	3.00		16	37,609.				37,609.	37,609.		0.	37,609.
69	COMPUTER	08/30/17	SL	3.00		16	12,078.				12,078.	12,078.		0.	12,078.
70	COMPUTER EQUIP.	12/12/16	SL	3.00		16	249.				249.	249.		0.	249.
71	WIRELESS ACCESS PO	12/12/16	SL	3.00		16	2,498.				2,498.	2,498.		0.	2,498.
72	COMPUTER	09/08/16	SL	3.00		16	14,174.				14,174.	14,174.		0.	14,174.
73	COMPUTER	08/05/16	SL	3.00		16	20,924.				20,924.	20,924.		0.	20,924.
74	SECURITY SYSTEM	09/28/17	SL	3.00		16	22,100.				22,100.	21,468.		0.	21,468.
75	OFFICE EQUIP	09/06/17	SL	3.00		16	7,472.				7,472.	7,472.		0.	7,472.
76	DESKS & CHAIRS	08/23/18	SL	7.00		16	10,587.				10,587.	5,830.		1,512.	7,342.
77	CLEAN UNITS	07/25/18	SL	7.00		16	1,500.				1,500.	843.		214.	1,057.
78	FURNITURE	11/08/17	SL	7.00		16	33,947.				33,947.	22,521.		4,850.	27,371.
79	FURNITURE	11/07/17	SL	7.00		16	35,769.				35,769.	23,744.		5,110.	28,854.

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80	FURNITURE	08/30/17	SL	7.00		16	3,591.				3,591.	2,481.		513.	2,994.
81	W.B. MASON	07/12/17	SL	7.00		16	20,000.				20,000.	14,199.		2,857.	17,056.
82	FURNITURE	11/17/16	SL	7.00		16	21,628.				21,628.	17,362.		3,090.	20,452.
83	FURNITURE	10/25/16	SL	7.00		16	2,154.				2,154.	1,749.		308.	2,057.
84	SPORTS EQUIPMENT	08/24/16	SL	7.00		16	9,752.				9,752.	8,153.		1,393.	9,546.
85	FURNITURE	08/23/16	SL	7.00		16	1,738.				1,738.	1,453.		248.	1,701.
86	BEST BUY	08/05/16	SL	7.00		16	20,796.				20,796.	17,541.		2,971.	20,512.
87	W.B. MASON	07/26/16	SL	7.00		16	23,865.				23,865.	20,222.		3,409.	23,631.
88	IKEA FURNITURE	10/28/15	SL	7.00		16	12,358.				12,358.	11,787.		571.	12,358.
89	W.B. MASON	10/01/15	SL	7.00		16	62,900.				62,900.	60,660.		2,240.	62,900.
90	IKEA FURNITURE	07/30/15	SL	7.00		16	8,398.				8,398.	8,306.		92.	8,398.
91	IKEA FURNITURE	07/30/15	SL	7.00		16	3,702.				3,702.	3,661.		41.	3,702.
92	IKEA FURNITURE	07/30/15	SL	7.00		16	317.				317.	313.		4.	317.
93	FURNITURE	06/15/15	SL	7.00		16	20,000.				20,000.	20,000.		0.	20,000.
94	CHAIRS	09/16/14	SL	7.00		16	1,091.				1,091.	1,091.		0.	1,091.
95	WHITEBOARDS	09/16/14	SL	7.00		16	2,981.				2,981.	2,981.		0.	2,981.
96	IKEA FURNITURE	09/09/14	SL	7.00		16	98.				98.	98.		0.	98.
97	IKEA FURNITURE	09/09/14	SL	7.00		16	1,424.				1,424.	1,419.		0.	1,419.

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98	CLASSROOM FURNITUR	09/09/14	SL	7.00		16	4,514.				4,514.	4,499.		0.	4,499.
99	IKEA FURNITURE	08/15/14	SL	7.00		16	3,810.				3,810.	3,810.		0.	3,810.
100	CLASSROOM FURNITUR	08/14/14	SL	7.00		16	33,725.				33,725.	33,558.		0.	33,558.
101	IKEA FURNITURE	08/14/14	SL	7.00		16	3,850.				3,850.	3,831.		0.	3,831.
102	CLASSROOM FURNITUR	06/30/14	SL	7.00		16	31,000.				31,000.	31,000.		0.	31,000.
103	2 HON BOOKCASES	06/24/20	SL	7.00		16	593.				593.	85.		85.	170.
104	STEEL RACK	06/09/21	SL	7.00		16	122.				122.	18.		17.	35.
105	24 DELL	10/02/20	SL	3.00		16	160.				160.	93.		53.	146.
106	HP PRINTER	10/20/20	SL	3.00		16	300.				300.	169.		100.	269.
107	3 - 5 DRAWER VERTICAL FILE CABINETS	10/20/20	SL	3.00		16	940.				940.	530.		313.	843.
108	SHREDDER	10/20/20	SL	3.00		16	294.				294.	166.		98.	264.
109	BRIGADE 600 SERIES LATERAL FILE CABINET	12/18/20	SL	3.00		16	642.				642.	328.		214.	542.
110	FILE DRAWER	12/18/20	SL	3.00		16	165.				165.	84.		55.	139.
111	HP LASERJET PRO LASER MULTIFUNCTION PRINTER	01/06/21	SL	3.00		16	655.				655.	323.		218.	541.
112	DANBY	02/02/21	SL	3.00		16	300.				300.	141.		100.	241.
113	CHAIR	02/22/21	SL	3.00		16	70.				70.	31.		23.	54.
114	LATERAL CABINET	03/24/21	SL	3.00		16	890.				890.	377.		297.	674.
115	KODAK DIGITAL CAMERA + ACCESSORIES	05/12/21	SL	3.00		16	191.				191.	73.		64.	137.

228111 04-01-22

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
116	APPLE AIRPODS PRO	05/12/21	SL	3.00		16	210.				210.	73.		70.	143.
117	AVANTI COMPACT FRIDGE	06/08/21	SL	3.00		16	144.				144.	51.		48.	99.
118	305 CHROMEBOOKS, SERVICE LICENSES, & INSTALLATION	07/08/20	SL	3.00		16	64,056.				64,056.	42,704.		21,352.	64,056.
119	SOFTWARE & PERIPHERAL EQUIPMENT	08/14/20	SL	3.00		16	299.				299.	191.		100.	291.
120	5 HP PROBOOK 440 G7 14" TOUCHSCREEN NOTEBOOKS, FROM WIRELESS MICROPHONE	09/11/20	SL	3.00		16	4,298.				4,298.	2,627.		1,433.	4,060.
121	HEADSETS, EXTERNAL STEREO SO	09/15/20	SL	3.00		16	12,739.				12,739.	7,431.		4,246.	11,677.
122	ACER V277 27" FULL HD LED LCD MONITOR	11/10/20	SL	3.00		16	176.				176.	98.		59.	157.
123	CANON IMAGE PROGRAM TM-300 36" LARGE FORMAT INKJET PRIN	11/10/20	SL	3.00		16	3,956.				3,956.	2,198.		1,319.	3,517.
124	MAC BOOK PRO CHARGERS & APPLE MINI DISPLAY PORTS	11/10/20	SL	3.00		16	247.				247.	137.		82.	219.
125	4 LENOVO THINKPAD T15 GEN 115.6" NOTEBOOKS	11/10/20	SL	3.00		16	3,803.				3,803.	2,113.		1,268.	3,381.
126	16 HP PROBOOKS 440 G7 14" TOUCHSCREEN NOTEBOOKS	11/10/20	SL	3.00		16	13,755.				13,755.	7,642.		4,585.	12,227.
127	2 - MACBOOK AIRS	04/29/21	SL	3.00		16	3,170.				3,170.	1,233.		1,057.	2,290.
128	2 - 22" VIEW SONIC HD MONITORS	05/07/21	SL	3.00		16	220.				220.	85.		73.	158.
129	5- HP PROBOOK 440 G8 14" TOUCHSCREEN NOTEBOOKS	06/09/21	SL	3.00		16	4,615.				4,615.	1,666.		1,538.	3,204.
130	DELL 24" MONITOR	06/09/21	SL	3.00		16	150.				150.	54.		50.	104.
131	HP 11 G8 CHROMEBOOKS (IN KIND DONATION)	12/31/20	SL	3.00		16	85,560.				85,560.	42,780.		28,520.	71,300.
132	KAJEET VERIZON (NETWORKING) NEW PHONES FOR OPS TEAM (LH,	12/31/20	SL	3.00		16	30,274.				30,274.	15,137.		10,091.	25,228.
133	ML, & JRM)	03/14/21	SL	3.00		16	1,343.				1,343.	580.		448.	1,028.

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134	2 NEW PHONES	03/22/21	SL	3.00		16	1,003.				1,003.	426.		334.	760.
135	NEW DEVICES	05/07/21	SL	3.00		16	1,608.				1,608.	615.		536.	1,151.
136	4 ADDED TRAFFIC SIGNS ON HANCOCK AVE FROM SIGN LITE I	11/19/20	SL	20.00		16	980.				980.	79.		49.	128.
137	ADDED LINE MARKINGS ON HANCOCK AVE & RAILROAD AVE-	11/19/20	SL	20.00		16	1,750.				1,750.	141.		88.	229.
138	2 ADDED POST NO PARKING ANYTIME FROM SIGN LITE INC;	11/19/20	SL	20.00		16	490.				490.	40.		25.	65.
139	6% FEE - ITEMS 1, 2, 3, AND 4	11/19/20	SL	20.00		16	293.				293.	24.		15.	39.
140	ADDED LINE MARKINGS - 'BUS LOADING ZONE' ON HOWARD AVE	11/19/20	SL	20.00		16	1,665.				1,665.	134.		83.	217.
141	5 MICROSOFT OFFICE LICENSES	09/30/20	SL	3.00		16	402.				402.	234.		134.	368.
142	POWERSCHOOL SUBSCRIPTION, HOSTING, MAINTENANCE, 9/17/2	10/06/20	SL	3.00		16	16,465.				16,465.	9,503.		5,488.	14,991.
143	SCHOLOGY SUBSCRIPTION, LMS IMPLEMENTATION, REMOTE PD, 7	10/06/20	SL	3.00		16	9,610.				9,610.	5,546.		3,203.	8,749.
144	MICROSOFT OFFICE 2019 PROFESSIONAL PLUS LICENSES	11/10/20	SL	3.00		16	1,600.				1,600.	872.		533.	1,405.
145	210 ASTRONOMY CLUB SUBSCRIPTION LICENSES, EFFEC	06/08/21	SL	3.00		16	5,250.				5,250.	1,855.		1,750.	3,605.
146	CHROMEBOOKS	07/26/21	SL	3.00		16	89,326.				89,326.	27,294.		29,775.	57,069.
147	THINKBOOKS	08/24/21	SL	3.00		16	4,665.				4,665.	1,296.		1,555.	2,851.
148	THINKBOOKS	08/24/21	SL	3.00		16	3,419.				3,419.	950.		1,140.	2,090.
149	THINKBOOKS	09/14/21	SL	3.00		16	8,084.				8,084.	2,246.		2,695.	4,941.
150	COMPUTER	10/18/21	SL	3.00		16	6,462.				6,462.	1,436.		2,154.	3,590.
151	CAMERA	11/05/21	SL	3.00		16	3,157.				3,157.	702.		1,052.	1,754.

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152	CELL PHONES	11/22/21	SL	3.00		16	4,703.				4,703.	914.		1,568.	2,482.
153	PROJECTOR	01/27/22	SL	3.00		16	10,350.				10,350.	1,438.		3,450.	4,888.
154	THINKBOOKS	02/28/22	SL	3.00		16	9,700.				9,700.	1,078.		3,233.	4,311.
155	COMPUTER	03/18/22	SL	3.00		16	3,231.				3,231.	269.		1,077.	1,346.
156	COMPUTER	06/23/22	SL	3.00		16	92,394.				92,394.			30,798.	30,798.
157	COMPUTER	06/27/22	SL	3.00		16	3,749.				3,749.			1,250.	1,250.
	* TOTAL 990 PAGE 10 DEPR						4,637,164.				4,637,164.	1,820,726.		389,377.	2,210,103.

DRAFT