



The Leadership School

STUDENT LEADERSHIP AT THE CENTER OF LEARNING

The Leadership School

TLS March 28, 2023 Board Meeting

Published on March 27, 2023 at 3:45 PM CDT

Date and Time

Tuesday March 28, 2023 at 6:00 PM CDT

Location

The Leadership School
1785 Pennsylvania Ave
Pagedale, MO 63133

All board meetings will be fully in person.

<https://zoom.us/j/93648300851?pwd=RnJ0YlFzYy9qeE9vQ3MvR1RvR2JQUT09>

Attendees can still join via Zoom using the link below.

Or the following:

- Meeting ID: 936 4830 0851
- Passcode: TLS2021

Per Missouri Revised State Statute Section 610.021, the Board of Directors may close this meeting for an Executive Session to discuss permissible subjects.

This notice is published at our school site (1785 Pennsylvania Ave Pagedale, MO 63133) and on our website (<https://theleadershipschoolstl.org>).

Agenda

	Purpose	Presenter	Time
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I. Opening Items			6:00 PM
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	Purpose	Presenter	Time
A. Call the Meeting to Order			1 m
B. Record Attendance			2 m
II. Board Business			6:03 PM
A. Schedule Board Retreat	Discuss	Lennel Hunter	5 m
B. Use of Board OnTrack			5 m
III. Action Items			6:13 PM
A. Approve Minutes	Vote	Lennel Hunter	5 m
B. Approve February 2023 monthly financials	Vote	Deanne Henderson	15 m
C. Approve FY22 (July 1, 2021 - June 30, 2023) Form 990	Vote	Kimberly Townsend	5 m
D. Approve 2023-2024 School Calendar	Vote	Kimberly Townsend	10 m
IV. Board Committee Reports			6:48 PM
A. Development Committee	Discuss	Brooke Black	5 m
B. Finance + Facilities Committee	Discuss	Deanne Henderson	5 m
C. Governance Committee	Discuss	Gerren McHam	5 m
D. School Performance Committee	Discuss	Chardae Rigdon	5 m
V. Executive Director Report			7:08 PM
A. Fall 2023 Enrollment Update	Discuss	Kimberly Townsend	15 m
B. 2023 - 2024 Staffing Update	Discuss	Kimberly Townsend	15 m
C. Upcoming Events	Discuss	Kimberly Townsend	10 m
VI. Closing Items			7:48 PM

	Purpose	Presenter	Time
A. Next Steps	Discuss	Lennel Hunter	5 m
B. Adjourn Meeting	Vote		1 m

Coversheet

Approve Minutes

Section: III. Action Items
Item: A. Approve Minutes
Purpose: Vote
Submitted by:
Related Material: February 28, 2023 Meeting Minutes.pdf

Board of Directors Meeting Minutes

Meeting Date: 02/28/2023

Location: Hybrid: In-person (1785 Pennsylvania Ave) and Virtual (Zoom).

- A. **TLS Directors Present In Person:** Lennel Hunter, Deanne Henderson, Chardae Rigdon, Aaron Williams
- B. **TLS Directors Present Virtually:** Gerren McHam
- C. **TLS Directors Absent:** Brooke Black
- D. **TLS Staff/Guests Present:** Kimberly Townsend (TLS), Deborah Wright (TLS), Denitria Neil (TLS)

CALL TO ORDER

Once a quorum was met a meeting of the Board of Directors of The Leadership School was duly called on Tuesday, February 28, 2023 at 5:10 pm. Lennel Hunter called the meeting to order.

OPENING ITEMS

- No public comment

ACTION ITEMS

- A. G. McHam made the motion to approve January 31, 2023 meeting minutes. D. Henderson seconded the motion. Motion passed. (5/5).
- B. C. Rigdon made the motion to approve January 31, 2023 financials and G. Mcham seconded the motion. Motion passed (5/5).
- C. Monthly calendar will be resubmitted at a later date for approval.

BOARD BUSINESS

- A. A Board On Track representative gave a presentation of the capabilities and benefits of a software package which will aid in creating board agendas as well as storing documents and other information.
- B. Discussion on days for upcoming board retreat. A poll will be sent out.

BOARD COMMITTEE REPORTS

- A. Development Committee: no update at this time.
- B. Finance + Facilities Committee -
 - a. Budgeted forecast decreased due to manual calculation input error.
 - b. Discussed revisions of the budget for 2023
 - c. Discussed the repairs all the repairs which are needed for building A .

C. Governance Committee - no update

D. School Performance Committee - no update

EXECUTIVE DIRECTOR REPORT

- A. Gave an update on the on time submissions percentages.
 - a. All is on track at this time with DESE and MCPSC at this time
- B. Discussed hiring and open positions.

Closing

NEXT STEPS

- A. The Board Chair will email information regarding retreat dates.
- B. Board On Track updates
- C. Approve edits to board manual policy.

ADJOURNMENT

There being no further business to be transacted, and upon motion duly made (L. Hunter), seconded(D. Henderson) and approved, the meeting was adjourned at 8:00pm.

Prepared by:

Deborah Wright

Meeting Date 02/28/2023

NAME

Date

Coversheet

Approve February 2023 monthly financials

Section: III. Action Items
Item: B. Approve February 2023 monthly financials
Purpose: Vote
Submitted by:
Related Material: TLS - Monthly Presentation - February 2023.pdf
TLS - Supplemental Report - February 2023(1).xlsx - Dashboard.pdf
2023 02 TLS Check Register.pdf
2023 02 TLS Outstanding Invoices.pdf



The Leadership School

STUDENT LEADERSHIP AT THE CENTER OF LEARNING

February 2023 Financials

PREPARED **MAR'23** BY



- **Executive Summary**
- **Key Performance Indicators**
- **State Revenue**
- **Forecast Overview**
- **Cash Forecast**
- **Forecast History**
- **Key Forecast Changes This Month**
- **Appendix**

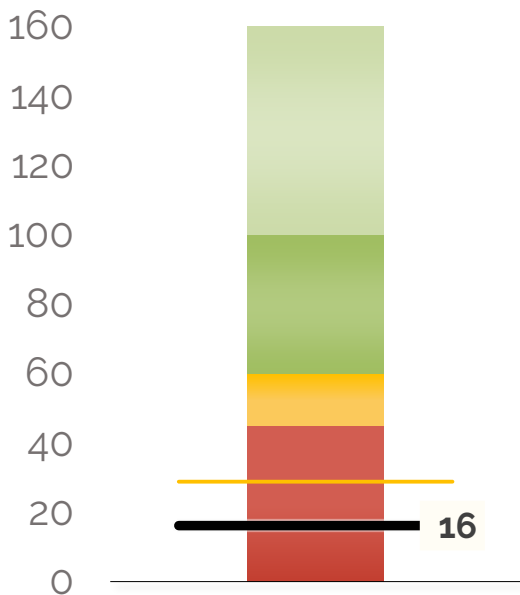
Executive Summary

- We are currently forecasting a net income of \$36k which is \$65k less than the budgeted net income of \$101k.
- Our cash balance is forecasted to end the year at \$82k, a \$42k decrease from last month.
- February forecast changes include:
 - Revenue down \$76k primarily due to: \$52k decrease in Federal revenue, DESE down \$30k due to FRL decrease, and balanced out by an increase in the Transportation allocation
 - Expenses forecast reduced \$41k. Reviewed all categories to confirm year end spending plans.

Key Performance Indicators

Days of Cash

Cash balance at year-end divided by average daily expenses

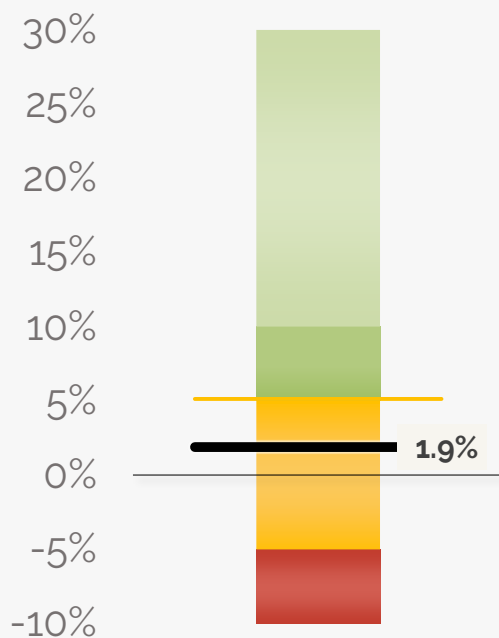


16 DAYS OF CASH AT YEAR'S END

The school will end the year with 16 days of cash. This is below the recommended 60 days

Gross Margin

Revenue less expenses, divided by revenue

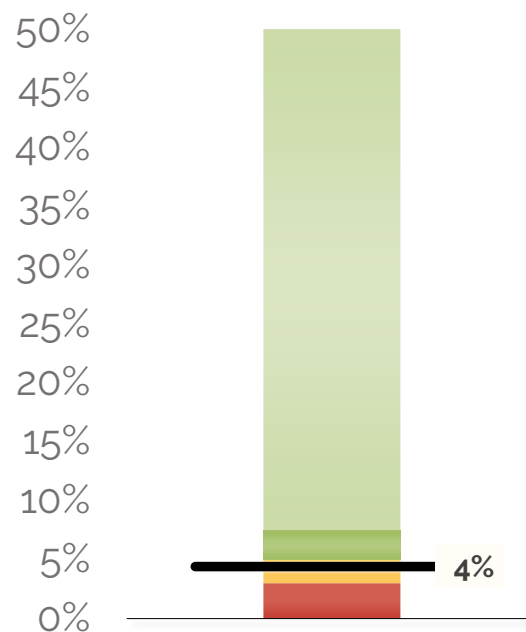


1.9% GROSS MARGIN

The forecasted net income is \$36k, which is \$65k below the budget. It yields a 1.9% gross margin.

Fund Balance %

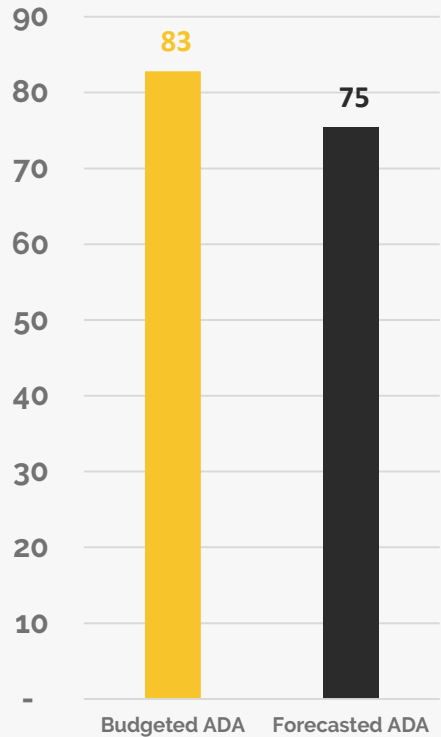
Forecasted Ending Fund Balance / Total Expenses



4.42% AT YEAR'S END

The school is projected to end the year with a fund balance of \$82,199. Last year's fund balance was \$46,366.

Student Expectations

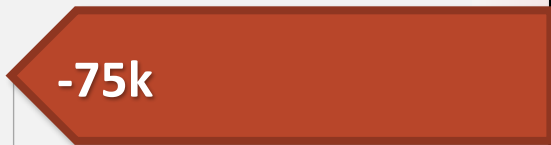




The school now forecasts 75 ADA for SY22-23. The budget target was 83.

\$122K Less Per-Pupil Funding Than Expected

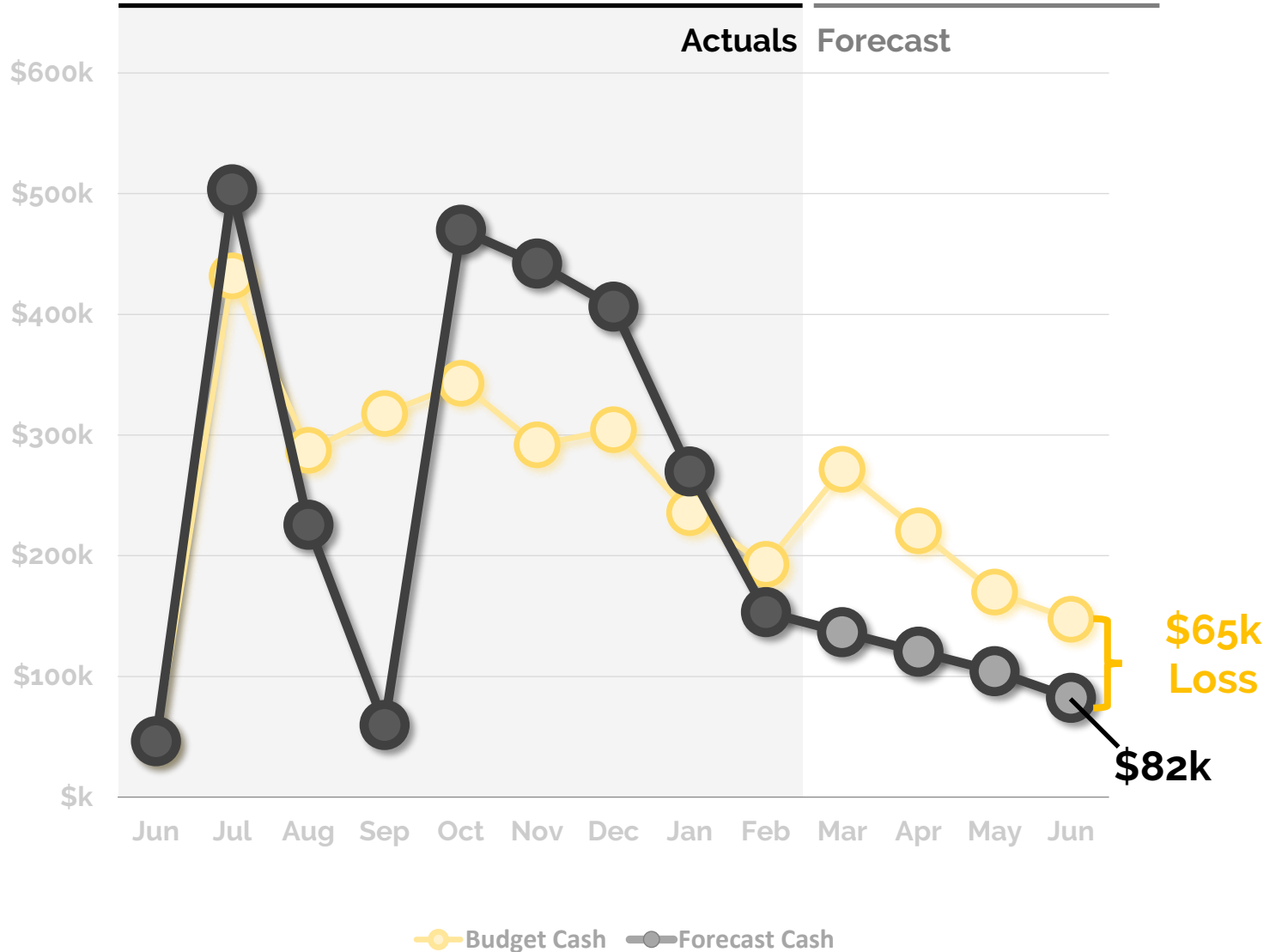
	Current Forecast	SY22-23 Budget	Difference	Financial Gain / (Loss)
Enrollment	82	90	-8	
Attendance	92.0%	92.0%	0.0%	
Total ADA	75	83	-7	
Regular Term K-12	75	83	-7	-37k
FRL Count	36	75	-39	
FRL Weight	3	13	-10	-86k
IEP Count	0	0	0	
IEP Weight	0	0	0	
LEP Count	2	2	0	
LEP Weight	0	0	0	
WADA	78	95	-17	
Per WADA Payment	9642	9235	407	
State Aid	\$745,379	\$867,861	-\$122,482	-122k

Forecast Overview

	Forecast	Budget	Variance	Variance Graphic	Comments
Revenue	\$1.9m	\$2m	-\$75k		Reduced state funding to reflect the accurate FRL rate. Federal food and Medicaid adjusted down to reflect year end
Expenses	\$1.9m	\$1.9m	\$10k		Compared to budget, a 10k savings overall as first year spending details are aligned with school plans.
Net Income	\$36k	\$101k	-\$65k		

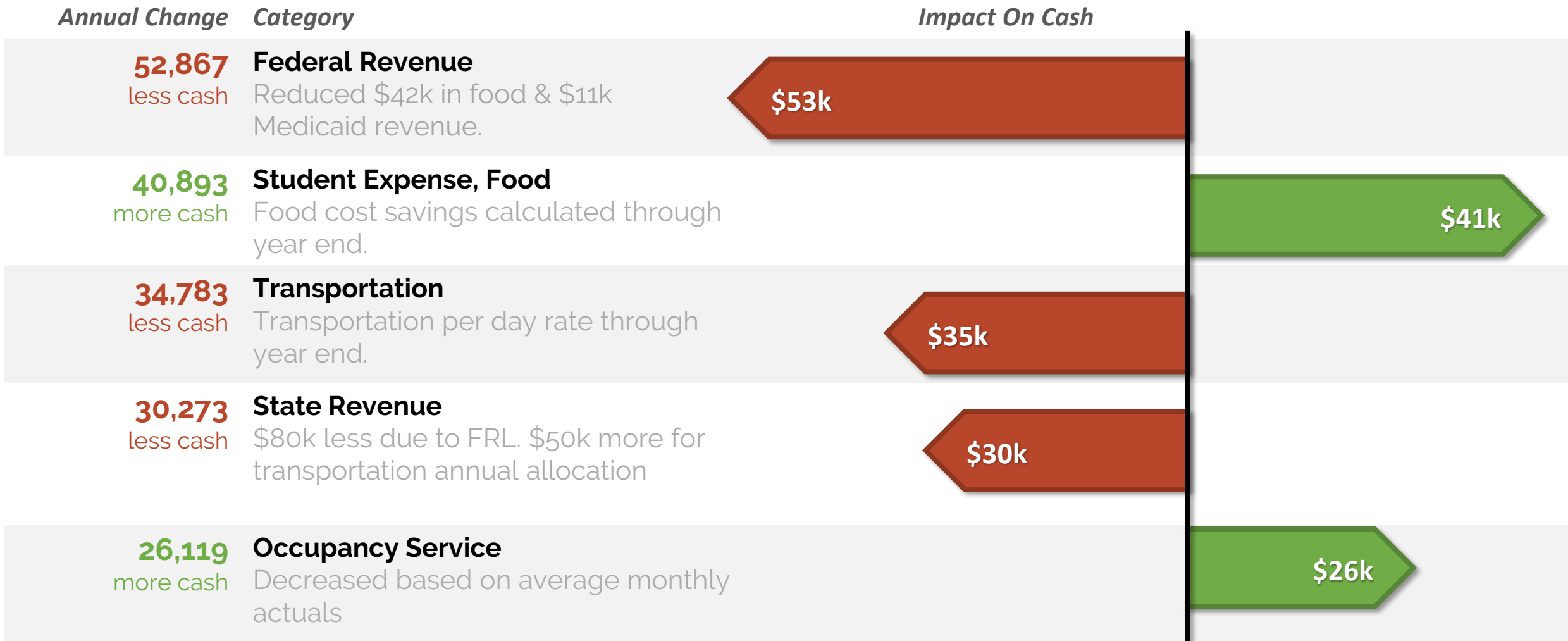
16 Days of Cash at year's end

We forecast the school's year ending cash balance as **\$82k**, **\$65k** below budget.



Key Forecast Changes This Month

The February forecast **decreased** the year-end cash expectation by \$41k. *Key changes:*





QUESTIONS?

Please contact your EdOps Finance Team:

Anne Nichols

anichols@ed-ops.com

816-985-5144

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	<i>Actual</i>	<i>Budget</i>	<i>Variance</i>	<i>Forecast</i>	<i>Budget</i>	<i>Variance</i>	<i>Remaining</i>
Revenue							
Local Revenue	-	-	-	-	-	-	-
State Revenue	499,790	538,074	(38,284)	820,200	867,861	(47,661)	320,410
Federal Revenue	89,829	166,716	(76,887)	236,857	286,956	(50,098)	147,029
Private Grants and Donations	823,739	692,070	131,669	823,739	814,200	9,539	-
Earned Fees	13,203	-	13,203	13,203	-	13,203	-
Total Revenue	1,426,560	1,396,860	29,701	1,893,999	1,969,017	(75,018) ①	467,439
Expenses							
Salaries	413,567	426,092	12,525	624,075	639,138	15,063	210,508
Benefits and Taxes	91,527	108,383	16,856	135,217	162,575	27,357	43,690
Staff-Related Costs	6,226	8,583	2,357	10,499	12,500	2,001	4,273
Rent	112,090	104,937	(7,153)	172,522	157,406	(15,117)	60,432
Occupancy Service	78,881	99,333	20,452	122,881	149,000	26,119	44,000
Student Expense, Direct	201,751	141,195	(60,556)	239,815	212,543	(27,272)	38,064
Student Expense, Food	35,918	66,700	30,782	59,157	100,050	40,893	23,239
Office & Business Expense	305,794	221,700	(84,094)	349,217	324,847	(24,370)	43,423
Transportation	71,361	73,333	1,972	144,782	110,000	(34,782)	73,421
Total Ordinary Expenses	1,317,115	1,250,257	(66,858)	1,858,166	1,868,058	9,892	541,051
Total Expenses	1,317,115	1,250,257	(66,858)	1,858,166	1,868,058	9,892 ②	541,051
Net Income	109,445	146,602	(37,157)	35,833	100,958	(65,125) ③	(73,612)
Cash Flow Adjustments	(2,532)	-	(2,532)	0	-	0	2,532
Change in Cash	106,914	146,602	(39,689)	35,833	100,958	(65,125)	(71,081)

① REVENUE: \$75K BEHIND

② EXPENSES: \$10K AHEAD

③ NET INCOME: \$65K behind

Monthly Financials

Income Statement	Actual								Forecast				TOTAL
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
Revenue													
State Revenue	0	0	0	372,550	52,151	62,118	0	12,971	80,103	80,103	80,103	80,103	820,200
Federal Revenue	0	0	0	0	16,146	47,674	18,887	7,122	36,757	36,757	36,757	36,757	236,857
Private Grants and Donations	514,200	2,500	600	150,000	152,619	0	0	3,819	0	0	0	0	823,739
Earned Fees	0	2,906	2,275	2,730	413	794	1,130	2,955	0	0	0	0	13,203
Total Revenue	514,200	5,406	2,875	525,280	221,330	110,586	20,017	26,868	116,860	116,860	116,860	116,860	1,893,999
Expenses													
Salaries	25,710	48,460	51,556	56,196	57,880	65,049	56,427	52,289	51,456	51,406	51,406	56,239	624,075
Benefits and Taxes	4,652	9,979	12,244	11,277	15,930	13,790	12,432	11,223	10,647	10,617	10,617	11,809	135,217
Staff-Related Costs	2,126	0	1,190	311	1,969	350	50	231	1,068	1,068	1,068	1,068	10,499
Rent	0	0	36,551	15,108	15,108	15,108	15,108	15,108	15,108	15,108	15,108	15,108	172,522
Occupancy Service	1,160	19,962	2,904	9,006	14,953	7,425	10,873	12,598	11,000	11,000	11,000	11,000	122,881
Student Expense, Direct	3,000	63,963	36,721	15,627	43,022	10,242	23,322	5,855	9,516	9,516	9,516	9,516	239,815
Student Expense, Food	0	0	0	0	18,654	6,883	4,265	6,116	5,810	5,810	5,810	5,810	59,157
Office & Business Expense	20,888	138,767	26,385	12,143	36,653	11,388	34,254	25,316	11,231	10,731	10,731	10,731	349,217
Transportation	501	0	0	0	40,126	16,221	0	14,514	18,355	18,355	18,355	18,355	144,782
Total Ordinary Expenses	58,035	281,131	167,551	119,668	244,294	146,456	156,731	143,250	134,192	133,612	133,612	139,636	1,858,166
Total Expenses	58,035	281,131	167,551	119,668	244,294	146,456	156,731	143,250	134,192	133,612	133,612	139,636	1,858,166
Net Income	456,165	-275,726	-164,676	405,612	-22,964	-35,870	-136,714	-116,382	-17,332	-16,752	-16,752	-22,777	35,833
Cash Flow Adjustments	1,096	-2,331	-1,184	4,842	-5,023	41	113	-85	633	633	633	633	0
Change in Cash	457,261	-278,056	-165,861	410,454	-27,988	-35,829	-136,601	-116,467	-16,699	-16,119	-16,119	-22,144	35,833

	<i>Previous Year End</i>	<i>Current</i>	<i>Year End</i>
	<i>6/30/2022</i>	<i>2/28/2023</i>	<i>6/30/2023</i>
Assets			
Current Assets			
Cash	46,366	153,280	82,199
Total Current Assets	46,366	153,280	82,199
Total Assets	46,366	153,280	82,199
Liabilities and Equity			
Liabilities			
Current Liabilities			
Other Current Liabilities	0	-2,532	0
Total Current Liabilities	0	-2,532	0
Total Long-Term Liabilities	0	0	
Total Liabilities	0	-2,532	
Equity			
Unrestricted Net Assets	46,366	46,366	46,366
Net Income	0	109,445	35,833
Total Equity	46,366	155,811	82,199

Dashboard

The Leadership School

July 2022 through February 2023

Key Performance Indicators

Days of Cash
(At Year End)

16

Target > 45 days

Gross Margin
Margin

2%

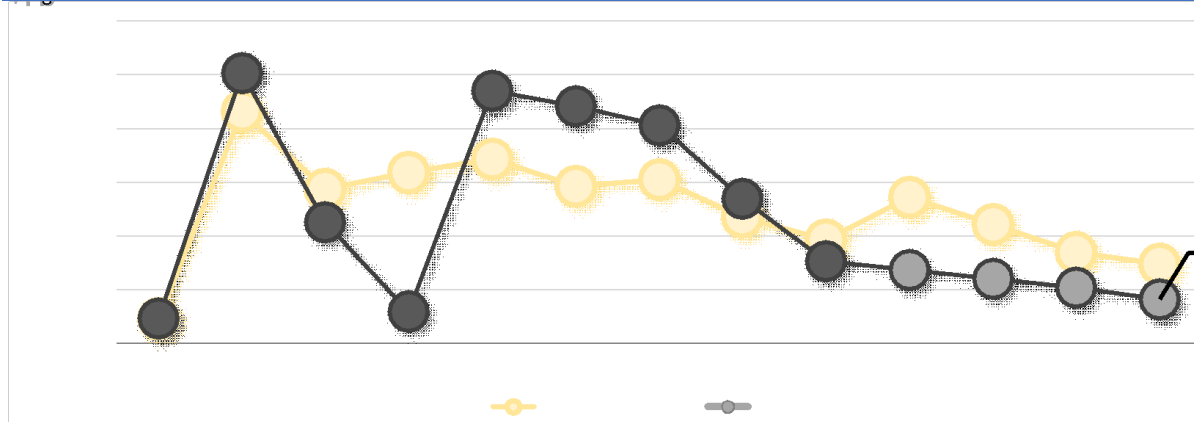
Target > -5.0%

Fund Balance
(At Year End)

4%

Target > 0,00

Cash Forecast



Financial Snapshot	Year-To-Date Financials			Annual Forecast			Remaining
	Actual	Budget	Variance	Forecast	Budget	Variance	
Revenue							
Local Revenue	-	-	-	-	-	-	-
State Revenue	499,790	538,074	(38,284)	820,200	867,861	(47,661)	320,410
Federal Revenue	89,829	166,716	(76,887)	236,857	286,956	(50,098)	147,029
Private Grants and Donations	823,739	692,070	131,669	823,739	814,200	9,539	-
Earned Fees	13,203	-	13,203	13,203	-	13,203	-
Total Revenue	1,426,560	1,396,860	29,701	1,893,999	1,969,017	(75,018)	467,439
Expenses							
Salaries	413,567	426,092	12,525	624,075	639,138	15,063	210,508
Benefits and Taxes	91,527	108,383	16,856	135,217	162,575	27,357	43,690
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Rent	112,090	104,937	(7,153)	172,522	157,406	(15,117)	60,432
Occupancy Service	78,881	99,333	20,452	122,881	149,000	26,119	44,000
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Student Expense, Food	35,918	66,700	30,782	59,157	100,050	40,893	23,239
Office & Business Expense	305,794	221,700	(84,094)	349,217	324,847	(24,370)	43,423
Transportation	71,361	73,333	1,972	144,782	110,000	(34,782)	73,421
Total Ordinary Expenses	1,317,115	1,250,257	(66,858)	1,858,166	1,868,058	9,892	541,051
Net Operating Income	109,445	146,602	(37,157)	35,833	100,958	(65,125)	(73,612)
Extraordinary Expenses							
Depreciation and Amortization	-	-	-	-	-	-	-
Interest	-	-	-	-	-	-	-
Facility Improvements	-	-	-	-	-	-	-
Total Extraordinary Expenses	-	-	-	-	-	-	-
Total Expenses	1,317,115	1,250,257	(66,858)	1,858,166	1,868,058	9,892	541,051
Net Income	109,445	146,602	(37,157)	35,833	100,958	(65,125)	(73,612)
Cash Flow Adjustments	(2,532)	-	(2,532)	0	-	0	2,532
Change in Cash	106,914	146,602	(39,689)	35,833	100,958	(65,125)	(71,081)

Revenue Drivers

	Normandy	Forecast	Budgeted	Change	Gain/(Loss)
Start of Year Enrollment		125	125	0	0
Attrition		28%	28.00%	0	0
End of Year Enrollment		82	90	-8	0
Attendance %		92.0%	92.0%	0.0%	0

ADA					
Regular Term ADA					
K-12	75.0	75.4	82.8	(7.4)	0
Subtotal Regular Term	75.0	75.4	82.8	(7.4)	
Total ADA	75.0	75.4	82.8	(7.4)	0

Special Populations Weights					
Free and Reduced Lunch (FRL)					
% of ADA	0.0%	47.1%	90.0%	-42.9%	0
Count	-	35.53	74.52	(38.99)	-1
Weight	-	3.0	12.6	(9.6)	-1
Limited English Proficiency (LEP)					
% of ADA		2.0%	2%	0%	0
Count		1.51	1.66	0	0
Weight	-	-	-	-	#DIV/0!
Total WADA	75.0	78.5	95.4	(16.9)	-17.74%
Per Wada Payment	\$ 9,642	\$ 9,642	\$ 9,235	\$ 407	4.40%
State Aid Projection	\$ 712,274	\$ 745,379	\$ 867,861	\$ (122,482)	-14.11%
Prior Year Adjustment			\$ -	\$ -	#DIV/0!
Net State Rev Projection	\$ 712,274	\$ 745,379	\$ 867,861	\$ (122,482)	-14.11%
Classroom Trust Fund	\$ -	\$ -	\$ -	\$ -	#DIV/0!
Basic Formula	\$ 712,274	\$ 745,379	\$ 867,861	\$ (122,482)	-14.11%

The Leadership School
03/10/2023 10:41 AM

Check Register by Type

Page: 1
User ID: SAS

Payee Type: Vendor		Check Type: Automatic Payment				Checking Account ID: 1		
<u>Check Number</u>	<u>Check Date</u>	<u>Cleared</u>	<u>Void</u>	<u>Void Date</u>	<u>Entity ID</u>	<u>Entity Name</u>	<u>Check Amount</u>	
149	02/09/2023	X			BAMBOOHR	Bamboo HR	175.00	
150	02/05/2023	X			CRICKET	Cricket Wireless	90.00	
151	02/27/2023	X			ZOOM	Zoom	14.99	
152	02/03/2023	X			GSUITE	Google Suite	3,660.25	
153	02/17/2023	X			NEXTIVA	Nextiva	448.78	
154	02/01/2023	X			SCCHARTER	SC Charter - Rent	15,107.80	
155	02/16/2023	X			SELECTIVE	Selective Insurance Co	0.00	
156	02/17/2023	X			WELLSFARGO	Wells Fargo Vendor	137.98	
157	02/13/2023	X			REPUBLIC	Republic Services	411.55	
159	02/23/2023	X			LEVEL3	Level 3 Communications, LLC	1,710.70	
172	02/24/2023	X			MIDWESTBNK	Midwest Bank Credit Card	5,889.71	
Checking Account ID: 1					Void Total:	0.00	Total without Voids:	27,646.76
Check Type Total:		Automatic Payment			Void Total:	0.00	Total without Voids:	27,646.76

Payee Type: Vendor		Check Type: Check				Checking Account ID: 1		
<u>Check Number</u>	<u>Check Date</u>	<u>Cleared</u>	<u>Void</u>	<u>Void Date</u>	<u>Entity ID</u>	<u>Entity Name</u>	<u>Check Amount</u>	
79892241	02/03/2023	X			FREECLEAN	Freedom Clean LLC	3,200.00	
79892242	02/03/2023	X			SLYMANBROS	Slyman Brothers	940.00	
79899352	02/07/2023	X			CINTAS	Cintas Corp	72.66	
79905156	02/09/2023	X			RICOH	Ricoh USA, Inc	11.50	
79905157	02/09/2023	X			CLEANSTRAT	Cleaning Strategies	3,900.00	
79905158	02/09/2023	X			MARYVILLE	Maryville University	50.00	
79905494	02/09/2023	X			PAYPOOL	Paypool LLC	194.30	
79905495	02/09/2023	X			BOXWOOD	Boxwood Landscaping	450.00	
79912014	02/10/2023	X			BOXWOOD	Boxwood Landscaping	750.00	
80043260	02/23/2023	X			LITETECH	Lite Technology Solutions, LLC	500.00	
80043261	02/23/2023	X			EDOPS	EdOps	5,000.00	
80050627	02/24/2023	X			CINTAS	Cintas Corp	263.88	
80050790	02/24/2023	X			SORLBRA	Brandon Sorlie	9,411.36	
80050791	02/24/2023	X			FIRSTSTUDE	First Student Bus	14,513.58	
80050792	02/24/2023	X			SAVVAS	Savvas Learning Company LLC	967.50	
80050793	02/24/2023	X			MANDYSON	Imani Dyson	1,500.00	
80051082	02/24/2023	X			CSD	CSD Insurance Trust	5,239.95	
80051083	02/24/2023	X			WARFORDS	Warford's Classic Catering & Food Service	6,116.14	
80066831	02/28/2023	X			CINTAS	Cintas Corp	72.66	
80066962	02/28/2023	X			DEACONESS	Deaconess Nurse Ministry	3,638.44	
80070508	03/01/2023	X			OFFICEESSE	Office Essentials	497.50	
Checking Account ID: 1					Void Total:	0.00	Total without Voids:	57,289.47
Check Type Total:		Check			Void Total:	0.00	Total without Voids:	57,289.47
Payee Type Total:		Vendor			Void Total:	0.00	Total without Voids:	84,936.23
Grand Total:					Void Total:	0.00	Total without Voids:	84,936.23



Accounts Payable Aging Summary

As of **2/28/2023**

The Leadership School

CLIENT: The Leadership School		REPORT DATE: 3/14/2023 6:05:47 PM ET				
Payee	Current	1-30	31-60	61-90	>90	Total
Association of Missouri Charter Schools	\$470.00	\$0.00	\$0.00	\$0.00	\$0.00	\$470.00
Boxwood Landscape, LLC	\$1,642.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,642.00
Cintas Corp	\$314.69	\$0.00	\$0.00	\$0.00	\$0.00	\$314.69
COCA - Center of Creative Arts	\$19,950.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19,950.00
CSD Insurance Trust	\$5,239.95	\$0.00	\$0.00	\$0.00	\$0.00	\$5,239.95
Deaconess Nurse Ministry	\$3,942.04	\$0.00	\$0.00	\$0.00	\$939.97	\$4,882.01
EdOps	\$5,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,000.00
First Student, Inc	\$16,221.06	\$0.00	\$0.00	\$0.00	\$0.00	\$16,221.06
Lite Technology Solutions, LLC	\$1,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,000.00
School Specialty LLC	\$0.00	\$0.00	\$0.00	\$0.00	\$39.82	\$39.82
Warford's Classic Catering & Food Service	\$7,085.64	\$0.00	\$0.00	\$0.00	\$0.00	\$7,085.64
Total:	\$60,865.38	\$0.00	\$0.00	\$0.00	\$979.79	\$61,845.17

Coversheet

Approve FY22 (July 1, 2021 - June 30, 2023) Form 990

Section: III. Action Items
Item: C. Approve FY22 (July 1, 2021 - June 30, 2023) Form 990
Purpose: Vote
Submitted by:
Related Material: 2021 990 Draft The Leadership School (1).pdf
8879 - The Leadership School.pdf

EXTENDED TO MAY 15, 2023

Short Form

Form **990-EZ**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2021

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/Form990EZ for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Open to Public
Inspection

A For the 2021 calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/
 terminated
 Amended return
 Application pending

C Name of organization
THE LEADERSHIP SCHOOL
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1785 PENNSYLVANIA AVE
 City or town, state or province, country, and ZIP or foreign postal code
ST. LOUIS, MO 63133-1301

D Employer identification number
**** - *** 2466**

E Telephone number
314-409-2308

F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶

H Check ▶ if the organization is not required to attach Schedule B (Form 990).

I Website: ▶ **HTTPS://WWW.THELEADERSHIPSCHOOLSTL.ORG/**

J Tax-exempt status (check only one) — 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **185,757.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
Revenue	1	Contributions, gifts, grants, and similar amounts received						185,757.																						
	2	Program service revenue including government fees and contracts																												
	3	Membership dues and assessments																												
	4	Investment income																												
	5a	Gross amount from sale of assets other than inventory																												
	b	Less: cost or other basis and sales expenses																												
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)																												
	6	Gaming and fundraising events:																												
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)																												
	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)																												
c	Less: direct expenses from gaming and fundraising events																													
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)																													
7a	Gross sales of inventory, less returns and allowances																													
b	Less: cost of goods sold																													
c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)																													
8	Other revenue (describe in Schedule O)																													
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8																												185,757.	
Expenses	10	Grants and similar amounts paid (list in Schedule O)																												
	11	Benefits paid to or for members																												
	12	Salaries, other compensation, and employee benefits																											169,583.	
	13	Professional fees and other payments to independent contractors																											62,531.	
	14	Occupancy, rent, utilities, and maintenance																											23,299.	
	15	Printing, publications, postage, and shipping																												
	16	Other expenses (describe in Schedule O)																											20,755.	
17	Total expenses. Add lines 10 through 16																											276,168.		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)																										-90,411.		
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																										136,777.		
	20	Other changes in net assets or fund balances (explain in Schedule O)																										0.		
	21	Net assets or fund balances at end of year. Combine lines 18 through 20																										46,366.		

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

Form **990-EZ** (2021)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	136,777.	46,366.
23 Land and buildings		
24 Other assets (describe in Schedule O)		
25 Total assets	136,777.	46,366.
26 Total liabilities (describe in Schedule O)	0.	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	136,777.	46,366.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

What is the organization's primary exempt purpose? **SEE SCHEDULE O**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 SEE SCHEDULE O	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31 Other program services (describe in Schedule O)	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a)	0.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
LENNEL HUNTER BOARD CHAIRMAN	1.00	0.	0.	0.
BROOKE BLACK BOARD MEMBER	1.00	0.	0.	0.
DEANNE HENDERSON BOARD MEMBER	1.00	0.	0.	0.
GERRAN MCHAM BOARD MEMBER	1.00	0.	0.	0.
CHARDAE RIDGON BOARD MEMBER	1.00	0.	0.	0.
AARON WILLIAMS BOARD MEMBER	1.00	0.	0.	0.
KIMBERLY TOWNSEND, ED.D. EXECUTIVE DIRECTOR	40.00	47,500.	0.	0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Sch. O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
35b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	N/A	
35c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.
37b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
38b	If "Yes," complete Schedule L, Part II, and enter the total amount involved	N/A	
39	Section 501(c)(7) organizations. Enter:		
39a	a Initiation fees and capital contributions included on line 9	N/A	
39b	b Gross receipts, included on line 9, for public use of club facilities	N/A	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text" value="0."/> ; section 4912 <input type="text" value="0."/> ; section 4955 <input type="text" value="0."/> .		
40b	b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
40c	c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	0.	
40d	d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	0.	
40e	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed	NONE	
42a	The organization's books are in care of KIMBERLY TOWNSEND, E.D.D. Telephone no. 314-409-2308 Located at 1785 PENNSYLVANIA AVE, ST. LOUIS, MO ZIP + 4 63133-1301		
42b	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	Yes	No
42b			X
42c	c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	43	N/A
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
44b	b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
44c	c Did the organization receive any payments for indoor tanning services during the year?		X
44d	d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
45b	b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions		

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office?
If "Yes," complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year?

	Yes	No
47		X
48		X
49a		X
49b		

If "Yes," complete Sch. C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A

Yes No

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

Sign Here

Signature of officer

Date

KIMBERLY TOWNSEND, E.D.D., EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
JASON D. LOUK	JASON D. LOUK	03/12/23		P00541486
Firm's name ▶ MARR AND COMPANY, P.C.			Firm's EIN ▶ ** - *** 0039	
Firm's address ▶ 1401 EAST 104TH STREET, SUITE 100 KANSAS CITY, MO 64131			Phone no. (816) 363-8700	

May the IRS discuss this return with the preparer shown above? See instructions

Yes No

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 2021 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2021. 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 - 2020. 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 - 2021. 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 - 2020. 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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
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)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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 (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	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 - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 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-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

Schedule A (Form 990) 2021

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.)

Horizontal lines for supplemental information input.

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

2021

Name of the organization

THE LEADERSHIP SCHOOL

Employer identification number

**** - *** 2466**

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).

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

Schedule B (Form 990) (2021)

Name of organization THE LEADERSHIP SCHOOL	Employer identification number ** - *** 2466
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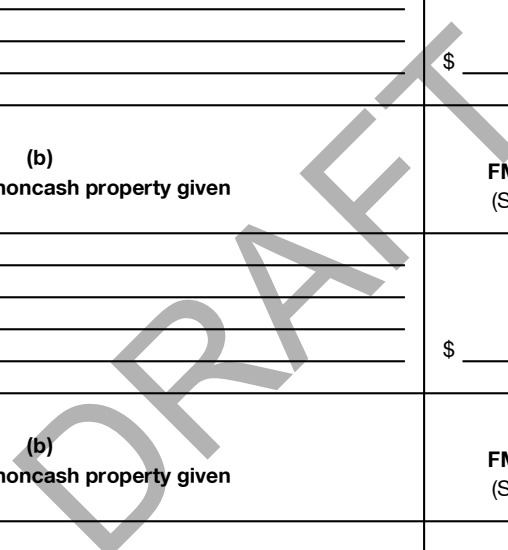
Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE OPPORTUNITY TRUST 5501 DELMAR BLVD ST LOUIS, MO 63112	\$ 160,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	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 THE LEADERSHIP SCHOOL	Employer identification number ** - *** 2466
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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 THE LEADERSHIP SCHOOL	Employer identification number ** - *** 2466
--	--

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 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

2021

Open to Public
Inspection

Name of the organization

THE LEADERSHIP SCHOOL

Employer identification number

** - ***2466

FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:

DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
OFFICE EXPENSE	3,750.
PAYROLL TAX	12,973.
INSURANCE	4,032.
TOTAL TO FORM 990-EZ, LINE 16	20,755.

FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - THE LEADERSHIP SCHOOL EXISTS TO GROW OUR STUDENTS' LEADERSHIP CAPACITY THROUGH EARNEST ENGAGEMENT IN AN ACADEMICALLY RIGOROUS, CULTURALLY RELEVANT, AND RELATIONSHIP-ORIENTED ENVIRONMENT.

FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS: THE LEADERSHIP SCHOOL PROPOSE TO SERVE ELEMENTARY AND MIDDLE SCHOOL STUDENTS RESIDING WITHIN THE BOUNDARIES OF THE NORMAND SCHOOLS COLLABORATIVE. OUR SCHOOL COUPLES A SENSE OF BELONGING WITH A RIGOROUS ACADEMIC EXPERIENCE TO LAY THE FOUNDATION FOR AUTHENTIC STUDENT LEADERSHIP. WE WILL LAUNCH IN FALL 2021 WITH KINDERGARTEN, FIRST AND SECOND GRADE STUDENTS, ADDING A GRADE EACH YEAR TO SERVE STUDENTS IN KINDERGARTEN THROUGH EIGHTH GRADE AT FULL GROWTH (2026-27 SCHOOL YEAR).

FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS: THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY, OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.

THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,

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

Schedule O (Form 990) 2021

Name of the organization THE LEADERSHIP SCHOOL	Employer identification number ** - *** 2466
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OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

DRAFT

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning JUL 1, 2021, and ending JUN 30, 2022

2021

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879TE for the latest information.**

Name of filer

THE LEADERSHIP SCHOOL

EIN or SSN

83-3692466

Name and title of officer or person subject to tax

**KIMBERLY TOWNSEND EDD
EXECUTIVE DIRECTOR**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

1a Form 990 check here <input type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b <u>185,757.</u>
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

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

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize MARR AND COMPANY, P.C. to enter my PIN 92466
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

Part III Certification and Authentication

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

43041236387

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ MARR AND COMPANY, P.C.

Date ▶ 03/12/23

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

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

Form **8879-TE** (2021)

Coversheet

Approve 2023-2024 School Calendar

Section: III. Action Items
Item: D. Approve 2023-2024 School Calendar
Purpose: Vote
Submitted by:
Related Material: 2023-2024 School Calendar.pdf



The Leadership School

STUDENT LEADERSHIP AT THE CENTER OF LEARNING

2023-24 School Year Calendar

DRAFT March 2023

		July 2023							January 2023							1: Winter Break/School Closed 2: Staff PD/No School for Students 3: Classes Resume 11: Q2 Ends; 16: Q3 Begins 26: Staff PD/No School for Students 15: MLK Day/School Closed T - 21; S - 19
		Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	
4: Independence Day/School Closed								1		1	2	3	4	5	6	
		2	3	4	5	6	7	8	7	8	9	10	11	12	13	
		9	10	11	12	13	14	15	14	15	16	17	18	19	20	
		16	17	18	19	20	21	22	21	22	23	24	25	26	27	
		23	24	25	26	27	28	29	28	29	30	31				
		30	31													

		August 2023							February 2024							2: Staff PD/No School for Students 16: Staff PD/No School for Students 19: Presidents' Day/School Closed T - 20; S - 18
		Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	
1-2: New Hire Orientation 1-18: Staff PD & Teacher Work Days 15: Meet the Teacher Night 6pm 21: First Day of School/Q1 Begins T - 23; S - 9				1	2	3	4	5					1	2	3	
		6	7	8	9	10	11	12	4	5	6	7	8	9	10	
		13	14	15	16	17	18	19	11	12	13	14	15	16	17	
		20	21	22	23	24	25	26	18	19	20	21	22	23	24	
		27	28	29	30	31			25	26	27	28	29			

		September 2023							March 2024							14: Q3 Ends 15: Staff PD/No School for Students 18-22: Spring Break/School Closed 25: Q4 Begins 28: Parent-Teacher Conferences (Evening) 29: Parent-Teacher Conferences (No School) T - 18; S - 16
		Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	
4: Labor Day/School Closed 22: Staff PD/No School for Students T - 20; S - 19							1	2						1	2	
		3	4	5	6	7	8	9	3	4	5	6	7	8	9	
		10	11	12	13	14	15	16	10	11	12	13	14	15	16	
		17	18	19	20	21	22	23	17	18	19	20	21	22	23	
		24	25	26	27	28	29	30	24	25	26	27	28	29	30	
									31							

		October 2023							April 2024							12: Staff PD/No School for Students T - 22; S - 20
		Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	
20: Staff PD/No School for Students 19: Q1 Ends; 23: Q2 Begins 26: Parent Conferences (Evening) 27: No School/Parent Conferences (Morning) T - 21; S - 20		1	2	3	4	5	6	7		1	2	3	4	5	6	
		8	9	10	11	12	13	14	7	8	9	10	11	12	13	
		15	16	17	18	19	20	21	14	15	16	17	18	19	20	
		22	23	24	25	26	27	28	21	22	23	24	25	26	27	
		29	30	31					28	29	30					

		November 2023							May 2024							23: Q4 Ends/Last Day of School 24: Teacher Work Day 27: Memorial Day/School Closed T - 18; S - 17
			Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	
20-24: Thanksgiving Break/School Closed T - 17; S - 17					1	2	3	4				1	2	3	4	
		5	6	7	8	9	10	11	5	6	7	8	9	10	11	
		12	13	14	15	16	17	18	12	13	14	15	16	17	18	
		19	20	21	22	23	24	25	19	20	21	22	23	24	25	
		26	27	28	29	30			26	27	28	29	30	31		

		December 2023							June 2024							3-28: Summer Leadership Camp 19 - Juneteenth/School Closed T - 13; S - 10
		Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	
8: Staff PD/No School for Students 18-19: Staff PD/No School for Students 20-29: Winter Break/School Closed T - 13; S - 10							1	2							1	
		3	4	5	6	7	8	9	2	3	4	5	6	7	8	
		10	11	12	13	14	15	16	9	10	11	12	13	14	15	
		17	18	19	20	21	22	23	16	17	18	19	20	21	22	
		24	25	26	27	28	29	30	23	24	25	26	27	28	29	
		31							30							

No School for Students
School Closed
First/Last Day of School
Snow Days
Summer School

Aug PD: 14 days	Q1: 42 days
Q1: 44 days	Q2: 39 days
Q2: 43 days	Q3: 40 days
Q3: 43 days	Q4: 42 days
Q4: 44 days	
Total Teacher Days: 188 days	Total Student Days: 163 day/100.25 hours