

Compass Charter Schools

Finance Committee Meeting

Date and Time

Tuesday May 16, 2017 at 2:00 PM PDT

CCS Central Office: 850 Hampshire Road, Suite P, Thousand Oaks, CA 91361 3305 Buckman Springs Road, Pine Valley, CA 91962 3625 Thousand Oaks Blvd., Suite 245 Westlake Village, CA 91362

Please join my meeting from your computer, tablet or smartphone. https://global.gotomeeting.com/join/188967613

You can also dial in using your phone: (312) 757-3121; Access Code: 188-967-613

For questions or requests regarding accessibility, please call Miguel Aguilar at (805) 807-8199.

Agenda

I. Opening Items

Opening Items

- A. Call the Meeting to Order
- B. Record Attendance and Guests

II. CONSENT ITEMS

A. Consent Items

Consent Items – Items under Consent Items will be voted on in one motion unless a member of the Committee requests that an item be removed and voted on separately, in which case, the Committee Chair will determine when it will be called and considered for action. Due to the set-up of BoardOnTrack, approval of any meeting minutes will be done through consent, unless removed and voted on separately as noted above, using the same vote count.

- Approval of May 16, 2017 Regular Meeting Agenda
- Approval of April 18, 2017 Regular Meeting Minutes
- **B.** Approval of the April 18, 2017 Regular Meeting Minutes

III. COMMUNICATIONS

- A. Committee Member Communication
 - Joe Cummings
 - Kathy Granger

IV. REPORTS

A. Staff Report

V. PUBLIC COMMENT

Finance

A. Public Comment

Addressing the Committee – Committee meetings are meetings of the Board of Directors and will be held in a civil, orderly and respectful manner. All public comments or questions should be addressed to the Committee through the Chair of the Committee. To ensure an orderly meeting and an equal opportunity for each speaker, persons wishing to address the Committee must send a Speaker Request Message through the form of a text message or chat box message to Miguel Aguilar, Executive Assistant to the CEO (805-807-8199). Messages must contain speaker name, contact number or email, and subject matter and sent prior to the beginning of the Public Comment section of the meeting. Members of the public may address the Committee on any matter within the Committee's jurisdiction and have **three (3) minutes each** to do so. The total time of each subject

will be fifteen (15) minutes, unless additional time is requested by a Committee Member and approved by the Committee.

The Committee may not deliberate or take action on items that are not on the agenda. However, the Committee may give direction to staff following a presentation. The Chair is in charge of the meeting and will maintain order, set the time limits for the speakers and the subject matter, and will have the prerogative to remove any person who is disruptive of the Committee meeting. The Finance Committee may place limitations on the total time to be devoted to each topic if it finds that the numbers of speakers would impede the Committee's ability to conduct its business in a timely manner. The Finance Committee may also allow for additional public comment and questions after reports and presentations if it deems necessary.

VI. UNFINISHED BUSINESS

VII. NEW BUSINESS

- A. Review and Discussion of the 2015 Form 990
- B. Review and Discussion of the April Financials
- C. Review and Discussion of the Executive Compensation Study
- D. Review and Discussion of the 2017-18 Draft Operating Budget

VIII. Closing Items

A. UPCOMING MEETING

Tuesday, June 20 at 2 pm

B. Adjourn Meeting

Coversheet

Approval of the April 18, 2017 Regular Meeting Minutes

Section: II. CONSENT ITEMS

Item: B. Approval of the April 18, 2017 Regular Meeting Minutes

Purpose: Approve Minutes

Submitted by:

Related Material: Minutes for Finance Committee Meeting on April 18, 2017



Compass Charter Schools

Minutes

Finance Committee Meeting

Date and Time

Tuesday April 18, 2017 at 2:00 PM

CCS Central Office: 850 Hampshire Road, Suite P, Thousand Oaks, CA 91361 3305 Buckman Springs Road, Pine Valley, CA 91962 3625 Thousand Oaks Blvd., Suite 245 Westlake Village, CA 91362

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Committee Members Present

J. Cummings (remote), J. Lewis, K. Granger (remote)

Committee Members Absent

None

Guests Present

L. Fishman, M. Aguilar

I. Opening Items

A. Call the Meeting to Order

K. Granger called a meeting of the Finance Committee of Compass Charter Schools to order on Tuesday Apr 18, 2017 at 2:00 PM.

B. Record Attendance and Guests

II. CONSENT ITEMS

A. Consent Items

- J. Cummings made a motion to approve consent items.
- K. Granger seconded the motion.

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

Roll Call

- J. Cummings Aye
- K. Granger Aye

B. Approval of the March 21, 2017 Regular Meeting Minutes

- J. Cummings made a motion to approve minutes from the Finance Committee Meeting on 03-21-17 Finance Committee Meeting on 03-21-17.
- K. Granger seconded the motion.

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

Roll Call

- J. Cummings Aye
- K. Granger Aye

III. COMMUNICATIONS

A. Committee Member Communication

No committee member communication.

IV. REPORTS

A. Staff Report

Mr. Lewis shared that we are in the beginning stages of the 2016-17 audit with Christy White Associates, who will be on-site this Thursday and Friday, April 20 and 21, to begin work on the attendance portion of the audit. He also shared that we will be on the June 7 agenda of the Advisory Commission on Charter Schools (ACCS) to hear our SB740 Funding Determination Requests. The packet, along with CDE staff recommendation, comes out on Friday, May 26. We anticipate working with CDE staff in the coming weeks to answer any questions on our forms to ensure a positive recommendation to the ACCS.

V. PUBLIC COMMENT

A.

Public Comment

No public comment.

VI. NEW BUSINESS

A. Review and Discussion of the March Financials

Mr. Lewis and Mr. Scott Warner, School Business Manager from CSMC, led the committee in a review of the March financials.

VII. Closing Items

A. UPCOMING MEETING

B. Adjourn Meeting

There being no further business to be transacted, and upon motion duly made, seconded and approved, the meeting was adjourned at 2:15 PM.

Respectfully Submitted,

M. Aguilar

Coversheet

Staff Report

Section: IV. REPORTS Item: A. Staff Report

Purpose: FYI

Submitted by: J.J. Lewis

Related Material: Staff Report - May.pdf



Staff Report May 16, 2017

This report is meant to provide updates to the Board of Directors Finance Committee:

2016-17 Audit

Christy White Associates was on-site on Thursday, April 20 to begin work on our 2016-17 audit. They reviewed attendance compliance, as well as HR compliance. Once we close the books, they will return to review our financial compliance.

Charter School Development Center Charter Business Officer Training Program
Lisa Fishman, Director of Operations, and J.J. Lewis, President & CEO, completed COB
training through the CSDC. They will both become certified once they submit key
assignments, which are due by the end of July. Training topics included attendance
accounting, budget development and monitoring, charter school auditing, personnel &
labor, and more. This was a three (3) month program with both in-person and online
modules.

Chase Bank (checking account)

The primary account for CCS is a checking account at Chase Bank. Balances are as of the end of the reported month:

• April: \$3,892,266.81

IP Morgan Chase (CD account)

CCS has a laddered CD account through JP Morgan Chase. Balances are as of the end of the reported month:

• April: \$3,760,090.00

Leases

We currently sublease two (2) properties to iLead Charter School: Bethel Church in Encino, and Friar Street in Van Nuys. These are the former locations for VIP North and VIP South, which were closed in June 2014. We have renewed our subleases with iLead through July 31, 2018.

Coversheet

Review and Discussion of the 2015 Form 990

Section: VII. NEW BUSINESS

Item: A. Review and Discussion of the 2015 Form 990

Purpose: Discuss Submitted by: J.J. Lewis

Related Material: CCS 2015 Form 990 - FILING COPY.pdf

2015

FEDERAL FILING INSTRUCTIONS

CLIENT AAS

COMPASS CHARTER SCHOOLS (FORMERLY ACADEMY OF ARTS AND SCIENCES)

45-3643984

FORM TO FILE:

FORM 990 - 2015 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX

SIGNATURE:

SIGN AND DATE FORM 990.

PAYMENT:

NO PAYMENT IS REQUIRED.

WHEN TO FILE:

ON OR BEFORE MAY 15, 2017.

WHERE TO FILE:

DEPARTMENT OF TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0027

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2015

Open to Public

Department of the Treasury

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.

Information about Form 990 and its instructions is at www.irs.gov/form990

Inter	nal Reve	enue Service	- Illioilliation	about Form 330 and its	monuctions is at www	ww.iis.gov/i	ormeso.			inspection
Α	For th	ne 2015 calenda	ar year, or tax year begin	ning 7/01	, 2015,	and ending	6/3			, 2016
В	Check it	f applicable:	С					D Employ	er ident	ification number
	Ad	ldress change (COMPASS CHARTER	SCHOOLS				45-3	3643	984
	X Na	ime change	(FORMERLY ACADEM	Y OF ARTS ANI	SCIENCES)		Ī	E Telepho		
	Ini		350 HAMPSHIRE RO					(85	5) 9	37-4227
	-	al return/terminated	THOUSAND OAKS, C	A 91361			ľ	(00)	<u> </u>	0, 122,
		nended return						G Gross re	eceints	\$ 16,191,272.
	-	<u> </u>	F Name and address of principa	l officer:		Н	(a) Is this a	group retur		<u> </u>
		, ,	SAME AS C ABOVE			н	I(b) Are all	subordinates attach a list.	include	
_	Tay		X 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or	527	If 'No,' a	attach a list.	(see ins	tructions)
<u>'</u>					4347(a)(1) 01					
			COMPASSCHARTERS		<u> </u>		• • • •	exemption nu		
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	1		e the organization's missi							
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õ			ng members of the gover						1 3	5
•প্			ependent voting members						4	<u>5</u>
ies			of individuals employed in						5	276
Activities & Governance			of volunteers (estimate if						6	4
Acl	7a	Total unrelated	d business revenue from F	Part VIII, column (C)), line 12				7a	0.
	b	Net unrelated b	ousiness taxable income	from Form 990-T, lir	ne 34				7b	0.
								rior Year		Current Year
Φ			and grants (Part VIII, line				35	,480,5	18.	16,147,441.
Revenue			ce revenue (Part VIII, line							
eve			ome (Part VIII, column (A	•	•			3,1		15,543.
<u>—</u>			(Part VIII, column (A), lir					505,8		28,288.
			- add lines 8 through 11				35	<u>,989,5</u>	32.	16,191,272.
			nilar amounts paid (Part I	• •	•					
			o or for members (Part I)							
S	15		compensation, employee				12	<u>,783,9</u>	69.	6,656,605.
Expenses	16 a		ındraising fees (Part IX, o							
×	b	Total fundraisir	ng expenses (Part IX, col	umn (D), line 25) 🕨	-					
ш	17	Other expense	s (Part IX, column (A), lir	nes 11a-11d, 11f-24	e)		10,616,847.			7,721,483.
	18	Total expenses	s. Add lines 13-17 (must o	equal Part IX, colum	nn (A), line 25)		23	,400,8	16.	14,378,088.
		Revenue less e	expenses. Subtract line 1	8 from line 12			12	,588,7	16.	1,813,184.
is of							Beginnin	g of Curren	t Year	End of Year
ssel Bala	20		Part X, line 16)					,163,6		22,399,875.
Net Assets or Fund Balances	21	Total liabilities	(Part X, line 26)				2	,584,0	84.	7,007,126.
Zď	22	Net assets or f	und balances. Subtract li	ne 21 from line 20.			13	,579,5	65.	15,392,749.
Pa	rt II	Signature	Block							
Unde	er penalt	ties of perjury, I decl	lare that I have examined this retuer (other than officer) is based on	rn, including accompanyin	g schedules and statem	nents, and to th	e best of my	y knowledge	and beli	ef, it is true, correct, and
COIT	Jiete. De	I.	(other than officer) is based off	all illioithation of which pre	eparer rias arry knowled	iye.				
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				A 92103				Phone no.	(619	
-			return with the preparer							. X Yes No
BA	A For	Paperwork Re	duction Act Notice, see t	he separate instruc	tions.	TEEA	0113L 10/1	2/15		Form 990 (2015)

		ASS CHARTER SCH		45-36	43984 Page 2
Par		of Program Service	•		
			nse or note to any line in this Par	t III	<u>X</u>
1				CREATIVE, SELF-DIRECT	
				. – – – – – – – – – – – – – – – – – – –	
2	Form 990 or 990-EZ?	, ,	ogram services during the year whic	•	Yes X No
3	Did the organization		ke significant changes in how it o	conducts, any program services?	X Yes No
4	Section 501(c)(3) and	ation's program service a d 501(c)(4) organizations for each program service	s are required to report the amour	nree largest program services, as month of grants and allocations to others	easured by expenses. , the total expenses,
4 a	DURING 2015-1 CHARTER SCHOOL DIEGO, VENTUE PROGRAM FOR S INNOVATIVE ON BEST WHEN THE TENANT OF THE PROVIDES CHOIL VARIETY OF EVENTUE FEE	6, THE ACADEMY DLS FOR STUDENTS RA, SONOMA, FRES STUDENTS TO ENGA ULINE LEARNING W CIR EDUCATION IS PHILOSOPHY AT CE FOR STUDENTS ZENTS, ACTIVITIE BRUARY 8, 2017,	IN GRADES K-12 IN CANO AND LOS ANGELES. A GE IN AN EXCEPTIONAL ITH CRITICAL FACE-TO- TAILORED TO THEIR SE AAS IS FLEXIBILITY. I . STUDENTS HAVE THE E S, AND EXPERIENCES THE THE ORGANIZATION FILE) (Revenue S (AAS) OPERATED TEN (10 ALIFORNIA IN THE COUNTI AS OFFERS A CUSTOMIZED LEARNING EXPERIENCE TH FACE AND LAB TIME. STU PEICIFIC NEEDS, WHICH I CHE FLEXIBILITY OF BLEN TLEXIBILITY TO PARTICIP HAT ENHANCE THE LEARNIN CD RESTATED ARTICLES OF COMPASS CHARTER SCHOOL	PUBLIC ES OF SAN LEARNING AT BLENDS DENTS LEARN S WHY A KEY DING LEARNING ATE IN A WIDE G EXPERIENCE. INCORPORATION
41	(Code:)	(Expenses \$	including grants of \$) (Revenue	;)
		(Expenses \$	including grants of \$) (Revenue \$	
4 0	Other program service (Expenses \$	ces. (Describe in Schedu incli	le O.) uding grants of \$) (Revenue \$)
4 6	Total program service		9, 931, 321.) (i tovolide y	
BAA	1 -9		TEEA0102L 10/12/15		Form 990 (2015)

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Par	t IV Checklist of Required Schedules 45–364398	4		age 3
ı aı	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)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		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? If 'Yes,' complete Schedule C, Part II.	4		Х
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 Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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? If 'Yes,' complete Schedule D, Part I.	6		Х
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>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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>	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
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.			
ā	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		Х
ŀ	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? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
(: 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? If 'Yes,' complete Schedule D, Part VIII.	11 c	X	
C	I 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? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
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>	11 f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a	Х	
k	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X	
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ŀ	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? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
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? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
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>	16		Х
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).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'			

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Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H	20a		Х
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ı	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ı	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
ä	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
I	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
ı	of If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X	
RΔΔ		Form	990 (2015

TEEA0104L 10/12/15

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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			
1. Enter the number reported in Pox 2 of Form 1006 Enter 0, if not applicable 2.3.		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable1 a287b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable1 b0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Χ	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 276			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule 0</i>	3 b		
4 a 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)?	4 a		Х
b If 'Yes,' enter the name of the foreign country: ►			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		21
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7.0		
Form 8282?	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
· ·			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
BAA TEEA0105L 10/12/15	Form	990 (2015

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Pa	rt VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b be	low,	and	for
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang Schedule O. See instructions.	ges II	7	
	Check if Schedule O contains a response or note to any line in this Part VI.			. X
Se	ction A. Governing Body and Management			
	Enter the number of cuting according to the necessity back of the decision of the form		Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year			
	b Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? SEE SCH 0	4	Х	
5		5		Х
6	Did the organization have members or stockholders?	6		Χ
7	a 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?	7 a		Х
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8 a	Χ	
	b Each committee with authority to act on behalf of the governing body?	8 b		X
	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х
<u>Se</u>	ction B. Policies (This Section B requests information about policies not required by the Internal Re	venu		
10	a Did the organization have local chapters, branches, or affiliates?	10 a	Yes	No X
10	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their			Λ
11	operations are consistent with the organization's exempt purposes?	10 b 11 a		X
11	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O	па		Λ
12	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Χ	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE. SCHEDULE. O	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Χ	
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?			
	a The organization's CEO, Executive Director, or top management officialSEE.SCHEDULEO	15 a	Χ	
	b Other officers or key employees of the organization	15 b		X
16	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its	16 a		X
	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?	16 b		
	ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► CA			
18				 able
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	the public during the tax year. SEE SCHEDULE O	le to		
20				
	EDHIVE 330 A STREET SUITE 189 SAN DIEGO CA 92101 (855) 433-4483			

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (do not check more than one box, unless person is both an officer and a (B) (F) Name and Title Reportable compensation from Reportable Estimated Average hours director/trustee) compensation from amount of other compensation from the organization the organization (W-2/1099-MISC) Officer employee (W-2/1099-MISC) nstitutional trustee ndividual lighest compensated ormer (list any employee hours for and related related organizations organiza tions l trustee helow dotted line) (1) PETER MCDONALD 2 0 CHAIRMAN Χ Χ 0 0 0. (2) MIRIAM COHEN 2 0 **SECRETARY** Χ Χ 0 0 0. (3) JOE CUMMINGS 2 0. TRUSTEE 0 Χ 0 0 (4) MATT KOBLICH 2 TRUSTEE 0 Χ 0 0 0. 2 (5) KATHY GRANGER TREASURER 0 Χ Χ 0 0 0. 40 **(6)** J.J. LEWIS PRESIDENT & CEO 0 0 Χ 40,000 0. JULIE TROLETTI 40 DIRECTOR 0. 4,822. 0 Χ 107,931 (8) SEAN MCMANUS 0 0 FORMER CEO Χ 169,708 0 0. (9) ELIZABETH OBERREITER 40 INTERIM CEO 0 Χ 128,964 0 190. (10) (11)(12)(13)(14)

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Form 990 (2015) COMPASS CHARTER SCHOOLS									45-3643			ge 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employ								nployee	S (conti	nued)		
	(B)			(C	-							
(A) Name and title	Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)			an e)	(D) (E) Reportable compensation from the organization related organization		n amo	(F) Estimated ount of ot opensation	her		
	(list any hours for related organiza - tions below	Individual trus or director	Institutional trustee	Officer	Key employee	Highest compensated employee	-ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	or	from the ganization drelated ganization	n d
	dotted line)	itee	ustee			nsated						
<u>(15)</u>												
<u>(16)</u>												
(17)												
(18)												
(19)												
(20)												-
(21)												-
(22)												
(23)												
(24)												
(25)												
1 b Sub-total.	.					▶	•	446,603.		0.	5,0)12.
c Total from continuation sheets to Part VII, Secti								0.		0.		0.
d Total (add lines 1b and 1c)								446,603.		0.)12.
2 Total number of individuals (including but not limited	to those	listed	abov	/e) v	who	receive	ı be	more than \$100,00	0 of reportable co	ompensatio	n	
from the organization > 3											Yes	No
2 Did the conscionation that any favores officer disco			1					:	to di amambana a		res	NO
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc										3	Х	
4 For any individual listed on line 1a, is the sum o the organization and related organizations greater	er than \$1	50,00	00'?	If 'Y	′es'	compl	lete	e Schedule J for			.,,	
such individual5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes											X	X
Section B. Independent Contractors	s, comple	16 30	neu	uic	5 10	Jucii	ρ	213011		3		Λ
Complete this table for your five highest comper compensation from the organization. Report comper	sated ind	epen	dent	COr	ntrac	ctors t	hat	t received more t	han \$100,000 of	/ear		
(A) Name and business add		uie c	aleric	uai	yeai	chang	y w	(B) Description			C) ensatio	on
EDHIVE, INC. 330 A STREET SUITE 189 SAN DIEGO, CA 92101 BUSINESS SERVICES 899,284.												
							552,0					
·								197,5				
FUEL EDUCATION LLC 2300 CORPORATE PARK DRI								ONLINE CURRIC			532,6	
COMMUNITY COLLABORATIVE VIRTUAL SCHOOL 309	61 HWY	79 S.	AN 1	DIE	GO,		92	ONLINE CURRIC	ULUM		579,6	
2 Total number of independent contractors (including		ited to	tho	se I	isted	l above	e) v	who received more	than			
\$100,000 of compensation from the organization											000	(0015)
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Par	t VIII Statement of Revenue				
	Check if Schedule O contains a response or note to any				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f Business Code	16,147,441.			
Program Service Revenue	b c d e f All other program service revenue g Total. Add lines 2a-2f				
<u>a</u>	 3 Investment income (including dividends, interest and other similar amounts)	15,543.			15,543.
	(i) Real (ii) Personal 6 a Gross rents				
	b Less: cost or other basis and sales expenses				
Other Revenue	d Net gain or (loss)				
0	9 a Gross income from gaming activities. See Part IV, line 19				
	10 a Gross sales of inventory, less returns and allowances				
	Miscellaneous Revenue Business Code	28,288.	28,288.		
BAA	e Total. Add lines 11a-11d	28,288. 16,191,272.	28,288.	0.	15,543. Form 990 (2015)

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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 re	esponse or note to any	line in this Part IX		Х						
	not include amounts reported on lines 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	trustees, and key employees	40,000.	0.	40,000.	0.						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.						
7	Other salaries and wages	5,413,634.	3,766,967.	1,646,667.							
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	439,597.	303,641.	135,956.							
9	Other employee benefits	459,031.	317,065.	141,966.							
10	Payroll taxes	304,343.	210,218.	94,125.							
11	` ' ' ' '										
	a Management										
	b Legal	78,051.	35,495.	42,556.							
	c Accountingd d Lobbying	40,806.	28,186.	12,620.							
	e Professional fundraising services. See Part IV, line 17										
	f Investment management fees										
	Other. (If line 11g amount exceeds 10% of line 25, column	2 240 501	1 261 052	1 000 520							
12	(A) amount, list line 11g expenses on Schedule 0.5CH. Q Advertising and promotion	2,349,581. 62,121.	1,261,052. 42,909.	1,088,529. 19,212.							
13	Office expenses	36,449.	25,176.	11,273.							
14	Information technology	86,348.	59,643.	26,705.							
15	Royalties	00,010.	03,0101	20,1001							
16	Occupancy	790,067.	545,720.	244,347.							
17	Travel	47,288.	32,663.	14,625.							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	115,491.	79,773.	35,718.							
20	Interest	5,068.		5,068.							
21	Payments to affiliates										
22 23	Depreciation, depletion, and amortization	23,164.	16,000.	7,164.							
24	_	23,104.	10,000.	7,104.							
i	BOOKS AND SUPPLIES	4,082,711.	3,203,817.	878,894.							
	DUES AND MEMBERSHIPS	4,338.	2,996.	1,342.							
	:										
	d										
	All other expenses.	14 270 000	0 021 221	A AAC 7C7							
	Total functional expenses. Add lines 1 through 24e	14,378,088.	9,931,321.	4,446,767.	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 ► ☐ if following SOP 98-2 (ASC 958-720).										

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	(2015) COMPASS CHARTER SCHOOLS	45-	36439	84 Page II
Part X				
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing.	6,727,553.	1	13,357,320.
2	Savings and temporary cash investments	2,374,716.	2	3,109,031
3	Pledges and grants receivable, net	,	3	
4	Accounts receivable, net	7,061,380.	4	933,524
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	,
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
<i>φ</i> 7	Notes and loans receivable, net.		7	
Assets 8 8 8	Inventories for sale or use		8	
A S	Prepaid expenses and deferred charges		9	
	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
l l	Less: accumulated depreciation. 10b		10 c	
	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	5,000,000
14	Intangible assets		14	3,000,000
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34).	16,163,649.	16	22,399,875.
17	Accounts payable and accrued expenses	1,434,768.	17	6,944,726.
18	Grants payable	1,101,700.	18	0/311/720
19	Deferred revenue		19	62,400.
20	Tax-exempt bond liabilities		20	,
တ္တ 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities 52	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	1,149,316.	24	
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.	1,110,010.	25	
26	Total liabilities. Add lines 17 through 25.	2,584,084.	26	7,007,126.
s မ	Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
<u>E</u> 27	Unrestricted net assets	13,549,279.	27	15,188,287.
<u>명</u> 28	Temporarily restricted net assets.	30,286.	28	204,462.
<u>9</u> 29	Permanently restricted net assets		29	
Net Assets or Fund Balances 22 28 33 33	Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
<u>v</u> 30	Capital stock or trust principal, or current funds		30	
8 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
X 32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	13,579,565.	33	15,392,749.
34	Total liabilities and net assets/fund balances	16,163,649.	34	22,399,875.
BAA				Form 990 (2015

Forr	m 990 (2015) COMPASS CHARTER SCHOOLS 45-:	3643984		Pa	ige 12
Pa	rt 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)		16,1		
2	Total expenses (must equal Part IX, column (A), line 25).		14,3		
3	Revenue less expenses. Subtract line 2 from line 1	3			L84.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,5		
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 in Schedule O)	9			0.
10					
	column (B))	10	15,3	92,7	149.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
	in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe	ed on a			
	separate basis, consolidated basis, or both:	a on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
	b Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa	te			
	basis, consolidated basis, or both:				
	X 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,				l
	review, or compilation of its financial statements and selection of an independent accountant?		2 c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single				
•	Audit Act and OMB Circular A-133?		3 a		Χ
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	it			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		l

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Form **990** (2015)

SCHEDULE A (Form 990 or 990-EZ)

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number COMPASS CHARTER SCHOOLS (FORMERLY ACADEMY OF ARTS AND SCIENCES) 45-3643984 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 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 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.) 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 9 June 30, 1975. See **section 509(a)(2).** (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g 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. 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. 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. 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. 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. g Provide the following information about the supported organization(s). (ii) EIN (v) Amount of monetary (i) Name of supported (iv) Is the organization listed in your governing (vi) Amount of other (iii) Type of organization (described on lines 1-9 above (see instructions)) organization support (see instructions) support (see instructions) document? Yes No (A) (B) (C) (D) (E) Total

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

Schedule A (Form 990 or 990-EZ) 2015 COMPASS CHARTER SCHOOLS

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

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

Sec	tion A. Public Support		Ī	1	1	T T	
begi	endar year (or fiscal year Inning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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						
Sec	tion B. Total Support		Г	T	1	Г	
	ndar year (or fiscal year nning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 activ	ities, etc. (see ins	structions)			12	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20						<u>%</u> %
	Public support percentage from					LL	
16 a	a 33-1/3% support test — 2015. If and stop here. The organization	the organization qualifies as a pul	did not check the blicly supported o	box on line 13, a rganization	nd line 14 is 33-1.	/3% or more, check	k this box
k	33-1/3% support test — 2014. If the and stop here. The organization						
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	r e. Explain in Part '	VI how
	10%-facts-and-circumstances to organization meets the 'facts-and organization meets the 'facts-and-circumstances to organization meets the 'facts-and-circumstances to organization meets the 'facts-and-circumstances to organization meets the 'facts-and-circumstances the 'facts-and-circumsta	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop he r a publicly support	r e. Explain in Part 'ed organization	VI how the►
18	Private foundation. If the organize	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 1/b, check th	is box and see inst	ructions
BAA					Sch	nedule A (Form 990	or 990-EZ) 2015

Schedule **A** (Form 990 or 990-EZ) 2015

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Part III S	Support Schedule	for Organizations [Described in Section 509(a)(2)
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(Camaniata anivity valv	كورك مصنا ممينيمما مطاحات مياممطم	David Law if the avecani-ation i	المسامين بالمنافين أما أما أما أما المانية	II If the evereinsties faile
(Complete only II you t	checked the box on line 9 of I	Part i or ii the organization i	ialled to quality under Part	II. II the organization fails
		-	' '	· ·
to quality under the to	ests listed below, please co	omplete Part II.)		

C	tion A. Dublic Company	, ,	'	,			
	tion A. Public Support	(=> 0011	/b> 0010	(a) 2012	(a) 0014	(-) 0015	(A T-1-1
calend 1	dar year (or fiscal year beginning in) Gifts grants contributions	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include						
	received. (Do not include any 'unusual grants.')						
2	Gross receipts from admis-				+		
	sions, 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						
	Total. Add lines 1 through 5						
7 8	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.)						
<u>Sec</u>	tion B. Total Support				_		
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from						
	similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include						
_	gain or loss from the sale of						
	capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9.						
	10c, 11, and 12.)						
14	First five years. If the Form 990	is for the organiz	ation's first, secor	nd, third, fourth,	or fifth tax year as	a section 501(c)(3	3)
	organization, check this box and						
	tion C. Computation of Pul			. 10!:	`	1 1	<u> </u>
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •		•		%
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv					1 1	
17		-		-		-	%
	Investment income percentage for						0/0
19 a	33-1/3% support tests — 2015. If is not more than 33-1/3%, check	the organization	did not check the	box on line 14, ization qualifies	and line 15 is mor	e than 33-1/3%, ar	nd line 17 ► □
۲	33-1/3% support tests – 2014. If				. , , , , ,	•	
	line 18 is not more than 33-1/3%						
			-				_
20	Private foundation. If the organize	Zation did not che	JOIN OF BOX OFF HITO	, , , , , o, , , , , , , , , , , , , ,	orioon tino box and	. 500 11150140010115	

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Schedule **A** (Form 990 or 990-EZ) 2015

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Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	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.	1		
2	509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2)	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3с		
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and			
	if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that			
	all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) 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)	5a		
	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?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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 filling organization's supported organizations? If 'Yes,' provide detail in Part VI	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons			
	as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	9a		
	b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI</i>	9b		
	c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		
10	a 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 10b below</i>	10a		
	b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine			
	whether the organization had excess business holdings.)	10b		

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Schedule A (Form 990 or 990-EZ) 2015 COMPASS CHARTER SCHOOLS 45-3643984 Page 5 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 in (b) and (c) below, the governing body of a supported organization? 11a **b** A family member of a person described in (a) above?..... 11b c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI..... 11c Section B. Type I Supporting Organizations Yes No Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year ... 1 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the 2 supporting organization. Section C. Type II Supporting Organizations Yes No 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)? If 'No,' describe in **Part VI** how control or management of the 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations No Yes 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 1 organization's governing documents in effect on the date of notification, to the extent not previously provided?. Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played 3 in this regard........ Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions): The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. Yes No **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? 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 2a substantially all of its activities..... b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the 2b organization's involvement 3 Parent of Supported Organizations. Answer (a) and (b) 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? Provide details in Part VI..... За **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard......

Schedule **A** (Form 990 or 990-EZ) 2015 COMPASS CHARTER SCHOOLS 45-3643984

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Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No other Type III non-functionally integrated supporting organizations must complete	ovembe Section	r 20, 1970. See instructi ons A through E.	ons. All
Sec	tion 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		
Sec	tion 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):			
	Average monthly value of securities.	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
C	Total (add lines 1a, 1b, and 1c)	1d		
•	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 1-1/2% 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 .035.	6		
7	Recoveries of prior-year distributions.	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 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	Check here if the current year is the organization's first as a non-functionally-inte (see instructions).	grated	Type III supporting org	ganization
BAA			Schedule A (For	m 990 or 990-EZ) 2015

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Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	ipporting Organiza	ations (continued)	
Sec	tion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pur	rposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity.			
3	Administrative expenses paid to accomplish exempt purposes of su			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in $\textbf{Part VI}).$ See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2016. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
С	Excess from 2013			
d	Excess from 2014			
e	Excess from 2015.			

BAA

Schedule A (Form 990 or 990-EZ) 2015

COMPASS CHARTER SCHOOLS

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

SCHEDULE D (Form 990)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

	COMPASS CHARTER SCHOOLS (FORMERLY ACADEMY OF ARTS A	ND SCIENCES)		45 0640004
Pai	1 Organizations Maintaining Dono	r Advised Funds or Other Similar	r Funds or Acc	45-3643984 counts.
	Complete if the organization answ		1	
	Total complexes at and of const	(a) Donor advised funds	(b) F	unds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4				
5	Did the organization inform all donors and don are the organization's property, subject to the	organization's exclusive legal control?		Yes No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	of the donor or donor advisor, or for any	other purpose cor	nferring
Dai	t II Conservation Easements.			
ı aı	Complete if the organization answ	vered 'Yes' on Form 990, Part IV,	line 7.	
1	Purpose(s) of conservation easements held by			_
	Preservation of land for public use (e.g., re	ecreation or education) Preserva	tion of a historical	ly important land area
	Protection of natural habitat	Preserva	ation of a certified	historic structure
	Preservation of open space			
2		eld a qualified conservation contribution in the	ne form of a conserv	vation easement on the
	last day of the tax year.			
	Total according of according to the contract of the contract o			leld at the End of the Tax Year
	a Total number of conservation easements			
	b Total acreage restricted by conservation easer c Number of conservation easements on a certif			
		` ,	-	_
(d Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/1//06, and not on a	historic 2 d	
3	Number of conservation easements modified, tran tax year ►	sferred, released, extinguished, or terminate	d by the organization	on during the
4	Number of states where property subject to conse	rvation easement is located >		
5	Does the organization have a written policy requand enforcement of the conservation easement			
6	Staff and volunteer hours devoted to monitoring, in	nspecting, handling of violations, and enforci	ing conservation eas	sements during the year
7	Amount of expenses incurred in monitoring, inspe ▶\$	cting, handling of violations, and enforcing c	onservation easeme	ents during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements	of section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote t	conservation easements in its revenue and	expense statement,	and balance sheet, and
_	conservation easements.	· · · · · · · · · · · · · · · · · · ·	01	·!lass A and also
Pai	Organizations Maintaining Collection Complete if the organization answ	vered 'Yes' on Form 990, Part IV,	s, or Other Sin line 8.	illar Assets.
1 :	a If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	ld for public exhibition, education, or researc	ch in furtherance of	nt and balance sheet works of public service, provide,
ı	b If the organization elected, as permitted under historical treasures, or other similar assets held fo following amounts relating to these items:	r public exhibition, education, or research in	furtherance of publ	ic service, provide the
	(i) Revenue included on Form 990, Part VIII,			
^	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, hamounts required to be reported under SFAS	istorical treasures, or other similar assets for I 16 (ASC 958) relating to these items:	r financial gain, prov	vide the following
	a Revenue included on Form 990, Part VIII, line			
	b Assets included in Form 990, Part X			▶\$

TEEA3301L 06/03/15

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

Schedule **D** (Form 990) 2015

Schedule D (Form 990) 2015 COMPASS CHARTER SCHOOLS 45-3643984 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs Scholarly research Other h Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets Yes to be sold to raise funds rather than to be maintained as part of the organization's collection?..... 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. 1 a 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..... 1 c **d** Additions during the year..... 1 d e Distributions during the year..... 1 e 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?..... No **b** If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. **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 1 a Beginning of year balance. **b** Contributions..... c Net investment earnings, gains, **d** Grants or scholarships e Other expenditures for facilities **f** Administrative expenses **q** 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 Temporarily restricted 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 Yes Nο organization by: (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? 3b 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
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part X, o	column (B), line 10c.)		0.

BAA

Schedule D (Form 990) 2015

Part VII Investments — Other Securities.		N/A	
Complete if the organization answered (a) Description of security or category (including name of security)	(b) Book value	0, Part IV, line 11b. See Form 9 (c) Method of valuation: Cost or end-o	
(1) Financial derivatives	(b) book value	(C) Method of Valuation. Cost of end-c	Di-year market value
(2) Closely-held equity interests.			
(3) Other			
(A) (B)			
(C)			
(D)			
(D) (E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶	-		
Part VIII Investments — Program Related. Complete if the organization answered			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	
(1) CERTIFICATES OF DEPOSIT	5,000,000.	END OF YEAR MARKET VALUE	Ε
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
<u>(9)</u> (10)			
	5,000,000.		
TOTAL (COLUMN (D) MUST EQUAL FORM 990. PART X. COLUMN (B) line 13.) 🟲	1 3,000,000.		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.	N/A		
Part IX Other Assets. Complete if the organization answered	N/I d 'Yes' on Form 99		
Part IX Other Assets. Complete if the organization answered (a) De	N/A		990, Part X, line 15.
Part IX Other Assets. Complete if the organization answered (a) De	N/I d 'Yes' on Form 99		
Complete if the organization answered (1) (2)	N/I d 'Yes' on Form 99		
Complete if the organization answered (a) De (1) (2) (3)	N/I d 'Yes' on Form 99		
Complete if the organization answered (1) (2)	N/I d 'Yes' on Form 99		
Complete if the organization answered (a) De (1) (2) (3) (4)	N/I d 'Yes' on Form 99		
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7)	N/I d 'Yes' on Form 99		
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8)	N/I d 'Yes' on Form 99		
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9)	N/I d 'Yes' on Form 99		
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	N/R d 'Yes' on Form 99 escription	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (column (d) must equal Form 990, Part X, column (d)	N/R d 'Yes' on Form 99 escription	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.	N/Rd 'Yes' on Form 99 escription	Ō, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Complete if the organization answered 'Yes' on Factoria (Complete if the organization answered 'Yes' on Factoria (Column (b) Part X)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities.	N/Rd 'Yes' on Form 99 escription	0, Part IV, line 11d. See Form 9	(b) Book value
Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on form (a) Description of liability	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (Part X) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (Part X) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability (1) Federal income taxes (2) (3) (4)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Part IX Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (Part X) Complete if the organization answered 'Yes' on Fermal (Part X) (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on Financial income taxes (2) (3) (4) (5) (6)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes (2) (3) (4) (5) (6) (7)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on Financial income taxes (2) (3) (4) (5) (6) (7) (8)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on Financial income taxes (2) (3) (4) (5) (6) (7) (8) (9)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) Part X Other Liabilities. Complete if the organization answered 'Yes' on Final Complete if the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	N/A 'Yes' on Form 99 scription (B) line 15.)	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (part X) Complete if the organization answered 'Yes' on Factorial income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	N/Ad 'Yes' on Form 99 scription B) line 15.) Form 990, Part IV, line 1 (b) Book value	0, Part IV, line 11d. See Form 9	(b) Book value
Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on form (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	N/Ad 'Yes' on Form 99 scription B) line 15.) Form 990, Part IV, line 1 (b) Book value	0, Part IV, line 11d. See Form 9 1e or 11f. See Form 990, Part X, line 25	(b) Book value

BAA TEEA3303L 06/03/15 Schedule **D** (Form 990) 2015

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	1
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	16,191,272.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	16,191,272.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	16,191,272.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	n.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
complete if the organization answered Tes of Form 550, Fait IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	14,378,088.
	1	14,378,088.
1 Total expenses and losses per audited financial statements	1	14,378,088.
 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 	1	14,378,088.
1 Total expenses and losses per audited financial statements	1	14,378,088.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a b Prior year adjustments 2b	1	14,378,088.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a b Prior year adjustments 2b c Other losses 2c	1 2 e	14,378,088.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	-	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2 e	14,378,088.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 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. 4 a	2 e	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) 4 b	2 e	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b.	2e 3	14,378,088.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) 4 b	2e 3	

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 - FIN 48 FOOTNOTE

MANAGEMENT BELIEVES ALL OF ITS SIGNIFICANT TAX POSITIONS WOULD BE UPHELD UNDER EXAMINIATION; THEREFORE, NO PROVISION FOR INCOME TAX HAS BEEN RECORDED.

BAA Schedule **D** (Form 990) 2015

TEEA3304L 06/03/15

SCHEDULE E (Form 990 or 990-EZ)

Schools

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ. OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

45-3643984

COMPASS CHARTER SCHOOLS

Part I

r ai	· ·			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy 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		Λ	
	need more space, use Part II	3	Χ	
	THE ORGANIZATION'S RACIALLY NONDISCRIMINATORY POLICY IS DOCUMENTED WITHIN THE CHARTER PETITIONS FOR EACH OF ITS PUBLIC CHARTER SCHOOLS. THE POLICY			
	IS ALSO PRESENTED ON THE ORGANIZATION'S WEBSITE.			
4	Does the organization maintain the following?			
á	Records indicating the racial composition of the student body, faculty, and administrative staff?	4 a	Х	
ŀ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4 b		Х
(Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4 c	Х	
(Copies of all material used by the organization or on its behalf to solicit contributions?	4 d	Χ	
	If you answered 'No' to any of the above, please explain. If you need more space, use Part II.			
	THE ORGANIZATION OPERATES PUBLIC CHARTER SCHOOLS THAT ARE TUITION-FREE; THEREFORE, DOCUMENTATION WITH RESPECT TO SCHOLARSHIPS AND FINANCIAL			
5	ASSISSTANCE IS NOT APPLICABLE. Does the organization discriminate by race in any way with respect to:			
	a Students' rights or privileges?	5 a		X
ŀ	Admissions policies?	5 b		X
	Employment of faculty or administrative staff?	5 c		X
	Scholarships or other financial assistance?	5 d		X
	Educational policies?	5 e		X
f	Use of facilities?	5 f		X
Ġ	3 Athletic programs?	5 g		X
ŀ	Other extracurricular activities?	5 h		X
6 a	Does the organization receive any financial aid or assistance from a governmental agency?	6 a	Х	
	Has the organization's right to such aid ever been revoked or suspended?	6 b		Χ
	If you answered 'Yes' on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' explain on Part II	7	Х	
	For Paramonic Part II.	-	1	

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

Schedule E (Form 990 or 990-EZ) (2015)

Schedule E (Form 990 or 990-EZ) (2015) COMPASS CHARTER SCHOOLS

45-3643984

Page 2

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).

SCHEDULE E, LINE 6 - EXPLANATION OF AID OR ASSISTANCE FROM GOVERNMENTAL AGENCY

AS AN ORGANIZATION OPERATING PUBLIC CHARTER SCHOOLS, THE ORGANIZATION RECEIVES FUNDING FROM THE U.S. AND CALIFORNIA DEPARTMENTS OF EDUCATION, ALONG WITH THE COUNTIES OF SAN DIEGO, VENTURA, SONOMA, FRESNO, AND LOS ANGELES, CALIFORNIA.

Powered by BoardOnTrack

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.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

COMPASS CHARTER SCHOOLS

Employer identification number 45-3643984

Pai	rt I Questions Regarding Compensation			
			Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ŀ	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	1.		
	reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		
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 in line 1a?	2		
3	Indicate which, if any, of the following the filing 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.			
	Compensation committee X Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations X 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:			
á	a Receive a severance payment or change-of-control payment?	4 a		Х
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4 b		Χ
(c Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		X
	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?	5 a		Х
ŀ	b Any related organization?	5 b		Χ
	If 'Yes' to 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?	6 a		Χ
ŀ	b Any related organization?	6 b		Х
	If 'Yes' on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.	7		Х
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)?	8		Х
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			21
	section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 COMPASS CHARTER SCHOOLS

45-3643984

Page 2

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 are not 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.

		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	40.5	(5) N	(E) T (
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable 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)	169,708.	0.	0.	0.	0.	169,708.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	128,964.	0.	0.	0.	190.	129,154.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i) _							
	(ii)							
	(i) (ii)		 		 			
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Powered by BoardOnTrack

39 of 61

Schedule J (Form 990) 2015 COMPASS CHARTER SCHOOLS

45-3643984

Page 3

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.

BAA Schedule J (Form 990) 2015

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COMPASS CHARTER SCHOOLS (FORMERLY ACADEMY OF ARTS AND SCIENCES)

Employer identification number 45-3643984

FORM 990, PART III, LINE 3 - CEASED CONDUCTING OR SIGNIFICANT CHANGES TO SERVICES

THE ORGANIZATION PREVIOUSLY OPERATED FIFTEEN (15) PUBLIC CHARTER SCHOOLS DURING THE 2014-15 FISCAL YEAR. FIVE (5) SCHOOLS WERE CLOSED EFFECTIVE JUNE 30, 2015 LEAVING ONLY TEN (10) SCHOOLS OPERATING DURING 2015-16.

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS

EFFECTIVE FEBRUARY 8, 2017, THE ORGANIZATION FILED RESTATED ARTICLES OF INCORPORATION TO FORMALLY CHANGE THE NAME OF THE CORPORATION TO COMPASS CHARTER SCHOOLS.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

A DRAFT COPY OF THE FORM 990 TAX RETURN IS PROVIDED TO THE PRESIDENT & CEO AND THE BUSINESS SERVICES PROVIDER FOR REVIEW AND APPROVAL. THE FINALZIED COPY OF THE FORM 990 IS DISTRIBUTED TO ALL BOARD MEMBERS AFTER FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY AND A STATEMENT OF ECONOMIC INTEREST FILING IS PERFORMED ANNUALLY FOR ALL EMPLOYEES AND GOVERNING BOARD MEMBERS.

FORM 990, PART VI. LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE GOVERNING BOARD REVIEWS AND APPROVES THE COMPENSATION OF THE PRESIDENT & CEO AND DOCUMENTS THE AGREEMENT WITHIN AN AT-WILL EMPLOYMENT CONTRACT.

FORM 990, PART VI. LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST EITHER IN PERSON OR IN WRITING.

FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUND- RAISING
BUSINESS SERVICES PROVIDER DISTRICT OVERSIGHT FEES	1,003,541. 390,022.	693,172. 47,079.	310,369. 342,943.	
OTHER OPERATING EXPENSES	383,782.		383,782.	000 000 E7) (001E)

Name of the organization COMPASS CHARTER SCHOOLS	Employer identification number
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FORM 990, PART IX, LINE 11G (CONTINUED) OTHER FEES FOR SERVICES

		(A)	(B) PROGRAM	(C) MANAGEMENT	(D) FUND-
		TOTAL	SERVICES	& GENERAL	RAISING
PAYROLL EXPENSES PROFESSIONAL CONSULTANTS SPECIAL EDUCATION SERVICES STUDENT ASSESSMENT		18,921. 312,579. 222,319. 18,417.	13,069. 266,996. 222,319. 18,417.	5,852. 45,583.	
	TOTAL	\$ 2,349,581.	\$ 1,261,052.	\$ 1,088,529.	\$ 0.

Coversheet

Review and Discussion of the April Financials

Section: VII. NEW BUSINESS

Item: B. Review and Discussion of the April Financials

Purpose: Discuss
Submitted by: Scott Warner

Related Material: CCS - BS - April 17.pdf

CCS - PL - April 17.pdf



Balance Sheet Detail

Compass Charter Schools

May 2017

Segment Name	Filter Applied
Object	AII
Restriction	AII
Location	AII

Group Description	Account	Account Description	
Liquidity Ratio			6.9
Assets			
Current Assets			
Cash	9120-010	Cash in Bank(s)	\$2,608,387
Cash	9125-020	Cash in County Treasury Account	\$256,207
Cash	9125-030	Cash in County Treasury Account	\$5,065
Cash	9125-050	Cash in County Treasury Account	\$142,787
Investments	9150-010	Investments	\$3,714,503
Accounts Receivables	9200-010	Accounts Receivables	\$150
Accounts Receivables	9290-020	Due from Grantor Governments	\$1,849
Accounts Receivables	9290-030	Due from Grantor Governments	\$64,707
Accounts Receivables	9290-050	Due from Grantor Governments	\$176,769
Accounts Receivables	9290-060	Due from Grantor Governments	\$165,000
Prepaid Expenses	9330-010	Prepaid Expenses	\$77,934
Total Current Assets			\$7,213,357
Fixed Assets			
Total Fixed Assets			-
Other Assets			
Total Other Assets			-
Total Assets			\$7,213,357



Balance Sheet Detail

Compass Charter Schools

May 2017

Liabilities And Net Assets			
Current Liabilities			
Accounts Payable	9590-020	Due to Grantor Governments	\$125,721
Accounts Payable	9590-040	Due to Grantor Governments	\$861,408
Accounts Payable	9590-060	Due to Grantor Governments	\$35,753
Accrued Salaries, Payroll Taxes, Postemployment Benefits	9503-010	Accrued STRS	\$16,583
Deposits held on behalf of other employees	9660-010	Voluntary Deductions	\$4,816
Total Current Liabilities			\$1,044,281
Long Term Liabilities			
Loans Payable	9620-010	Security Deposit Payable - ILead	\$25,000
Total Long Term Liabilities			\$25,000
Total Liabilities			\$1,069,281
Net Assets			
Unrestricted Net Assets	9780-020-15	Temporarily Restricted Net Assets	\$12,172
Unrestricted Net Assets	9780-030-15	Temporarily Restricted Net Assets	\$9,679
Unrestricted Net Assets	9780-040-15	Temporarily Restricted Net Assets	\$12,612
Unrestricted Net Assets	9780-050-15	Temporarily Restricted Net Assets	\$13,639
Unrestricted Net Assets	9780-060-15	Temporarily Restricted Net Assets	\$26,104
Unrestricted Net Assets	9780-060-39	Temporarily Restricted Net Assets	\$15,226
Unrestricted Net Assets	9790-010	Undesignated Fund Balance	\$12,100,904
Unrestricted Net Assets	9790-020	Undesignated Fund Balance	\$365,052
Unrestricted Net Assets	9790-030	Undesignated Fund Balance	\$483,355
Unrestricted Net Assets	9790-040	Undesignated Fund Balance	\$740,750
Unrestricted Net Assets	9790-050	Undesignated Fund Balance	\$122,942
Unrestricted Net Assets	9790-060	Undesignated Fund Balance	\$1,492,283
Profit/Loss YTD			(\$9,250,642)
Total Net Assets			\$6,144,077



Balance Sheet Detail

Compass Charter Schools

May 2017

Total Liabilities And Net Assets		\$7,213,357



Year to Date Actual to Budget Detail

Compass Charter Schools

April 2017 - April 2017

Segment Name	Filter Applied
Object	All
Restriction	All
Location	All

		April			July - Ap	ril Summary	20		16-2017	
Account Code	Description	Actual	Budget	Actual	Budget	Variance \$	Variance %	Total Budget	Remaining Budget	
8011	LCFF Revenue			-	-	-	0.0 %	-	-	
8019	Prior Year Income/Adjustments			\$4,331	-	\$4,331	0.0 %	-	(\$4,331)	
8096	Charter Schools Funding In-Lieu of Property Taxes			\$421,114	-	\$421,114	0.0 %	-	(\$421,114)	
Revenue Limit				\$425,445	ı	\$425,445	0.0 %	1	(\$425,445)	
8299	Prior Year Federal Income			\$46,250	ı	\$46,250	0.0 %	ı	(\$46,250)	
Federal Revenue				\$46,250	-	\$46,250	0.0 %	-	(\$46,250)	
8550	Mandated Block Grant	\$24,740	\$3,836	\$253,770	\$26,851	\$226,919	845.1 %	\$38,359	(\$215,411)	
8560	State Lottery Revenue			\$26,692	-	\$26,692	0.0 %	-	(\$26,692)	
8590	All Other State Revenues			\$187,582	-	\$187,582	0.0 %	-	(\$187,582)	
8594	Prop 39 Clean Energy Act			(\$45,147)	-	(\$45,147)	0.0 %	-	\$45,147	
8599	Prior Year State Income	\$17,830	-	\$37,840	1	\$37,840	0.0 %	1	(\$37,840)	
Other State Revenue		\$42,570	\$3,836	\$460,737	\$26,851	\$433,886	1,615.9 %	\$38,359	(\$422,379)	
8650	Rental Income	\$39,111	\$35,600	\$362,019	\$284,800	\$77,219	27.1 %	\$356,000	(\$6,019)	
8660	Interest Income	\$9,801	-	\$26,750	ı	\$26,750	0.0 %	ı	(\$26,750)	
8699	All Other Local Revenue	\$4,820	-	\$115,368	-	\$115,368	0.0 %	-	(\$115,368)	
8792	SPED State/Other Transfers of Apportionments from County	-	\$71,977	(\$176,205)	\$575,817	(\$752,022)	-130.6 %	\$719,771	\$895,976	
8793	SPED State/Other Transfers of Apportionments from JPA	(\$5,328)	-	(\$151,863)	-	(\$151,863)	0.0 %	-	\$151,863	
8799	Other Transfers In			\$9,805,452	1	\$9,805,452	0.0 %	-	(\$9,805,452)	
Local Revenue		\$48,403	\$107,577	\$9,981,521	\$860,617	\$9,120,904	1,059.8 %	\$1,075,771	(\$8,905,750)	
Total Revenue		\$90,973	\$111,413	\$10,913,953	\$887,468	\$10,026,485	1,129.8 %	\$1,114,130	(\$9,799,823)	
1100	Teachers' Salaries	\$241,233	\$263,227	\$2,199,332	\$2,237,431	\$38,099	1.7 %	\$2,632,272	\$432,940	
1200	Certificated Pupil Support Salaries	\$62,508	\$80,062	\$514,509	\$680,524	\$166,015	24.4 %	\$800,616	\$286,107	
1300	Certificated Pupil Support Salaries	\$28,439	\$43,015	\$344,654	\$426,053	\$81,400	19.1 %	\$512,083	\$167,430	
1900	Other Certificated Salaries	-	-	\$33,600	-	(\$33,600)	0.0 %	-	(\$33,600)	
Certificated Salaries		\$332,179	\$386,304	\$3,092,094	\$3,344,008	\$251,914	7.5 %	\$3,944,971	\$852,877	
2200	Classified Support Salaries (Maintenance, Food)	\$52,781	\$82,668	\$579,113	\$702,678	\$123,565	17.6 %	\$826,680	\$247,567	



Year to Date Actual to Budget Detail

Compass Charter Schools

April 2017 - April 2017

17300	ssified Supervisor and Administrator								
Sala	aries	\$40,616	\$42,409	\$302,444	\$420,047	\$117,603	28.0 %	\$504,864	\$202,420
	rical, Technical, and Office Staff aries	\$33,743	\$29,027	\$417,497	\$287,506	(\$129,991)	-45.2 %	\$345,560	(\$71,937)
	er Classified Salaries (Noon and d Sup, etc.)			\$43,008	-	(\$43,008)	0.0 %	-	(\$43,008)
Classified Salaries		\$127,141	\$154,104	\$1,342,062	\$1,410,231	\$68,169	4.8 %	\$1,677,104	\$335,042
13101	te Teachers' Retirement System, cificated positions	\$43,623	\$49,628	\$393,546	\$421,836	\$28,290	6.7 %	\$496,277	\$100,755
3313 OAS	SDI .	\$6,682	\$10,398	\$75,804	\$87,344	\$11,539	13.2 %	\$103,980	\$28,176
3323 Med	dicare	\$6,387	\$8,152	\$61,904	\$68,477	\$6,573	9.6 %	\$81,520	\$19,616
3403 Hea	alth & Welfare Benefits	\$39,249	\$45,403	\$441,069	\$381,385	(\$59,684)	-15.6 %	\$454,030	\$6,875
3503 Stat	te Unemployment Insurance	\$348	\$2,328	\$59,683	\$19,555	(\$40,128)	-205.2 %	\$23,280	(\$36,403)
3603 Wor	rker Compensation Insurance	-	\$8,995	\$25,274	\$75,561	\$50,287	66.6 %	\$89,953	\$64,679
3703 Oth	er Post Employment Benefits			\$950	-	(\$950)	0.0 %	-	(\$950)
3903 Oth	er Employee Benefits	\$4,427	-	\$38,314	-	(\$38,314)	0.0 %	-	(\$38,314)
Employee Benefits		\$100,716	\$124,904	\$1,096,544	\$1,054,157	(\$42,387)	-4.0 %	\$1,249,041	\$144,435
	Total Personnel Expenses	\$560,036	\$665,312	\$5,530,700	\$5,808,396	\$277,696	4.8 %	\$6,871,116	\$1,332,354
4100	proved Textbooks and Core Curricula cerials	\$867,882	-	\$2,650,582	\$3,864,660	\$1,214,078	31.4 %	\$3,864,660	\$1,219,078
4200 Boo	ks and Other Reference Materials	-	\$68,282	\$500	\$682,821	\$682,321	99.9 %	\$682,821	\$682,321
4300 Mat	erials and Supplies	\$6,244	\$2,872	\$31,984	\$25,848	(\$6,137)	-23.7 %	\$28,720	(\$3,265)
4315 Clas	ssroom Materials and Supplies	\$305	-	\$19,819	-	(\$19,819)	0.0 %	-	(\$19,819)
4400 Non	ncapitalized Equipment	\$1,648	\$111	\$15,824	\$996	(\$14,828)	-1,488.3 %	\$1,107	(\$14,717)
4430 Non	ncapitalized Student Equipment	-	\$13,404	\$1,981	\$120,640	\$118,659	98.4 %	\$134,044	\$132,063
Books and Supplies		\$876,080	\$84,669	\$2,720,691	\$4,694,965	\$1,974,275	42.1 %	\$4,711,352	\$1,995,662
5200 Trav	vel and Conferences	\$6,597	\$5,000	\$42,366	\$50,000	\$7,634	15.3 %	\$50,000	\$7,634
5210 Trai	ining and Development Expense	\$6,436	\$15,000	\$139,587	\$150,000	\$10,413	6.9 %	\$150,000	\$10,413
5300 Due	es and Memberships	\$1,424	\$1,000	\$24,172	\$10,000	(\$14,172)	-141.7 %	\$10,000	(\$14,172)
5400 Inst	urance	\$51	-	\$24,412	\$30,885	\$6,473	21.0 %	\$30,885	\$6,473
5500 Ope	eration and Housekeeping Services	\$2,200	\$648	\$7,756	\$5,904	(\$1,852)	-31.4 %	\$7,200	(\$556)
5501 Utili	ities	-	\$999	\$5,334	\$9,105	\$3,771	41.4 %	\$11,104	\$5,596
5505 Stu	dent Transportation/Field Trips	-	\$6,750	-	\$61,500	\$61,500	100.0 %	\$75,000	\$75,000
5600 Spa	ice Rental/Leases Expense	\$68,604	\$65,370	\$700,032	\$647,472	(\$52,560)	-8.1 %	\$778,212	\$33,318
5601 Buil	ding Maintenance	\$539	\$2,160	\$2,289	\$19,680	\$17,391	88.4 %	\$24,000	\$21,711
5602 Oth	er Space Rental	-	\$450	\$223	\$4,100	\$3,877	94.6 %	\$5,000	\$4,177
5605 Equ	ipment Rental/Lease Expense	\$1,450	\$690	\$10,471	\$6,839	(\$3,631)	-53.1 %	\$8,220	(\$2,251)
	ipment Repair	\$597	-	\$1,045	-	(\$1,045)	0.0 %	-	(\$1,045)
	fessional/Consulting Services and erating Expenditures	(\$34,417)	\$26,877	\$72,210	\$266,211	\$194,001	72.9 %	\$319,965	\$247,755



Year to Date Actual to Budget Detail

Compass Charter Schools

April 2017 - April 2017

5803	Banking and Payroll Service Fees	\$402	\$420	\$4,678	\$4,160	(\$518)	-12.5 %	\$5,000	\$297
5805	Legal Services	\$8,012	\$12,420	\$103,774	\$113,160	\$9,386	8.3 %	\$138,000	\$34,226
5806	Audit Services			\$32,615	-	(\$32,615)	0.0 %	-	(\$32,615)
5807	Legal Settlements			\$7,000	-	(\$7,000)	0.0 %	-	(\$7,000)
5809	Employee Tuition Reimbursement	-	-	\$9,231	-	(\$9,231)	0.0 %	-	(\$9,231)
5810	Educational Consultants	\$102,770	\$20,610	\$133,659	\$187,780	\$54,121	28.8 %	\$229,000	\$95,341
5811	Student Transportation	\$6,652	-	\$42,431	-	(\$42,431)	0.0 %	-	(\$42,431)
5815	Advertising/Recruiting	\$27,058	\$9,000	\$51,908	\$82,000	\$30,092	36.7 %	\$100,000	\$48,092
5873	Financial Services	\$29,733	-	\$264,000	-	(\$264,000)	0.0 %	-	(\$285,400)
5874	Personnel Services	\$32	1	\$1,052	-	(\$1,052)	0.0 %	1	(\$1,052)
5875	District Oversight Fee	\$21,026	1	\$111,261	-	(\$111,261)	0.0 %	1	(\$111,261)
5877	IT Services	\$12,102	1	\$61,137	-	(\$61,137)	0.0 %	1	(\$61,137)
5890	Interest Expense/Fees	\$224	1	\$1,722	-	(\$1,722)	0.0 %	1	(\$1,722)
5899	CMO Management Fee Expense			-	-	-	0.0 %	-	-
5900	Communications (Tele., Internet, Copies, Postage, Messenger)	\$11,410	\$3,360	\$68,235	\$33,280	(\$34,955)	-105.0 %	\$40,000	(\$28,235)
Services & Other Opera	ating Expenses	\$272,901	\$170,755	\$1,922,599	\$1,682,076	(\$240,523)	-14.3 %	\$1,981,586	(\$8,075)
7200	Transfer to Charter			\$9,920,482	-	(\$9,920,482)	0.0 %	1	(\$9,920,482)
Other Outgo				\$9,920,482	-	(\$9,920,482)	0.0 %		(\$9,920,482)
	Total Operational Expenses	\$1,148,981	\$255,424	\$14,563,772	\$6,377,041	(\$8,186,730)	-128.4 %	\$6,692,938	(\$7,932,895)
Total Expenses		\$1,709,017	\$920,735	\$20,094,472	\$12,185,437	(\$7,909,035)	-64.9 %	\$13,564,054	(\$6,600,541)
Net Income		(\$1,618,044)	(\$809,322)	(\$9,180,519)	(\$11,297,96 9)	\$2,117,450	18.7 %	(\$12,449,924)	(\$3,199,282)

Coversheet

Review and Discussion of the Executive Compensation Study

Section: VII. NEW BUSINESS

Item: C. Review and Discussion of the Executive Compensation Study

Purpose: Discuss

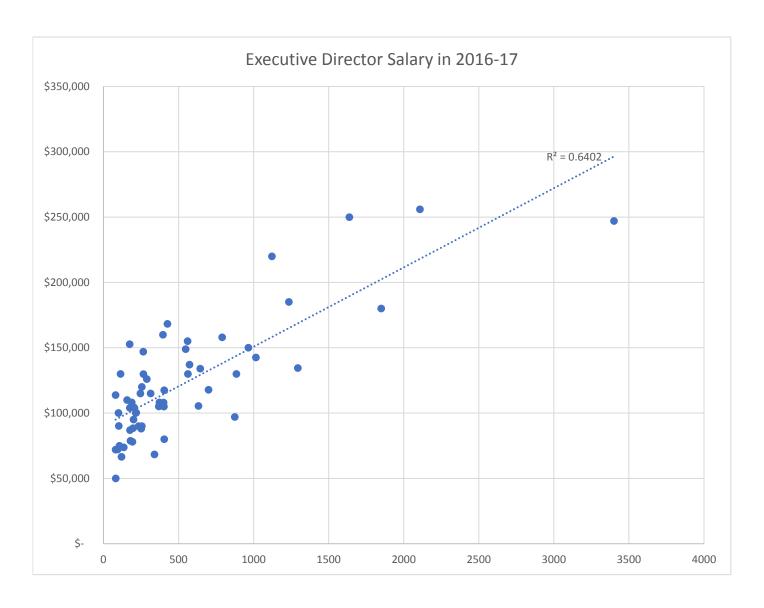
Submitted by: Miguel Aguilar

Related Material: CSMC 16-17 Executive Director Salary Regression Chart.pdf

Executive Compensation Study.pdf

Executive Director Salary Regression Salary vs. ADA of Charter School(s) managed, 2016-17





School/District	School Type	<u>Enrollment</u>	<u>Title</u>	Annual Salary
Inspire School of Arts and Sciences	Classroom	480	Principal/Superintendent	\$115,062
Harvest Ridge Cooperative Charter School	Based/Classroom	548	Executive Director	\$101,237.00
Harvest Ridge Cooperative Charter School	Non-Classroom Based	164	Principal	\$88,827.00
Harvest Ridge Cooperative Charter School	Classroom	384	Principal	\$88,827.00
AAAnonymous Charter School	Non-Classroom Based	6,500	President	\$210,000
AAAnonymous Charter School	Non-Classroom Based	6,500	Chief Officer	\$140,000
Anonymous Charter School	Classroom	270	Executive Director	\$125,000

Auto Allowance	Cell Phone Allowance	STRS/Retirement	<u>Benefits</u>	Total Compensation
0	0	\$14,475	\$12,770	\$142,306
\$1,650.00	0	\$14,608.00	\$7,788.00	\$125,283.00
\$880.00	0	\$12,817.73	\$7,788.00	\$110,312.73
\$880.00	0	\$12,817.73	\$7,788.00	\$110,312.73
0	\$0	\$26,400	\$15,600	\$252,000
0	\$0	\$17,400	\$15,600	\$173,000
\$0	\$0	\$18,125	\$3,000	\$146,125

Coversheet

Review and Discussion of the 2017-18 Draft Operating Budget

Section: VII. NEW BUSINESS

Item: D. Review and Discussion of the 2017-18 Draft Operating Budget

Purpose: Discuss
Submitted by: Scott Warner

Related Material: CCS - 1718 Budget - 5-16-17.pdf

Compass Charter Schools Budget Summary 2017-18 Budgets by School



SAC	SCode Description	San Diego	L	os Angeles	Fresno	CMO	Total
enue							
	State	4,537,521		5,423,843	1,597,554		11,558,918
	Federal						-
	Local	474,886		547,945	164,384	600,000	1,787,215
Total	Revenue	\$ 5,012,407	\$	5,971,788	\$ 1,761,937	\$ 600,000	\$ 13,346,132
enses							
1000	Certificated Salaries	1,565,723		1,865,404	550,375		3,981,502
2000	Classified Salaries	616,760		734,808	216,800		1,568,368
3000	Benefits	505,840		602,659	177,811		1,286,310
	Total Personnel Expense	2,688,323		3,202,871	944,986	-	6,836,179
4000	Books and Supplies	1,336,064		1,591,789	469,647		3,397,500
5000	Services and Other Operating Expenses	854,206		1,017,702	300,266	600,000	2,772,175
6000	Capital Outlay						
7000	Other Outgoing						
Total	Expenses	\$ 4,878,593	\$	5,812,362	\$ 1,714,899	\$ 600,000	\$ 13,005,855
olus / (D	Deficit)	\$ 133,814	\$	159,426	\$ 47,038	\$ -	\$ 340,278
As a %	% of LCFF revenue	3%	6	3%	3%		
nning F	Fund Balance	\$365,05	2	\$740,750	\$483,355	\$12,100,904	
ing Bala		\$498,86	6	\$900,176	\$530,393	\$12,100,904	
As a %	% of LCFF Revenue	11%		17%	35%		

Compass Charter Schools Student Input 2017-18 Budgets by School



	San Diego	Los Angeles	TO	Fresno	CMO	Total
nrollment By Grade						
Kindergarten	30	40	-	6	-	76
Grade 1	30	40	-	5	-	75
Grade 2	30	35	-	6	-	71
Grade 3	30	35	-	7	-	72
Grade 4	30	50	-	10	-	90
Grade 5	30	55	-	12	-	97
Grade 6	30	40	-	17	-	87
Grade 7	30	50	-	22	-	102
Grade 8	50	60	-	10	-	120
Grade 9	50	50	-	25	-	125
Grade 10 Grade 11	80	35 50	-	20	-	105 150
Grade 12	50	60	-	20	-	130
Other Enrollment (Grade 12+, etc.)	-	-	_	-		130
Total Enrollment	520	600	_	180	_	1,300
Rindergarten	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
aily Attendance Rate		1				
Grade 1	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 2	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
	97.0%	97.0%	97.0%		97.0%	
Grade 3				97.0%		97.0%
Grade 4	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 5	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 6	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 7	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 8	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 9	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 10	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 11	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Grade 12	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
Other Enrollment (Grade 12+, etc.)	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%

Average Daily Attendance Rate	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
ge Daily Attendance by Grade						
Kindergarten	29.1	38.8		5.8		73.7
Grade 1	29.1	38.8		4.9		72.8
Grade 2	29.1	34.0		5.8		68.9
Grade 3	29.1	34.0		6.8		69.8
Grade 4	29.1	48.5		9.7		87.3
Grade 5	29.1	53.4		11.6		94.1
Grade 6	29.1	38.8		16.5		84.4
Grade 7	29.1	48.5		21.3		98.9
Grade 8	48.5	58.2		9.7		116.4
Grade 9	48.5	48.5		24.3		121.3
Grade 10	48.5	34.0		19.4		101.9
Grade 11	77.6	48.5		19.4		145.5
Grade 12	48.5	58.2		19.4		126.1
Other Enrollment (Grade 12+, etc.)						-
Average Overall Daily Attendance	504.4	582.0		174.6		1,261.0
ge Daily Attendance by Grade Range ADA Grades K-3	116.4	145.5		23.3		285.2
	116.4 87.3	145.5 140.7		23.3		
ADA Grades K-3						265.8
ADA Grades K-3 ADA Grades 4-6	87.3	140.7		37.8		265.8 215.3
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8	87.3 77.6	140.7 106.7		37.8 31.0		265.8 215.3 494.7
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance	87.3 77.6 223.1	140.7 106.7 189.2		37.8 31.0 82.5		265.8 215.3 494.7
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch	87.3 77.6 223.1 504.4	140.7 106.7 189.2 582.00	0.00/	37.8 31.0 82.5 174.6	0.09/	265.8 215.3 494.7 1,261. 0
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch Poverty level, % of school's overall students	87.3 77.6 223.1	140.7 106.7 189.2	0.0%	37.8 31.0 82.5	0.0%	265.8 215.3 494.7 1,261. 0
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch Poverty level, % of school's overall students Poverty level, number of students	87.3 77.6 223.1 504.4	140.7 106.7 189.2 582.00	0.0%	37.8 31.0 82.5 174.6	0.0%	265.8 215.3 494.7 1,261. 0
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch Poverty level, % of school's overall students Poverty level, number of students Free lunch qualifing, % of school's overall students	87.3 77.6 223.1 504.4	140.7 106.7 189.2 582.00	0.0%	37.8 31.0 82.5 174.6	0.0%	265.8 215.3 494.7 1,261.0
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch Poverty level, % of school's overall students Poverty level, number of students Free lunch qualifing, % of school's overall students Unduplicated Pupil Count, % of overall students	87.3 77.6 223.1 504.4	140.7 106.7 189.2 582.00	0.0%	37.8 31.0 82.5 174.6	0.0%	265.8 215.3 494.7 1,261.0 0.09
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch Poverty level, % of school's overall students Poverty level, number of students Free lunch qualifing, % of school's overall students	87.3 77.6 223.1 504.4	140.7 106.7 189.2 582.00	0.0%	37.8 31.0 82.5 174.6	0.0%	265.8 215.3 494.7 1,261.0 0.09
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch Poverty level, % of school's overall students Poverty level, number of students Free lunch qualifing, % of school's overall students Unduplicated Pupil Count, % of overall students	87.3 77.6 223.1 504.4	140.7 106.7 189.2 582.00	0.0%	37.8 31.0 82.5 174.6	0.0%	265.8 215.3 494.7 1,261.0 0.0%
ADA Grades K-3 ADA Grades 4-6 ADA Grades 7-8 ADA Grades 9-12 Average Overall Daily Attendance ty and Free/Reduced Price Lunch Poverty level, % of school's overall students Poverty level, number of students Free lunch qualifing, % of school's overall students Unduplicated Pupil Count, % of overall students Unduplicated Pupil Count, number of students	87.3 77.6 223.1 504.4	140.7 106.7 189.2 582.00	0.0%	37.8 31.0 82.5 174.6	0.0%	285.2 265.8 215.3 494.7 1,261.0 0.0%

Compass Charter Schools Revenue 2017-18 Budgets by School



SACS	San I	Diego	Lo	s Angeles	Fresno	CMO	Total
ate							
8011 LCFF; state aid portion		373,315		4,837,827	1,376,211		8,587,353
8012 LCFF; EPA portion		693,530		116,400	34,920		844,850
8096 In-Lieu of Property Taxes, all grades	1,2	280,324		251,890	120,385		1,652,598
8019 Prior Year Income / Adjustments							-
8520 State Child Nutrition program							-
8560 Lottery		91,296		105,342	31,603		228,24
8550 Mandate Block Grant		13,308		13,444	4,753		31,50
8591 SB 740 Rent re-imbursement program							
8590 All Other State Revenue							-
8550 One-Time Block Grant		85,748		98,940	29,682		214,37
State Revenue	\$ 4,	537,521	\$	5,423,843	\$ 1,597,554	\$ -	\$ 11,558,91
deral							
8181 Special Education, federal							-
8220 Federal Child Nutrition Programs							-
8290 All Other Federal Revenue, inc Facilities Incentiv	e Grants	program					-
8291 Title I							-
8292 Title II							-
8293 Title III							-
8295 Title V							-
8299 Prior Year Federal Revenue							-
Federal Revenue	\$	-	\$	-	\$ -	\$ -	\$ -
cal							
8660 Interest							-
8782 All Other Transfers from County Offices							-
8799 All Other Transfers from Other Locations						600,000	600,00
8785 CMO Management fee							-
8792 SPED State / Other Transfers from County	2	241,986		279,215	83,764		604,96
8980 Student Lunch Revenue							-
8982 Foundation Grants / Donations							-
8983 All Other Local Revenue							-
8984 Student Body (ASB) Fundraising Revenue							-
8985 School Site Fundraising							-
8986 Rental Income	2	232,900		268,731	80,619		582,25
8999 Revenue Suspense							-
Local Revenue	\$ 4	474,886	\$	547,945	\$ 164,384	\$ 600,000	\$ 1,787,21

Compass Charter Schools Expenses Summary 2017-18 Budgets by School



0.0% Assumed CPI over previous year, source: School Services **C S M C**

						17-18	16-17
C SAC Code Description	San Diego	Los Angeles	Fresno	CMO	Total	Projections	Actuals
ificated Salaries							
1100 Teachers' Salaries	1,124,137	1,339,299	395,151		2,858,587	2,858,587	
1105 Teachers' Stipends / Bonus	-	-	-		-	-	
1120 Substitute Expense	-	-	-		-	-	
1200 Certificated Pupil Support Salaries	256,963	306,146	90,326		653,436	653,436	
1300 Certificated Supervisor and Administrator Salari		83,096	24,517		177,360	177,360	
1305 Certificated Sup. and Admin. Stipends / Bonus	-	-	-		-	-	
1900 Other Certificated Salaries	114,875	136,863	40,380		292,118	292,118	
1910 Other Certificated Overtime	-	-	-		-	-	
1000 Subtotal	\$ 1,565,723	\$ 1,865,404	\$ 550,375		\$ 3,981,502	\$ 3,981,502	
ified Salaries							
2100 Instructional Aide Salaries	_	_	_		_	-	
2110 Instructional Aide Overtime	_	_	_		_	_	
2200 Classified Support Salaries (Maintenance / Food	319,073	380,144	112,159		811,377	811,377	
2210 Classified Support Overtime	-	_	-		-	-	
2300 Classified Supervisor and Administrator Salaries	192,939	229,868	67,821		490,627	490,627	
2400 Clerical, Technical, and Office Staff Salaries	104,747	124,796	36,820		266,364	266,364	
2410 Clerical, Technical, and Office Staff Overtime	-	-	-		-	-	
2900 Other Classified Salaries	_	_	-		_	-	
2905 Other Stipends	-	-	-		-	-	
2910 Other Classified Overtime	-	_	-		-	-	
2000 Subtotal	\$ 616,760	\$ 734,808	\$ 216,800		\$ 1,568,368	\$ 1,568,368	
loyee Benefits							
3101 State Teachers' Retirement System, certificated p	225,934	269,178	79,419		574,531	574,531	
3202 Public Employees' Retirement System, classified	,	207,176	-		-	-	
3313 OASDI	38,239	45,558	13,442		97,239	97,239	
3323 Medicare	31,646	37,703	11,124		80,473	80,473	
3403 Health & Welfare Benefits	165,947	197,709	58,333		421,989	421,989	
3503 State Unemployment Insurance	9,155	10,907	3,218		23,280	23,280	
		41,603	12,275		88,798	88,798	
3603 Worker Compensation Insurance	4/ U // I		14.4/3		00,790	00,790	
3603 Worker Compensation Insurance 3703 Other Post Employment Renefits	34,920		<u> </u>			_	
3703 Other Post Employment Benefits	-	-	-		-	-	
	· · · · · · · · · · · · · · · · · · ·				- \$ 1,286,310	-	

Books and Supp	lies
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4100 Approved Textbooks and Core Curricula Materia	1,278,060	1,522,682	449,258		3,250,000	3,250,000	3,319,428
4200 Books and Other Reference Materials	29,494	35,139	10,367		75,000	75,000	100,500
4300 Materials and Supplies	11,797	14,056	4,147		30,000	30,000	32,773
4315 Classroom Materials and Supplies	9,831	11,713	3,456		25,000	25,000	24,014
4400 Noncapitalized Equipment	5,899	7,028	2,073		15,000	15,000	14,176
4430 General Student Equipment	983	1,171	346		2,500	2,500	1,981
4700 Food and Food Supplies	•	-	-		-	•	
4000 Subtotal	\$ 1,336,064	\$ 1,591,789	\$ 469,647	· ———	\$ 3,397,500	\$ 3,397,500	\$ 3,492,872

Serv

5000 Subtotal	\$ 854,206	\$ 1,017,702	\$ 300,266	\$ 600,000	\$ 2,772,175	\$ 2,772,175	\$ 3,276,545
5999 Expense Suspense	-	-	-		-	-	
5900 Communications	31,194	37,165	10,965		79,324	79,324	79,324
5899 CMO Management Fee	-	-	-		-	-	
5890 Interest Expense / Misc. Fees	540	643	190		1,372	1,372	1,372
5877 IT Services	26,597	31,688	9,349		67,634	67,634	67,634
5875 District Oversight Fee	43,591	51,934	15,323		110,848	110,848	
5874 Personnel Services	401	478	141		1,020	1,020	1,020
5873 Financial Services	117,372	139,837	41,258		298,466	298,466	298,466
5820 Fundraising Expense	-	-	-		-	-	
5815 Advertising / Recruiting	39,325	46,852	13,823		100,000	100,000	100,000
5811 Student Transportation	29,494	35,139	10,367		75,000	75,000	75,000
5810 Educational Consultants	90,054	107,291	31,655		229,000	229,000	229,000
5809 Employee Tution	12,977	15,461	4,562	,,,,,,	33,000	33,000	12,285
5807 Legal Settlements	- , ,	-,	,,,,,,	600,000	600,000	600,000	1,007,000
5806 Audit Services	13,567	16,164	4,769		34,500	34,500	32,615
5805 Legal Services and Audit	39,325	46,852	13,823		100,000	100,000	138,000
5803 Banking and Payroll Service Fees	2,066	2,461	726		5,253	5,253	5,253
5800 Professional/Consulting Services and Operating I	48,812	58,154	17,158		124,124	124,124	124,124
5610 Equipment Repair	197	234	69		500	500	448
5605 Equipment Rental/Lease Expense	4,727	5,632	1,662		12,020	12,020	12,020
5602 Other Space Rental	88	104	31		223	223	223
5601 Building Maintenance	688	820	242		1,750	1,750	1,750
5600 Space Rental/Leases Expense	250,107	297,977	87,916		636,000	636,000	828,870
5505 Student Transportation / Field Trips	2,721	3,103	-		-,133	-,133	7,155
5501 Utilities	2,924	3,483	1,028		7,435	7,435	7,435
5500 Operation and Housekeeping Services/Supplies	2,988	3,559	1,050		7,597	7,597	7,597
5400 Insurance	9,580	11,414	3,367		24,361	24,361	24,361
5300 Dues and Memberships	8,946	10,658	3,145		22,748	22,748	22,748
5210 Training and Development Expense	58,987	70,278	20,735		150,000	150,000	150,000
ces and Other Operating Expenses 5200 Travel and Conferences	19,662	23,426	6,912		50,000	50,000	50,000

Capital Outlay

6900 Depreciation Expense	-	-	-	-	-	

Compass Charter Schools - Finance Committee Meeting - Agenda - Tuesday May 16, 2017 at 2:00 PM Expenses Summary

Other Outgoing														
7010 Special Education Encroachment		-		-		-				-		-		
7438 Debt Service - Interest		-		-		-								
7000 Subtotal	•						-		•					
Total Non-Personnel Expenses	\$	2,190,271	S	2,609,491	2	769,913	2	600,000	\$	6,169,675	\$	6,169,675	2	6,769,417
	-	_,_,_,	4	2,007,771	Φ	709,913	Ψ	000,000	Ψ	0,107,073	Ф	0,109,073	Ψ	0,709,417
· · · · · · · · · · · · · · · · · · ·	•	2,170,271	4	2,007,471	Ψ	709,913	Ψ	000,000	Ψ	0,107,075	Φ	0,109,073	Ψ	0,709,417
,		2,120,271	•	2,007,471	Ф	709,913	Ψ	000,000	Ψ	0,102,073	Ф	0,109,073	Ψ	0,709,417
Total Expenses	\$	4,878,593	\$	5,812,362		1,714,899	\$	600,000	\$	13,005,855		13,005,855	\$	6,769,417