

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545 0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

Department of the Treasury

Open to Public Inspection.

-	ior i ve veriue	JEIVICE									<u> </u>
	For the 2	2008 calend	lar year, c	or tax year beginning Jul 1	, 2008, and endi	ng Jun			, 2009		
В	Check if app	olicable	Di	C Name of organization			D Employ	er Identi	fication Nu	mber	
	X Addres	s change	Please use IRS label	Commonwealth Connections Aca	demy Charte:	r Schoo	74-	3068	519		
	Name	change	or print or type	Number and street (or P O box if mail is not delivered to	street addr) Room.	/suite	E Telepho	ne numb	er		
	Initial r	eturn	See specific	4050 Crums Mill Road	30:	3	(21	5) 7	55-76	503	
	Termin	ation	Instruc- tions.	City, town or country	State ZIP code +	4					
	H	led return		Harrisburg	PA 17112)	G Gross re	eceints	s 30 1	07.43'	5
	\vdash	ation pending	F Name a	and address of principal officer			a group return	_		Yes	X No
	Арриса			Taylor 136 South Bedford Street Carlisle	PA 17013	110-3 411	affiliates inclu			Yes	A N
	T					If 'No,'	attach a list	(see insti	ructions)	ш	···
_		empt status		· · · · · · · · · · · · · · · · · · ·	(1) 01 327	-					
	Websit		\neg	nectionsacademy.com			exemption nu				
<u> </u>		rganization	X Corpora	ation Trust Association Other	L Year of Form	ation 200	<u>3 M s</u>	State of I	egal domicil	le PA	
Pa	rt I	Summa			. <u>-</u>						
	1 Bri	efly describ	e the org	ganization's mission or most significant activities	es <u>Operati</u>	<u>on_of_</u> (<u>harte</u>	r_Sc	<u>hool</u>		
ا ۾		- -									
á l			- -							· -	
Activities & GOVERIANCE										. _	
1		eck this bo		if the organization discontinued its operations	or disposed of moi	e than 25%	of its ass				
				bers of the governing body (Part VI, line 1a)					6		
1			-	t voting members of the governing body (Part				\vdash	6		
-	5 To	tal number	of employ	yees (Part V, line 2a)	gervice -				148		
3	6 IO	tai number	of volunte	yees (Part V, line 2a) eers (estimate the cast A) PEVENUE eers (e	ANCE			6	0		
١,	/a 10	tai gross ur	related b	pusiness revertue fram Part VIETA ASSIST	2002			7a			0
\dashv	D INE	t unrelated	business	s taxable income from the state of the sall		 		7b			
					. 1	F	Prior Year		Cu	rrent Y	ear
ļ			_	nts (Part VIII, line Ih) MAY 1 7 2011	}						
l				ue (Part VIII, line 2g)	1	18	,282,3		30	,104,	
1	10 Inv	estment in	come (Pa	art VIII, column (A), lines 3, 4, and 7d)	'E		42,0)62.		3,	<u>,051</u>
	11 Otl	her revenue	e (Part VII	II, column (A), lines 5, 6d							
4	12 To	tal revenue	add III	nes 8 through 11 (must equal Part)	n (A), line 12)	18	,324,4	152.	30	<u>,107</u> ,	,435
1				ounts paid (Part IX, column (A), lines 45	•						
-	14 Be	nefits paid	to or for r	members (Part IX, column (A), line 4)							
,	15 Sa	laries, othe	r compen	nsation, employee benefits (Part IX, column (A	s), lines 5-10)	5	,042,5	46.	7	<u>,725,</u>	,114
CACIIDAY.	16a Pro	ofessional f	undraisin	ng fees (Part IX, column (A), line 11e)							
	b To	tal fundrais	ına exper	nses (Part IX, column (D), line 25)	0						
<u> 1</u>		•		X, column (A), lines 11a-11d, 11f-24f)	<u>_</u>	I I	,036,5	565	1.8	,857,	0.85
-		•	-		a 25)						
		•		nes 13-17 (must equal Part IX, column (A), line	e 20)		,079,1			, 582,	
ᆡ	19 Re	venue less	expenses	s Subtract line 18 from line 12			,245,3			,525,	
alances							nning of Y			nd of Ye	
		tal assets (•			,592,2			<u>,864</u> ,	
	21 To	tal liabilities	s (Part X,	, line 26)		1	<u>,211,9</u>	968.	1	<u>,959,</u>	<u>, 287</u>
Fund B		t assets or	fund bala	ances Subtract line 21 from line 20		4	,380,2	266.	7	,905,	,504
a	rt II	Signatu	ire Bloc	ck							
		Under penaltie	of perjury 1	I declare that I have examined this return, including accompany Declaration of preparer (other than officer) is based on all infor	ing schedules and statem	ents and to the	best of my ki	nowledge	and belief,	ıt ıs	
	1	true, còrrect م	nd complete	Declaration of preparer (other than officer) is based on all info	rmation of which preparer	has any knowle	A ~~			201	^
ia	ın	///	W	// ()m/			MYK	11	6. 6	<i>2010</i>	9
	re	Signature of	of officer			Da	ate				
	Ì	David	d N Ta	vlor							
			nt name and						-		
					Date		heck if	P	reparer's id	entifying n	ıumber
'ai	d					S	elf	X	ee instructi	ons)	
aı re	- 11	Preparer's signature	* .	hanu Dansa-	100,100,1	I	mployed				
	er's			hony Repice	02/22/	10					
S	a 11	Firm's name (or		HONY REPICE, CPA							
)n	tv li	employed) address, and		1 S 15TH ST	 _	E	IN				
	<u> </u>	ZIP + 4		LADELPHIA PA		6 Р	hone no	(21		5-76	
				with the preparer shown above? (see instruction					X Y	es	No
BAA	A For Pri	ivacy Act a	nd Paper	rwork Reduction Act Notice, see the separate	instructions.		TEEA0101	04/23/	109 F	orm 99	0 (200

	990 (20			onwea																74	-30	68 <u>5</u>	19			Page 2
Par	t III	Sta	temer	nt of P	rogra	am S	ervi	ce A	Acco	omp	lish	men	ts (s	ee i	nstru	uction	าร) _									
1	Briefly	descri	be the	organiza	ation's	missi	ion																			
	Oper	atio	n_of	Char	ter	Sch	<u>1001</u>	=																		
2	Did the	e orgar	nızatıon	underta	ike any	y sign	nificar	nt pro	gram	ser	vices	durın	g the	year	which	were	not lis	sted o	n the	prior					_	
	Form 9	90 or	990-EZ	2																			Υe	:\$	X	No
	If 'Yes,	,' desc	ribe the	se new	servic	es on	Sche	edule	0													_				
3	Did the	organ	nization	cease c	onduc	ting,	or ma	ake s	ignifi	cant	chan	ges ir	n how	ıt coı	nducts	s, any	progr	am se	ervice	s?			Y	es	Х	No
		-		se chan		-			-																	
4	Descrit	be the	exempl	t purpos	e achi	evem	ents f	for ea	ach o	f the	orgai	nızatı	on's t	hree	larges	t proc	ıram s	ervice	s by	exper	ises	Sec	tion !	5016	c)(3)	
	and 50	11(c)(4)) organi	izations	and se	ection	ı 4947	7(a)(1	 tru: 	sts a	re rec	quirec	d to re	port i	the an	nount	of gra	nts a	nd al	locatio	ns to	oth	ers, t	he t	oʻtàl	
	expens	ses, ar	na rever	nue, if ai	ny, tor	eacn	ı prog	gram :	servi	ce re	porte	a														
4 8	(Code		•) (Exper	ises	\$ 2	20,9	904	,16	1. 1	nclud	ling g	rants	of	\$			0.) (R	evenu	e \$	\$	30,	088	3,85	57.)
	Comm			Conn																						
	cvbe	r ch	narte	r sch	1001	wit	h a	n pr	- - :ima	arv	 pur	coos	e t	а о о	rovi	ı de	a ur	niau	e –							
				stud																						
											~															
																			- - -							
						-																				
																										
								-																	-	
				-				-	- -								-	·								
										- - ·																
41	(Code) (Exper	ises	Ş				1	nclud	ling q	rants	of	\$) (R	evenu	e \$	\$)
	,			, , ,											· ——				- ′ `				-			
			- -		-																					
																	-									
								-																		
		-																								
				-														- -		-						
																				-			-			
40	(Code) (Exper	ises	\$				'	nclud	lıng g	rants	of :	\$) (R	evenu	e s	\$)
			_ -															.		-						. -
			`																							
																		· - -								
																				:						
4	1 Other	nroora	m sen/	ces (De	scribe		chedu	ile O	<u> </u>																	
71	(Exper		\$						<i>)</i> ng gra	ante	of	\$) (Rev	enue	S					,	١	
				се ехре	nses								ust ac	ual F	Part IV		25, c)					·	
- 46	- IOLAI L	nogra	III SEIVI	ce expe	11362		Υ		<i>,</i> 90	J4,	101.	. (IVI	usi et	udi F	ai (IA	, LIIIE	20, C	oiuiili	ı (D)	/						

Form 990 (2008) Commonwealth Connections Academy Charter School Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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			.,,
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	<u>3</u>		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		Λ
6	Did the organization maintain any donor advised funds or any accounts where 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
	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	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, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		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 U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		X
24 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		х
b	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	Section 501(c)(3) and 501(c)(4) 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
ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
BAA		Form	990 (2008

Part IV | Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		X
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		X
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? 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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
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 7701-37 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, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13) $^{\circ}$ If 'Yes,' complete Schedule R, Part V, line 2	35		Х
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
RA/		Form	990 /	2008

Х Х

Х

Х Х

Commonwealth Connections Academy Charter School Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US Information Returns Enter -0- if not applicable n 1 a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c Х 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 148 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Х Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За Х b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X **b** If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 c 6a X 6a Did the organization solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7 a Х b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 7 c X

If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	
Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	al 7
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71

g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

8 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a

b Did the organization make any distribution to a donor, donor advisor, or related person?

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 other 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.)	

10b 11 a 11 b 12a

10a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b |f 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b

Form 990 (2008)

7g

7h

9b

BAA

Form 990 (2008) Commonwealth Connections Academy Charter School 74-3068519 Page

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A.	Governing Body and Management				
	For each processe	n 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de es, or changes in Schedule O. See instructions	scribe the circumstances,		Yes	No
1 a	Enter the	e number of voting members of the governing body	1a 6			1
t	Enter the	e number of voting members that are independent	1b 6]		
2	Did any officer, d	officer, director, trustee, or key employee have a family relationship or a business rela lirector, trustee or key employee?	tionship with any other	2		
3	Did the o	organization delegate control over management duties customarily performed by or und is, directors or trustees, or key employees to a management company or other person	der the direct supervision	3	Х	
4		organization make any significant changes to its organizational documents		4		Х
	since the	prior Form 990 was filed?				
5	Did the o	organization become aware during the year of a material diversion of the organization's	s assets?	5		Х
6	Does the	organization have members or stockholders?		6		Х
7 a	Does the governing	organization have members, stockholders, or other persons who may elect one or mog body?	ore members of the	7a	х	
t	Are any o	decisions of the governing body subject to approval by members, stockholders, or other	er persons?	7 b	Х	
8	Did the o	organization contemporaneously document the meetings held or written actions underta wing	aken during the year by			
a	The gove	erning body?		8a	Х	
t	Each con	mmittee with authority to act on behalf of the governing body?		8b	Χ	
9 a	Does the	organization have local chapters, branches, or affiliates?		9a		X
ŧ	If 'Yes,' o and bran	does the organization have written policies and procedures governing the activities of siches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9ь		
10	Was a co describe	opy of the Form 990 provided to the organization's governing body before it was filed? in Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10	Х	
	organizai	any officer, director or trustee, or key employee listed in Part VII, Section A, who cann tion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	ot be reached at the	11		Х
Sec	tion B.	Policies				
					Yes	No
		organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	
t	Are office to conflic	ers, directors or trustees, and key employees required to disclose annually interests th cts?	at could give rise	12 Ь	х	
c	Does the Schedule	organization regularly and consistently monitor and enforce compliance with the police O how this is done	y? If 'Yes,' describe in	12 c	х	
		organization have a written whistleblower policy?		13	Х	<u> </u>
14		organization have a written document retention and destruction policy?		14	Х	-
15	Did the p persons,	process for determining compensation of the following persons include a review and ap comparability data, and contemporaneous substantiation of the deliberation and decis	proval by independent iion			
		nization's CEO, Executive Director, or top management official?		15 a	X	<u> </u>
t		icers of key employees of the organization?		15 b	Х.	—
		the process in Schedule O (see instructions)				
16 a	Did the o entity dui	organization invest in, contribute assets to, or participate in a joint venture or similar ai ring the year?	rrangement with a taxable	16 a		X
t	in joint ve	nas the organization adopted a written policy or procedure requiring the organization to enture arrangements under applicable federal tax law, and taken steps to safeguard the th respect to such arrangements?	o evaluate its participation ne organization's exempt	16b		
Sec		Disclosures		1 1001		
17	List the s	states with which a copy of this Form 990 is required to be filed >				
18	Section 6	5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and in Indicate how you make these available. Check all that apply	I 990-T (501(c)(3)s only) av	aılable	for pu	blic
	Own	website Another's website X Upon request				
19	Describe statemen	in Schedule O whether (and if so, how) the organization makes its governing documents available to the public	nts, conflict of interest polic	y, and f	inanc	ıal
		name, physical address, and telephone number of the person who possesses the boo	•			
	Antho	ny Repice CPA 2901 S 15th Street Philadelphia PA	<u> </u>	15)_7	<u>55-</u> 7	<u> 1603</u>
BAA				Form	990 (2008)

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or 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 the organization did not	(B)	ale ai	ıy Uı		r, ui c)	rector,	trus	(D)	(E)	(F)
Name and Title	Average	Pos	ition (•	•	hat app	lv)	1 ' 1	* *	
Name and Title	hours per week	or director	anstitutional trustee	Offi. 4	Key employee	High est connected	รู้ รับงก ล เ	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Dave. Taylor										· · · · · · · · · · · · · · · · · · ·
President	5.00	Х						0.	0.	0.
Judith Miller										
Treasurer	5.00	X		L				0.	0.	0.
Jerald_Birmelin										
Secretary	5.00	X	<u> </u>		L.			0.	0.	0.
Cheryl Lozier										
Board Member	5.00	X			_			0.	0.	0.
Gall A Hawkins Bush										
Board Member	5.00	Х		X				0.	0.	0.
Michelle F Ciora					ļ					
Board Member	5.00	Х			<u> </u>			0,	0.	0.
Dennis Tulli										
CEO	40.00			X	Х	Х		124,700.	0.	0.
Greg Gettle										
Principal - HS	40.00				Х	Х		83,200.	0.	0.
Susan Shubert										
Principal - Elem	40.00				X	Х		83,000.	0.	0.
Rutt Jan										
Spec Ed Mang	40.00				ļ	Х		78,200.	0.	0.
Gary Madden										
Principal	40.00				<u> </u>	X		72,800.	0.	0.
Laurie Hamilton										
Teacher	40.00					Х		60,950.	0.	0.
			ļ	ļ						
					<u> </u>					
		<u></u>			<u> </u>					
	 _				L_					
				l	1					

Part VII Section A. Officers, Directors, Trus (A)	(B)	(B)			c)			(D)	(E)		(F)	
Name and Title	Average hours per week		_					Reportable compensation from the organization	Reportable compensation from related organizations	amo	stimated unt of oth opensation	
		lividua	taution	Officer	y emp	jhest c	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	ord	rom the janization nd related	n
	hours per week	I truste	Institutional trustee		employee	Highest compensat employee					anization	
		ă	stee			rsated						
	ļ									-		
	-								· · · · · · · · · · · · · · · · · · ·			
	_											
	_											
										 		
			_									
	-								· · · · <u>-</u> · · · ·			
	-											
	-											
	-											
								· · · · · · · · · · · · · · · · · · ·				
	ļ	 		<u> </u>			ļ					
	-											
1 b Total	<u> </u>	ļ	l	<u> </u>	!		>	502,850.	0	•		0
2 Total number of individuals (including those in 1a) w	ho recei	ved	mor	e th	an S	\$100	,000	·	npensation from th	ne		
organization 1											Yes	No
3 Did the organization list any former officer, director of	or truste	e, ke	еу е	mplo	yee	, or	hıgl	nest compensated	employee			
on line 1a ³ If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th		com	pen	satio	on a	nd c	ther	r compensation fro	m	3		Х
the organization and related organizations greater the individual	an \$150	,000)? If	'Ye	s' cc	mpi	lete	Schedule J for suc	ch	4		Х
5 Did any person listed on line 1a receive or accrue corendered to the organization? If 'Yes,' complete School	mpensa edule J f	tion or s	fror uch	n ar pers	ıy uı son	nrela	ated	organization for s	ervices	5		X
Section B. Independent Contractors												
Complete this table for your five highest compensate compensation from the organization	d indep	ende ——	ent c	ontr	acto	ors t	hat	received more tha	n \$100,000 of			
(A) Name and business addres	s							(B) Description of	of Services	Compe	C) insatio	n
Connections Academy, In 1000 Lancaster Street, 6th Flo Ba				MD	_			School managem		19,7		
Charter School Choice I 2901 S 15th St Ph	ıladel	.ph1	<u>a,</u>	PA	1	91	45	School Busine	ss Services	1	19,2	09
												_
			-									
2 Total number of independent contractors (including to compensation from the organization ► 2	hose in	1) w	ho r	ece	ved	mo	re th	nan \$100,000 in				

Pa	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE OONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1 a 1 b 1 c 1 d 1 d 1 d				
CONTR AND C	g Noncash contribns included in lns 1a-1f \$				
, E	Business Code				<u> </u>
VEN	2a Local Ed Source 611600	28,574,571.	28,574,571.	0.	0.
E RE	b State Source 611600	314,579.	314,579.	0.	0.
NIC	c Federal Source 611600	1,199,706.	1,199,706.	0.	0.
A SEI	d Miscellaneous 611600	15,528.	15,528.	0.	0.
GRAB	f All other program service revenue				
PRC	g Total. Add lines 2a-2f	30,104,384.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds 	3,051.	3,051.	0.	0.
	5 Royalties (i) Real (ii) Personal				
	6a Gross Rents b Less rental expenses c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b				
	t ret income or (1033) from landraising events			- :	
	9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b		i		
	c Net income or (loss) from sales of inventory	··			
	Miscellaneous Revenue Business Code				
	b d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	30,107,435.	30,107,435.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	o) and 501(c)(4) organiza plete column (A) but are	•		(D).
Do 6b,	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 governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,024,021.	4,890,264.	1,133,757.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	228,026.	184,701.	43,325.	0.
9	Other employee benefits	962,869.	830,715.	132,154.	0.
10	Payroll taxes	510,198.	435,857.	74,341.	0.
11	Fees for services (non-employees)	3,20,200		, 4	
ä	a Management				
ı	Legal	51,938.	0.	51,938.	0.
	Accounting	133,209.	0.	133,209.	0.
(1 Lobbying				
•	Prof fundraising svcs See Part IV, In 17				
1	Investment management fees				
ç	g Other [263,798.	263,798.	0.	0.
12	Advertising and promotion				
13	Office expenses	455,563.	322,849.	132,714.	0.
14	Information technology				
15	Royalties				
16	Occupancy	263,434.	0.	263,434.	0.
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	141,225.	0.	141,225.	0.
20	Interest				
21	Payments to affiliates	100 515			
22	Depreciation, depletion, and amortization	188,717.	0.	188,717.	0.
	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
	Books and Periodicals	4,051,025.	4,051,025.	0.	0.
	Board Services	5,697.	0.	5,697.	0.
(Purchased Prof. & Tech	5,603,007.	5,603,007.	0.	0.
	Special Ed Prog	2,488,217.	2,488,217.	0.	0.
•	Utilities	17,315.	0.	17,315.	0.
1	All other expenses	5,193,940.	1,833,728.	3,360,212.	0.
	Total functional expenses Add lines 1 through 24f	26,582,199.	20,904,161.	5,678,038.	0.
26	Joint Costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2008)

Pa	<u>iπ χ</u>	Balance Sneet									
					(A) Beginning of year		(E End o	i) f year			
	1	Cash - non-interest-bearing		*	2,584,805.	1	1,8	73,3	309.		
	2	Savings and temporary cash investments				2	-				
	3	Pledges and grants receivable, net				3					
	4	Accounts receivable, net			3,002,969.	4	6,2	82,2	256.		
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule I	s, truste L	es, key employees,		5					
	6	Receivables from other disqualified persons (as define	d unde	r section 4958(f)(1))							
		and persons described in section 4958(c)(3)(B) Comp	olete Pa	rt II of Schedule L		6			-		
A S S E T S	7	Notes and loans receivable, net				7					
Ē	8	Inventories for sale or use				8					
\$	9	Prepaid expenses and deferred charges			4,460.	9	2.	50,0)34.		
	10 a	Land, buildings, and equipment cost basis	10a	1,705,592.							
	b	Less accumulated depreciation Complete Part VI of									
		Schedule D	10Ь	266,122.		10 c	1,4	39,4	170.		
	11	Investments - publicly-traded securities				11	· <u> </u>				
	12	12 Investments – other securities See Part IV, line 11									
	13	Investments - program-related See Part IV, line 11				13					
	14	Intangible assets				14	•				
	15	Other assets See Part IV, line 11				15		19,7	722.		
	16	Total assets Add lines 1 through 15 (must equal line	34)		5,592,234.	16		64,7			
	17	Accounts payable and accrued expenses	<u> </u>	-	1,211,968.	17	1,9				
	18	18	•		-						
	19	Deferred revenue	19		21,1	93.					
L	20	Tax-exempt bond liabilities				20	· .				
LIABILITIES	21	Escrow account liability Complete Part IV of Schedule	e D			21					
	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal compensated employees.	ey employees, omplete Part II								
Ţ		of Schedule L	22								
S	23	Secured mortgages and notes payable to unrelated this		23							
	24	Unsecured notes and loans payable				24					
	25	Other liabilities Complete Part X of Schedule D				25					
	26	Total liabilities. Add lines 17 through 25			1,211,968.	26	1,9	59,2	287.		
N E T		Organizations that follow SFAS 117, check here ▶	X an	d complete lines							
		27 through 29 and lines 33 and 34.				ļ					
Ş	27	Unrestricted net assets			1,080,266.	27	3,69	90, 5	04.		
Ē T S	28	Temporarily restricted net assets			3,300,000.	28	4,2	15,C	00.		
	29	Permanently restricted net assets				29					
R		Organizations that do not follow SFAS 117, check her	re 🟲	and complete							
FUZD		lines 30 through 34.				_					
Ď	30	Capital stock or trust principal, or current funds				30					
B	31	Paid-in or capital surplus, or land, building, and equip	ment fu	nd		31					
BALAZCES	32	Retained earnings, endowment, accumulated income,	or othe	r funds		32					
Ë	33	Total net assets or fund balances.		<u> </u>	4,380,266.	33	7,90)5 <u>,</u> 5	04.		
	34	Total liabilities and net assets/fund balances			5,592,234.	34	9,86	54,7	'91.		
Pa	irt X	Financial Statements and Reporting									
_								Yes	No		
1		, ,	Cash		Other						
2		re the organization's financial statements compiled or r		•	countant?		2a		<u> </u>		
		re the organization's financial statements audited by an					2b	X			
		Yes' to 2a or 2b, does the organization have a committed iew, or compilation of its financial statements and select					2 c	х			
3	Aud	a result of a federal award, was the organization requir dit Act and OMB Circular A-133?		ndergo an audit or audit	ts as set forth in the Sir	ngle	3a	х			
		res,' did the organization undergo the required audit or	audits?				3b	X	0000		
BA	A						Form	990 (,2008)		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

2008

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

maine c	or une organ	111280011								Employe	ridentifica	uon number	
					emy Charter Scho					<u> </u>	068519	9	
Part	t I Re	eason for	Put	olic Charity Stat	us (All organizations	must <u></u>	comple	ete this	part.	(see	ınstruct	tions)	
The o	The organization is not a private foundation because it is (Please check only one organization)												
1	1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).												
2	2 X A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)												
3													
4													
	name, city, and state												
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)												
6 7													
8					-art II) - 170(b)(1)(A)(vi). (Complei	la Dart II	,						
											ahın faas		
3	An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)												
10					d exclusively to test for pu								
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h												
	_ a L	_] Type I		b Type II		II — Fund	-	-			d 🗌	Type III— Other	
е	— thar	checking th n foundatioi (a)(2)	is box n mar	k, I certify that the on nagers and other that	rganization is not controlle an one or more publicly su	ed direct ipported	ly or ind organiza	irectly b	y one or escribed	more d I in secti	isqualifie on 509(a	ed persons other a)(1) or section	
f	If th	, , , ,	tion re	eceived a written de	termination from the IRS	that is a	Type I,	Туре II с	r Type	III suppo	rting org	anization,	
g	Sind	ce August 1	7, 20	06, has the organiza	ation accepted any gift or	contribu	ution from	m any of	the foll	owing p	ersons?		
												Yes	No
	(i)	a person below, th	who le gov	directly or indirectly erning body of the s	controls, either alone or t supported organization?	ogether	with per	sons de	scribed	ın (ıı) an	d (III)	11 g (i)	
	(ii)	a family	meml	per of a person des	cribed in (i) above?							11 g (iı)	
	(iii)	a 35% co	ontroll	led entity of a perso	n described in (i) or (ii) at	oove?						11 g (ui)	
h	Pro	vide the fol	lowing	g information about	the organizations the orga	anızatıon	support	s		,			
		ne of Supported rganization	t l	(II) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organiza (i) liste gove	Is the tion in col d in your erning iment?	the organ	rou notify nization in (i) of upport?	organizat	s the ion in col zed in the S ?	(VII) Amount of Suppo	ort
						Yes	No	Yes	No	Yes	No		
							-				- - 1		_
							<u> </u>						
									ĺ				
						1					ł		
							<u> </u>		<u> </u>				
								-					
						<u> </u>			<u> </u>				
			l				Ì						
		<u> </u>				1			<u> </u>	<u> </u>			
Total													

Schedule A (Form 990 or 990-EZ) 2008 Commonwealth Connections Academy Charter School 74-3068519

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.)

<u> </u>	(Complete only if you checke	ed the box on line	5, 7, or 8 of Part					
Sec.	tion A. Public Support					ı .		
begir	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f)	Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')							
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge							
4	Total. Add lines 1-3							<u> </u>
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)							
	Public support. Subtract line 5 from line 4							
<u>Sec</u>	tion B. Total Support			, 		· · · · · · · · · · · · · · · · · · ·		
	ndar year (or fiscal year nning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f)	Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income form unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	ities, etc (see ins	tructions)			_	12	
13	First five years. If the Form 990 organization, check this box and	is for the organiza stop here	ation's first, second	d, third, fourth, or	fifth tax year as	a section 501(d	:)(3)	▶
	tion C. Computation of Pu						₁ .	
	Public support percentage for 200	•	,,	e 11, column (f)		F	14	<u> </u>
15	Public support percentage for 200	07 Schedule A, Pa	art IV-A, line 26f				15	<u>%</u>
16 a	33-1/3 support test $-$ 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check the box licly supported org	on line 13, and t ganization	the line 14 is 33-1	/3 % or more,	check this bo	×
b	33-1/3 support test — 2007. If the and stop here. The organization of	e organization did qualifies as a pub	not check a box o licly supported org	n line 13, or 16a, ganization	and line 15 is 33-	1/3% or more,	check this b	ox ► []
17 a	17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.							
	b 10%-facts-and-circumstances test – 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.							
Ιβ	Private foundation. If the organiz	ration did not ched	ck a box on line, l	з, 16a, 16b, 1/a,	or 1/b, check this	DOX and see i	nstructions	

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support	ked the box on lin	e 9 of Part I)				
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(0) 2000	(n Total
1		(a) 2004	(b) 2005	(6) 2006	(a) 2007	(e) 2008	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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						
7 a	Total. Add lines 1-5 Amounts included on lines 1, 2, 3 received from disqualified persons						
ŀ	and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b		· · · · ·				
8	Public support (Subtract line						
	7c from line 6)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form						
t	unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included inline 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 IV)						
	Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	d, third, fourth, oi	r fifth tax year as a	section 501(c)(3)	▶ □
	tion C. Computation of Pub						
15	Public support percentage for 200			e 13, column (f))		15	%
16	Public support percentage from 2	•	•	. ,,,,		16	
	tion D. Computation of Inve						
	Investment income percentage for				an (f))	17	%
18	Investment income percentage from				(7/	18	
	a 33-1/3 support tests — 2008. If the more than 33-1/3%, check this bo	e organization did	not check the bo	x on line 14, and	I line 15 is more th	an 33-1/3%, and l	
t	33-1/3 support tests - 2007. If the is not more than 33-1/3%, check	e organization did this box and stop	not check a box here. The organiz	on line 14 or 19a zation qualifies as	, and line 16 is mo a publicly suppor	ore than 33-1/3%, a ted organization	and line 18
20	Private foundation. If the organiz	ation did not chec	k a box on line 14	4, 19a, or 19b, ch	eck this box and s	ee instructions	▶ ¯

Schedule A	(Form 990	0 or 990-	EZ) 2008	B Co	mmonwe	alth C	Connec	tions A	cademy	Charter	School	74-30	068519	Page 4
Part IV	Supple	mental	Inform	ation.	Comp	lete th	ıs part	to prov	ride the	explanat	tion requ	red by	068519 Part II, III see instru	ne 10:
	Part II,	line 17	a or 17	b; or l	⊃art IİI	, line 1	2 Pro	vidė an	y other	additiona	al informa	ation (see instru	ictions)
												· <u>-</u> -		
	. 													
	 .													
											. – – – –			
								- -						
			:		.									
				-							 -	-		
	. – – – -								-					
											-			
	.										_			
										- -	-			
										- 	-			
	·								_ _					
	. – – – .													
	· 										 _			
											 _		. 	
						- -								
						. – – – .								
						_								
									· – – - -					
-	· 													

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization Employer Identification number Commonwealth Connections Academy Charter School 74-3068519 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes l No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day Held at the End of the Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2_b c Number of conservation easements on a certified historic structure included in (a) 2с d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Yes No Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 ► S (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990. Part X

Schedule D (Form 990) 2008 Commo					74-306		Page 2
Part III Organizations Mainta	ining Collec	tions of Art, Histo	orical 7	reasures, or	Other Similar Ass	ets (con	tınued)
3 Using the organization's accession that apply)	n and other red	cords, check any of the	e followir	ng that are a signi	ficant use of its collect	tion items ((check all
a Public exhibition		d 🗌 Loan	or excha	inge programs			
b Scholarly research		e 🗌 Other	r				
c Preservation for future genera	ations						
4 Provide a description of the organ Part XIV			-	_		ın	
5 During the year, did the organizat assets to be sold to raise funds ra	tion solicit or re	ceive donations of art	t, historic	al treasures, or o	ther similar	Yes	□No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arra	ingements Compl	lete if o	organization a		1 1	
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian,	or other intermediary	for contr	ibutions or other a	assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the following	ng table				
						Amount	
c Beginning balance					1c		
d Additions during the year					1 d		
e Distributions during the year					1 e		
f Ending balance					1f		
2a Did the organization include an ai	mount on Form	990, Part X, line 21?				Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV						
Part V Endowment Funds Co	mplete if or	ganization answer	red 'Ye	s' to Form 990), Part IV, line 10		
	(a) Current y	ear (b) Prior yea	ar	(c) Two years back	(d) Three years back	(e) Four	r years back
1 a Beginning of year balance							
b Contributions							
c Investment earnings or losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage	of the year en	d balance held as					
a Board designated or quasi-endow	rment ►	8					
b Permanent endowment ►	8						
c Term endowment ►	8				•		
3a Are there endowment funds not in organization by	n the possessio	n of the organization t	that are I	neld and administ	ered for the	Y ,	es No
(i) unrelated organizations						3a(i)	
(ii) related organizations						3a(ii)	
b If 'Yes' to 3a(II), are the related o	rganizations lis	ted as required on Sch	hedule R	?		3b	
4 Describe in Part XIV the intended	uses of the or	ganization's endowmei	nt funds				
Part VI Investments-Land, B	uildings, an	d Equipment. See	e Form	990, Part X,	line 10.		
Description of investment		a) Cost or other basis (investment)	(b) (ost or other sis (other)	(c) Depreciation	(d) Boo	k Value
1 a Land	L						
b Buildings							
c Leasehold improvements							
d Equipment	Γ		1	,705,592.	266,122.	1,4	39,470.
e Other							
Total. Add lines 1a-1e (Column (d) sho	ould equal Form	990, Part X, column ((B), line	10(c))	•	1,4	39,470.
BAA					Sched		n 990) 2008

TEEA3302 12/23/08

Part VII Investments-Other Securities See	ections Academy Charter	School 74-3068519 Page 3
	(b) Book value	(c) Method of valuation
(a) Description of security or category (including name of security)	(2) Book value	Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests Other		
Other		
Total (Column (b) should equal Form 990 Part X, col (B) line 12)		-
Part VIII Investments—Program Related (Se		3)
(a) Description of investment type	(b) Book value	(c) Method of valuation
· · · · · · · · · · · · · · · · · · ·		Cost or end-of-year market value
	 	
Total Column (b)(should equal Form 990, Part X, Col (B) line 13) Part IX Other Assets (See Form 990, Part X	Y line 15)	
	Description	(b) Book value
Deposit		19,722.
		► 19,722.
		► 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability		▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25)	▶ 19,722.
· · · · · · · · · · · · · · · · · · ·	art X, line 25)	▶ 19,722.
Part X Other Liabilities (See Form 990, Pa (a) Description of Liability	art X, line 25) (b) Amount	19,722.

Schedule D (Form 990) 2008 Commonwealth Connections Academy Charte	er School	74-306	8519	Page 4
Part XI	Reconciliation of Change in Net Assets from Form 990 to F	inancial Statements			
1 Total re	evenue (Form 990, Part VIII,column (A), line 12)				
2 Total e	xpenses (Form 990, Part IX, column (A), line 25)		[
3 Excess	or (deficit) for the year Subtract line 2 from line 1		[
4 Net uni	realized gains (losses) on investments		[
5 Donate	d services and use of facilities				
6 Investr	nent expenses		[
7 Prior p	eriod adjustments		ĺ		
8 Other (Describe in Part XIV)		[
9 Total a	djustments (net) Add lines 4-8		ſ		
10 Excess	or (deficit) for the year per financial statements. Combine lines 3 and 9				
Part XII	Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per	Return		
1 Total re	evenue, gains, and other support per audited financial statements		1		
2 Amoun	ts included on line 1 but not on Form 990, Part VIII, line 12				
a Net uni	realized gains on investments	2 a			
b Donate	d services and use of facilities	2 b			
c Recove	eries of prior year grants	2 c			
d Other (Describe in Part XIV)	2 d			
e Add Im	es 2a through 2d		2e		
3 Subtra	ct line 2e from line 1		3		
4 Amoun	ts included on Form 990, Part VIII, line 12, but not on line 1				
a Investr	nents expenses not included on Form 990, Part VIII, line 7b	4a	_		
b Other (Describe in Part XIV)	4 b			
c Add lin	es 4a and 4b		4c		
5 Total re	evenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		5		
Part XIII	Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses p	er Retu	rn	
1 Total e	xpenses and losses per audited financial statements		1		
2 Amoun	ts included on line 1 but not on Form 990, Part IX, line 25				
a Donate	d services and use of facilities	2a	_		
b Prior y	ear adjustments	2 b	_ [
c Losses	reported on Form 990, Part IX, line 25	2 c			
d Other (Describe in Part XIV)	2 d			
e Add lin	es 2a through 2d		2e		
	ct line 2e from line 1		3		
4 Amoun	ts included on Form 990, Part IX, line 25, but not on line 1:				
a Investr	nents expenses not included on Form 990, Part VIII, line 7b	4a	_		
b Other (Describe in Part XIV)	4b			
	es 4a and 4b		4c		
	xpenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)		5		
Part XIV	Supplemental Information				
Complete thi	s part to provide the descriptions required for Part II, lines 3, 5, and 9, Part (, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	t III, lines 1a and 4, Part IV	, lines 1b	and 2b, Part	V,
					
				·	
			 -		
	~		 -		

Schedule D (Form 990) 2008	Commonwealth Connections Academy Charter School Information (continued)	74-3068519	Page 5
Part XIV Supplemental	Information (continued)		
			-
			-

SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service Name of the organization

► To be completed by organizations that answer 'Yes' to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number

Cor	mmonwealth Connections Academy Charter School	74-3068519			
				YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its characteristic governing instrument, or in a resolution of its governing body?	rter, bylaws, other	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all catalogues, and other written communications with the public dealing with student admissions, program	l its brochures,			
	and scholarships?	,	_2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast n	nedia during the			
	period of solicitation for students, or during the registration period if it had no solicitation program, in a the policy known to all parts of the general community it serves? If 'Yes,' please describe If 'No', please	way that makes	3	X	
	Charter School law probibite discrimination		_3	Λ.	
	Charter School law prohibits discrimination.				
4	Does the organization maintain the following?		_		ļ
	a Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	<u>X</u>	
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		4b	Х	
	c Copies of all catalogues, brochures, announcements, and other written communications to the public of student admissions, programs, and scholarships?	dealing with	4c	X	
•	d Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Х	ļ
	If you answered 'No,' to any of the above, please explain (If you need more space, attach a separate	statement)			
		· -			
5	Does the organization discriminate by race in any way with respect to				
;	a Students' rights or privileges?		5a		X
	Admissions policies?		5 b		<u>X</u>
(c Employment of faculty or administrative staff?		5c		_x_
•	d Scholarships or other financial assistance?		5 d		Х
,	e Educational policies?		5e		Х
1	Use of facilities?		5f		Х
•	g Athletic programs?		5g		X
	Other sector consists and also 2				
,	n Other extracurricular activities? If you answered 'Yes,' to any of the above, please explain (If you need more space, attach a separate	statement)	5h		X
	m you answered Tes, to any of the above, please explain (if you need more space, attach a separate	statement)			
		. – – – – – –			
	a Does the organization receive any financial aid or assistance from a governmental agency?		6a	Х	<u> </u>
,	o Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes,' to either line 6a or line b, please explain using an		6b	-	X
7	attached statement 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		_		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection

Employer identification number

Common	<u>wea</u>	lth Con	nections Academy Charter School	74-3068519
Pt_VI-	A,_	Line 3	_ Delegation of management duties: Commonwealth Connect	ons Academy Charter School
			entered into a service agreement with Connections	Academy, LLC, who agreed
-			_to provide educational services and various adm	unistrative services
Pt_VI-	<u>A</u> ,_	Line 7a	Commonwealth Connections Academy Charter School	board members have the
			right to elect members.	
Pt_VI-	<u>A</u> ,_	<u>Line 7b</u>	Commonwealth Connections Academy Charter School	governing body
			approves the board minutes.	
Pt_VI-	-A,_	Line 8	Board of Directors of Commonwealth Connections	Academy CS
			can create committees.	
<u>Pt_VI</u> -	A,_	<u>Line 10</u>	_Form 990 for Commonwealth Connections Academy C	harter_School
			_is_prepared_and_presented_during_the_board_meet	ing for review,
			signature and filing with the IRS.	
Pt_VI-	<u>В</u> ,	Line 12	c Commonwealth Connections Academy Charter School	requires officers
			and employess to disclose any conflicts of inte	rest.
<u>Pt_VI-</u>	<u>В</u> _	Line 15	_Commonwealth_Connections_Academy_Charter_School	salaries are approved
			_by board_of_Directors	
<u>Pt_VI-</u>	<u>-</u> C,_	Line 18	Please contact Anthony Repice CPA at 215-755-76	03 for copy of
	· – –	- -	of all available information for public inspect	ion
<u>Pt_VI-</u>	<u>-</u> C,_	<u>Line 19</u>	Please contact Anthony Repice CPA at 215-755-76	03 for all the
	- -	- -	_addtional_information_available_to_public_inspe	ctions. Documents are
			_also_available_by_going_to_www.guidestar.org	
- -	- -			