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DLN: 93493042003434

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

Open to Public Inspec<u>tio</u>n

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013 D Employer identification number **B** Check if applicable NOBLE NETWORK OF CHARTER SCHOOLS Address change 36-4241970 Doing Business As Name change Initial return lumber and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 1 NORTH STATE STREET FLOOR 7-L Terminated (773) 278-6895 Amended return City or town, state or country, and ZIP + 4 CHICAGO, IL 60602 Application pending **G** Gross receipts \$ 105,355,372 Name and address of principal officer **H(a)** Is this a group return for MICHAEL MILKIE ┌ Yes 🗸 No affiliates? 1 NORTH STATE STREET FLOOR 7-L CHICAGO, IL 60602 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) **▽** 501(c)(3) **┌** 501(c) () **◄** (insert no) Tax-exempt status ☐ 4947(a)(1) or ☐ 527 H(c) Group exemption number ► Website: ► WWW NOBLENETWORK ORG L Year of formation 1999 **M** State of legal domicile IL Part I Summary Briefly describe the organization's mission or most significant activities
TO INSTILL IN STUDENTS THE SCHOLARSHIP, DISCIPLINE AND HONOR NECESSARY TO SUCCEED IN COLLEGE AND BEYOND Activities & Governance 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 17 4 16 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 1,133 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . Total number of volunteers (estimate if necessary) 6 196 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 71,867,332 93.192.382 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . 6,835,247 8,285,252 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 13,706 144,876 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 187,471 580,050 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 78,903,756 102,202,560 176,925 13 259,226 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 Expenses 43,466,103 53,118,576 5-10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 599,368 b 28,531,891 33,332,260 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 72,174,919 86,710,062 19 Revenue less expenses Subtract line 18 from line 12 6,728,837 15,492,498 Assets or d Balances **Beginning of Current End of Year** 20 Total assets (Part X, line 16) . 81,303,520 99,844,408 21 Total liabilities (Part X, line 26) 54,666,298 57,750,274 22 Net assets or fund balances Subtract line 21 from line 20 26,637,222 42,094,134 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2014-02-05 Signature of officer Date Sian Here JOSEPH DRAGO CHIEF FINANCIAL OFFICER Type or print name and title

Preparer's signature

Firm's name FOSTROW REISIN BERK & ABRAMS LTD

Firm's address - 455 N CITYFRONT PLAZA DRIVE SUITE

CHICAGO, IL 606115313

May the IRS discuss this return with the preparer shown above? (see instructions)

Print/Type preparer's name

JAMES G QUAID

Paid

Preparer

Use Only

Date

✓ Yes ☐ No

P00641738

self-employed

Firm's EIN > 36-2938874

Phone no (312) 670-7444

1		Statement of Progr Check if Schedule O cont by describe the organizatio	ains a response to any q			
- 10 В	LE'S M	IISSION IS TO PREPARE	LOW-INCOME STUDEN		ARSHIP, DISCIPLINE, AND HO	
2		ne organization undertake a rior Form 990 or 990-EZ?			which were not listed on	┌ Yes ┌ No
	If "Ye	es," describe these new ser	vices on Schedule O			
3		ne organization cease cond ces?		nt changes in how it cor	nducts, any program	┌ Yes ┌ No
	If "Ye	es," describe these change	s on Schedule O			
4	exper		d 501(c)(4) organization	s are required to report	ree largest program services, a the amount of grants and alloc	•
4a	(Code	e) (Expe	enses \$ 77,724,222	ıncludıng grants of \$	259,226) (Revenue \$	7,725,622)
	SCHO		HENETWORK PROVIDES A QUA		TING THE NATIONALLY RECOGNIZED IT THE LOW-INCOME POPULATION TO MA	
4b	(Code	e) (Expe	enses \$ 451,531	ıncludıng grants of \$) (Revenue \$	559,630)
	TEAC		WORK OF CHARTER SCHOOLS	AS WELL AS TO THE GENERA	CONDUCTING A DAYCARE CENTER TH AL PUBLIC NOBLE DAY CARE OPENED	
4 c	(Code	e) (Expe	enses \$	ıncludıng grants of \$) (Revenue \$)
4d		er program services (Desc	•			
		penses \$	including grants o) (Revenue \$)
4 e	Tota	al nrogram service evnense	s b 78 175 75 7	₹		

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
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		No
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	Yes	
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		No
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		No
7	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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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? If "Yes," complete Schedule D, Part IV	9		No
LO	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		No
l1	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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)? If "Yes," complete Schedule D, Part X	11f		No
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	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	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
L5	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, Parts II and IV	15		No
L6	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, Parts III and IV	16		No
L 7	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? If "Yes," complete Schedule G, Part I (see instructions)	17		No
L8	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	Yes	
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? If "Yes," complete Schedule J	23	Yes	
24a	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 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," complete Schedule L, Part <i>IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
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	Yes	
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
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		No
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		No
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	Yes	

- 11	Statements Regarding Other 1R5 Fillings and Tax Compliance			-
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 86		. 03	.40
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
		2-		NI.
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		N
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	Does the organization have applied gross resourts that are normally greater than \$1.00,000, and did the	5c		N.I
•	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		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).		1	
	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?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
			1	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			- ' '
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		1	
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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			
	Enter the amount of reserves on hand		1	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

_Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
_	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	Ť		110
, ,	more members of the governing body?	7a		Νo
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) No
	ection B. Policies (This Section B requests information about policies not required by the Internal R Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed►IL
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - ☐ O wn website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JOSEPH DRAGO 1 NORTH STATE STREET FLOOR 7-L CHICAGO, IL (312)450-8932

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

Check if Schedule O contains a response to any question in this Part VII $\,\cdot\,\,\cdot\,\,\cdot\,\,$.

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

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

- 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, or 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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) ALLAN MUCHIN	15 00	Х		х				0	0	0
BOARD CHAIRMAN										
(2) MICHAEL MILKIE CEO	40 00	х		х				220,953	0	26,483
(3) VICTORIA CHOU	1 00									
DIRECTOR - TERM		Х						0	0	0
(4) GUY COMER	1 00									
DIRECTOR		Х						0	0	0
(5) CECIL CURTWRIGHT	1 00									
DIRECTOR		Х						0	0	0
(6) JOHN HARRIS	1 00									
DIRECTOR		Х						0	0	0
(7) REBECA NIEVES HUFFMAN	1 00									
DIRECTOR		Х						0	0	0
(8) HARVEY MEDVIN	2 00									
DIRECTOR		Х						0	0	0
(9) ANNE MUELLER	1 00									
DIRECTOR		Х						0	0	0
(10) MARTIN NESBITT	1 00									
DIRECTOR		X						0	0	0
(11) NANCY GOLDER NORTHRIP	1 00									
DIRECTOR		х						0	0	0
(12) TROY RATLIFF	1 00									
DIRECTOR		х						0	0	0
(13) BRUCE RAUNER	1 00									
DIRECTOR		х						0	0	0
(14) JONATHAN REINSDORF	1 00	-		\vdash		-	\vdash			
		×						0	0	0
DIRECTOR (15) WILLIAM ROWE	1 00					\vdash				
		x						0	0	0
DIRECTOR (16) JEAN SHERIDAN	1 00					-				
		х						0	0	0
DIRECTOR (17) MENNO VERMEULEN	1 00			\vdash						
		×						0	0	0
DIRECTOR	ı	ı	1	ı	1	I	1	ı l		

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

(A) Name and Title	(B) Average hours per week (list any hours for related	more pers and	than on is a dii	one bot rect	not box h ar or/ti	offic rustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensatio from related organization (W- 2/1099	s	(F) Estimated amount of oth compensation from the organization		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	(W- 2/1099-	MISC)	and rela organizat		lated	
(18) DAVID WEINBERG	1 00	×						0		o		C	
DIRECTOR (19) JENNIFER WILSON	1 00												
DIRECTOR		X						0		0		C	
(20) LOU DEROSE	40 00			×				204,000				17,779	
TREASURER & CFO - TERM				L				204,000		0		17,775	
(21) JESSICA FLORES SECRETARY/DIR OF STUDENT ENROLLMENT	40 00			×				66,580		0		6,448	
(22) RHONDA KOCHLEFL	40 00				x			217,325		0		17,845	
CHIEF EXTERNAL AFFAIRS OFFICER	40.00							217,323		\dashv			
(23) ERIC THOMAS ASSISTANT SUPERINTENDENT	40 00				х			170,593		o		21,477	
(24) MICHAEL MADDEN	40 00												
CHIEF OPERATING OFFICER	1 00				X			159,260		0		17,820	
(25) PABLO SIERRA	40 00					х		175,267		0		11,667	
PRINCIPAL (26) DANIEL ALEXANDER	40.00							173,207		-		11,007	
CHIEF ADMINISTRATIVE OFFICER - TERM	40 00					х		149,121		0		16,698	
(27) JOSEPH TENBUSCH	40 00												
PRINCIPAL - TERM						X		148,884		0		10,627	
(28) WILLIAM OLSEN	40 00					х		147,067		0		21,239	
PRINCIPAL (22) YMM 5 COLF	40.00							,					
(29) KYLE COLE CHIEF EDUCATION OFFICER	40 00					х		143,718		0		8,233	
1b Sub-Total			•		1	 	1		<u> </u>	\top			
c Total from continuation sheets to Part	VII, Section A					▶							
d Total (add lines 1b and 1c)		•				>		1,802,768	ı	0		176,316	
Total number of individuals (including b \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more than					
											Yes	No	
3 Did the organization list any former offi on line 1a? <i>If</i> "Yes," complete Schedule J			e, ke	y em	plo	yee, o	r hig	ghest compensate	d employee	_			
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such								om the	3		No_		
ındıvıdual			•	•	•	•	•			4	Yes		
5 Did any person listed on line 1a receive services rendered to the organization?									ndividual for	5		No	
											1		
Section B. Independent Contractor 1 Complete this table for your five highes					4			L	+100.000				

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

(B)	(C)
Description of services	Compensation
LEGAL SERVICES	192,755
LEGAL SERVICES	143,735
TECHNOLOGY	140,790
	Description of services LEGAL SERVICES LEGAL SERVICES

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

Part V	4 4 4 1	Statement of Revenue					
		Check if Schedule O contains a respo	nse to any question I				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
u 20	1a	Federated campaigns 1a					
ant	ь	Membership dues 1b					
	С	Fundraising events 1c	67,625				
ffs, ir A	d	Related organizations 1d					
, Gi	e	Government grants (contributions) 1e	82,859,925				
Contributions, Gifts, Grants and Other Similar Amounts	_	All other contributions, gifts, grants, and 1f					
uti	'	similar amounts not included above					
₫Ħ	g	Noncash contributions included in lines 1a-1f \$	12,992				
Cont and	h	Total. Add lines 1a-1f	🕌	93,192,382			
			Business Code				
Program Serwce Revenue	2a	FOOD PROGRAM	611110	3,916,870	3,916,870		
95 84	ь	SCHOOL FEES	611110	3,281,103	3,281,103		
ce F	С	REGISTRATION & TUITION	611110	559,630	559,630		
erw	d	UNIFORM FEES	611110	423,029	423,029		
S =	e	SCHOOL FUNDRAISING	611110	104,620	104,620		
∑ Gra	f	All other program service revenue					
ž	g	Total. Add lines 2a-2f	+	8,285,252			
	3	Investment income (including dividen		87,111			87,111
	4	and other similar amounts) Income from investment of tax-exempt bond	nroceeds •	87,111			87,111
	5	Royalties	proceeds •				
		(ı) Real	(II) Personal				
	6a	Gross rents					
	ь	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of 3,136,666 assets other than inventory					
	ь	Less cost or					
		other basis and 3,078,901 sales expenses					
	C	Gain or (loss) 57,765		57,765			57,765
	d 8a	Net gain or (loss)	· · · · •	37,703			37,703
Other Revenue		events (not including \$ 67,625 of contributions reported on line 1c) See Part IV, line 18					
 	_	а	71,512				
井		Less direct expenses b Net income or (loss) from fundraising		-2,399			-2,399
,	c 9a	Gross income from gaming activities See Part IV, line 19	events	2,333			2,33.
		a					
	b c	Less direct expenses b Net income or (loss) from gaming acti					
		Gross sales of inventory, less					
		returns and allowances .					
		a					
	b c	Less cost of goods sold b Net income or (loss) from sales of inv	entory -				
	_	Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900099	582,449			582,449
	ь						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	🕨	582,449			
	12	Total revenue. See Instructions .		102,202,560	8,285,252	0	724,926
	1		l	102,202,300	0,203,232	U	124,920

Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	other organizat	ons must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa				
	t include amounts reported on lines 6b, , 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 United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	259,226	259,226		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,163,098	1,028,644	119,450	15,004
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	44,297,174	39,338,460	4,566,465	392,249
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,819,801	1,752,342	59,199	8,260
9	Other employee benefits	3,797,330	3,477,628	298,472	21,230
10	Payroll taxes	2,041,173	1,744,233	269,918	27,022
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,493,466	1,839,862	574,295	79,309
12	Advertising and promotion	, ,	, ,	,	,
13	Office expenses	1,386,459	1,244,402	131,964	10,093
14	Information technology	3,069,482	2,913,630	155,489	363
15	Royalties				
16	Occupancy	4,925,565	4,392,925	532,640	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1,679,911	1,479,281	200,630	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,704,325	2,562,129	142,196	
23	Insurance	358,474	358,474		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	FOOD PROGRAM	4,027,936	3,904,738	123,198	
b	EDUCATION MATERIALS	2,678,641	2,663,927	14,714	
C	PROF DEVELOPMENT	1,389,360	1,149,560	218,100	21,700
d	FIELD STUDIES	1,248,790	1,243,858	4,932	
е	All other expenses	7,369,851	6,822,434	523,279	24,138
25	Total functional expenses. Add lines 1 through 24e	86,710,062	78,175,753	7,934,941	599,368
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)				

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this	all	<u> </u>	(A)		· · · · · · · · · · · · · · · · · · ·	
					Beginning of year		(B) End of year	
	1	Cash—non-interest-bearing			10,542,421		7,881,650	
	2	Savings and temporary cash investments			2,554,190	2	2,502,923	
	3	Pledges and grants receivable, net			4,013,726	3	6,027,360	
	4	Accounts receivable, net			3,963,574	4	6,120,948	
	5	Loans and other receivables from current and former officers, diversity employees, and highest compensated employees. Complete Par Schedule L	ecto	rs, trustees, key of		5		
ts	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and coand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L	uting employers		6			
Assets	7	Notes and loans receivable, net			7			
₹	8	Inventories for sale or use			8			
	9	Prepaid expenses and deferred charges						
	10a	Land, buildings, and equipment cost or other basis Complete	10a	72,734,375	1,314,931	9	2,412,748	
	Ь	F	10b	11,221,695	46,039,253	10c	61,512,680	
	11	Investments—publicly traded securities			3,453,956	11	3,518,982	
	12	Investments—other securities See Part IV, line 11		12				
	13	Investments—program-related See Part IV, line 11				13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11			9,421,469	15	9,867,117	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			81,303,520		99,844,408	
	17	Accounts payable and accrued expenses			4,264,577	17	6,118,780	
	18	Grants payable				18		
	19	Deferred revenue			1,400,931	19	3,332,437	
	20	Tax-exempt bond liabilities			23,097,153	20	22,417,585	
φ.	21	Escrow or custodial account liability Complete Part IV of Scheo				21	<u> </u>	
<u>a</u>	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualific	s, tr					
Liabilit		persons Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrelated third parties			20,446,879	23	20,156,651	
	24	Unsecured notes and loans payable to unrelated third parties				24		
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part	: X of	Schedule				
		D			5,456,758		5,724,821	
	26	Total liabilities. Add lines 17 through 25			54,666,298	26	57,750,274	
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ► □ lines 27 through 29, and lines 33 and 34.	and	complete				
<u>8</u>	27	Unrestricted net assets			20,620,933	27	33,119,247	
<u>а</u>	28	Temporarily restricted net assets	•		6,016,289	28	8,974,887	
Ξ	29	Permanently restricted net assets				29		
r Fu		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	re ►	┌─ and				
9	30	Capital stock or trust principal, or current funds				30		
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund .				31		
Ą	32	Retained earnings, endowment, accumulated income, or other fu	nds			32		
Net	33	Total net assets or fund balances			26,637,222	33	42,094,134	
Ż	34	Total liabilities and net assets/fund balances			81,303,520	34	99,844,408	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		102.2	202,560
2	Total expenses (must equal Part IX, column (A), line 25)				
_		2		86,7	10,062
3	Revenue less expenses Subtract line 2 from line 1	3		15,4	192,498
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	_		26.6	
5	Net unrealized gains (losses) on investments	4		26,0	37,222
,	Net unrealized gains (1033es) on investments	5			-35,586
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)				
40		9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		42,0	94,134
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				1
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	it of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the i	required	3b	Yes	

Software ID: **Software Version:**

EIN: 36-4241970

Name: NOBLE NETWORK OF CHARTER SCHOOLS

Form 990, Part VII - Compensation of Compensated Employees, and Independent				uste	es,	, Key	/ En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an dire	(C on (do than	o not one son is er an trust	box s bo d a ee)	th	_	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former			organizations
ALLAN MUCHIN BOARD CHAIRMAN	15 00	х		x				0	0	0
MICHAEL MILKIE CEO	40 00	х		х				220,953	0	26,483
VICTORIA CHOU DIRECTOR - TERM	1 00	х						0	0	0
GUY COMER DIRECTOR	1 00	х						0	0	0
CECIL CURTWRIGHT DIRECTOR	1 00	х						0	0	0
JOHN HARRIS DIRECTOR	1 00	х						0	0	0
REBECA NIEVES HUFFMAN DIRECTOR	1 00	х						0	0	0
HARVEY MEDVIN DIRECTOR	2 00	х						0	0	0
ANNE MUELLER DIRECTOR	1 00	х						0	0	0
MARTIN NESBITT DIRECTOR	1 00	х						0	0	0
NANCY GOLDER NORTHRIP DIRECTOR	1 00	х						0	0	0
TROY RATLIFF DIRECTOR	1 00	х						0	0	0
BRUCE RAUNER DIRECTOR	1 00	х						0	0	0
JONATHAN REINSDORF DIRECTOR	1 00	х						0	0	0
WILLIAM ROWE DIRECTOR	1 00	х						0	0	0
JEAN SHERIDAN DIRECTOR	1 00	х						0	0	0
MENNO VERMEULEN DIRECTOR	1 00	х						0	0	0
DAVID WEINBERG DIRECTOR	1 00	х						0	0	0
JENNIFER WILSON DIRECTOR	1 00	х						0	0	0
LOU DEROSE TREASURER & CFO - TERM	40 00			х				204,000	0	17,779
JESSICA FLORES SECRETARY/DIR OF STUDENT ENROLLMENT	40 00			х				66,580	0	6,448
RHONDA KOCHLEFL CHIEF EXTERNAL AFFAIRS OFFICER	40 00				х			217,325	0	17,845
ERIC THOMAS ASSISTANT SUPERINTENDENT	40 00				х			170,593	0	21,477
MICHAEL MADDEN CHIEF OPERATING OFFICER	40 00 1 00				х			159,260	0	17,820
PABLO SIERRA PRINCIPAL	40 00					х		175,267	0	11,667

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

40 00

KYLE COLE

CHIEF EDUCATION OFFICER

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	than pers office ctor/	not one son i er an trust	box s bo d a tee)	th	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
DANIEL ALEXANDER CHIEF ADMINISTRATIVE OFFICER - TERM	40 00				х		149,121	0	16,698
JOSEPH TENBUSCH PRINCIPAL - TERM	40 00				х		148,884	0	10,627
WILLIAM OLSEN PRINCIPAL	40 00				х		147,067	0	21,239

143,718

0

8,233

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As Filed Data -

DLN: 93493042003434

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

NOBLE NETWORK OF CHARTER SCHOOLS

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Open to Public Inspection

									36-4241		
	rt I			blic Charity Sta						nstruction	IS.
	organı:		•	te foundation becaus	•			•	•		
1		A chur	ch, convent	ion of churches, or a	ssociation of	fchurches d	described in s	ection 170	(b)(1)(A)(i).		
2	굣	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	tach Sched	lule E)				
3	Γ	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon desci	rıbed ın sectio	on 170(b)(:	L)(A)(iii).		
4	Г	A medi	cal researc	h organization opera	ted ın conjun	ction with a	a hospital des	cribed in s	ection 170(b)	(1)(A)(iii).	Enter the
_	_			ity, and state							
5	ı	_	•	erated for the benefi	_	or univers	ity owned or c	perated by	a governmen	tal unit des	scribed in
	_			(A)(iv). (Complete P	•						
6	<u> </u>			local government o	_						
7				at normally receives			support from	a governn	nental unit or f	rom the ge	neral public
8	_			on 170(b)(1)(A)(vi). : described in sectio i			mplete Part I	т \			
9	<u>'</u>		•	at normally receives	. , . , .	, , , ,	•	•	abutions mor	borchin for	os and gross
9	'	_		rities related to its e			* *		•	-	· -
				oss investment inco	•	=					
		•		ganızatıon after June				•		tax) nom t	74311163363
10	\vdash	•	,	ganized and operate	•			•	•		
11	<u>'</u>	-		ganized and operated ganized and operated	•					to carry ou	t the nurneces of
	'	_		ly supported organiz	,				,	,	
				bes the type of supp							
		а	Type I	b Type II c	Type II	I - Functior	nally integrate	ed d	Type III - N	on-functior	nally integrated
е	Γ			ox, I certify that the							
				ion managers and ot	her than one	or more pu	blicly support	ed organiz	atıons descrıb	ed in secti	on 509(a)(1) or
f			1509(a)(2)	received a written d	etermination	from the IE	OS that it is a	Type I Ty	ne II or Type	III suppoi	ting organization
•			this box	received a written a	ccciiiiiiacioii	nom the m	(S that it is a	1 9 0 0 1 , 1 9	pc 11, 01 1 ypc	III Suppoi	ring organization,
g		Since A	ugust 17, 2	2006, has the organ	ızatıon accep	oted any gif	t or contributi	on from an	y of the		•
			ng persons?								
		., .		rectly or indirectly o	•		•	persons d	escribed in (ii		Yes No
		•		governing body of th		J	n?				lg(i)
			•	er of a person descr							g(ii)
				lled entity of a perso						11	g(iii)
h		Provide	e the followi	ng information about	the support	ed organiza [.]	tion(s)				
	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
	suppoi			organization	organizati		the organi	zation	organizat	ion in	monetary
0	rganiz	ation		(described on	col (i) lis		in col (i)		col (i) org		support
				lines 1-9 above or IRC section	your gove docume		suppoi	rt?	ın the U	S7	
				(see	docume	IIL					
				instructions))	-						\dashv
					Yes	No	Yes	No	Yes	No	
						-		-		1	
											
I oto				1			1		1		

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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 IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493042003434

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NOBLE NETWORK OF CHARTER SCHOOLS 36-4241970 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT	T
	filed Form 5768 (election under section 501(h)).	

<i></i>	For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		(a)			(b)		
activ	vity.	No	4	A mou	nt			
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of							
а	Volunteers?		No					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No					
C	Media advertisements?		No					
d	Mailings to members, legislators, or the public?		No					
е	Publications, or published or broadcast statements?		No					
f	Grants to other organizations for lobbying purposes?		No					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo					
i	Other activities?	Yes				1,000		
j	Total Add lines 1c through 1i					1,000		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo					
b	If "Yes," enter the amount of any tax incurred under section 4912							
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912							
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?							
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n		
					Yes	No		
1	Were substantially all (90% or more) dues received nondeductible by members?			1				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3				
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Iine 3, is answered "Yes."							
1	Dues, assessments and similar amounts from members	1						
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).							
а	Current year	2a						
ь	Carryover from last year	2b						

Taxable amount of lobbying and political expenditures (see instructions)Part IV Supplemental Information

political expenditure next year?

c Total

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES		THE ORGANIZATION ENGAGED THE SERVICES OF A LEGAL FIRM TO PROVIDE ADVICE RELATING TO PROPOSED STATE LEGISLATION DIRECTLY AFFECTING THE ORGANIZATION AND ITS PROGRAM SERVICE REVENUES

2c 3

4

5

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493042003434

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

► Attach to Form 990. ► See separate instructions.

Supplemental Financial Statements

Open to Public

Interna	l Revenue Service	► Attach to Form	m 990. ► See separate instructions.		Inspect	ion
	me of the organ			Employer identific	ation numbe	r
NO	BLE NETWORK OF C	HARTER SCHOOLS		36-4241970		
Pa	rt I Organ	izations Maintaining Donor Adv	vised Funds or Other Similar F		s. Complet	e if the
	organiz	zation answered "Yes" to Form 990	· · · · · · · · · · · · · · · · · · ·	T		
_			(a) Donor advised funds	(b) Funds and	other accou	nts
1	Total number a					
2	55 5	tributions to (during year)				
3		nts from (during year)				
4		ue at end of year				
5		zation inform all donors and donor adviso organization's property, subject to the or		nor advised	☐ Yes	┌ No
6	used only for c conferring imp	zation inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?	it of the donor or donor advisor, or for a	any other purpose	┌ Yes	┌ No
Pa		rvation Easements. Complete if		to Form 990, Part I	V, line 7.	
2	Preservation Preservation	conservation easements held by the org on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a	or education) Preservation of a Preservation of a	certified historic struc	cture	
		he last day of the tax year				
	Tatal number o	of conservation easements			End of the	Year
a				2a		
Ь	_	restricted by conservation easements	ama atmustuma inaliidad in (a)	2b		
С.		servation easements on a certified histo		2c		
d		servation easements included in (c) acq ure listed in the National Register	Julied after 8/17/08, and not on a	2d		
3	Number of con	servation easements modified, transferr	ed, released, extinguished, or terminat	ed by the organization	during	
	the tax year 🛌	<u> </u>				
4	Number of stat	tes where property subject to conservati	ion easement is located be			
5	Does the organ	nization have a written policy regarding t f the conservation easements it holds?		ndling of violations, and	d Yes	┌ No
6	Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments during the year		
7	-	enses incurred in monitoring, inspecting	ı, and enforcıng conservatıon easement	ts during the year		
8	Does each cor	nservation easement reported on line 2(o 70(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 170(h)(4)(B)(ı)	┌ Yes	┌ No
9	balance sheet,	escribe how the organization reports cor , and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financia			
Par		izations Maintaining Collection ete if the organization answered "Y		or Other Similar	Assets.	
1a	works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	, or research in further		
b	works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for public exhibition, education,			IC
	(i) Revenues i	ncluded in Form 990, Part VIII, line 1		► \$		
	(ii) Assets Inc	luded in Form 990, Part X		► \$		
2	If the organiza	tion received or held works of art, histor ints required to be reported under SFAS		for financial gain, prov		
а	Revenues incli	uded in Form 990, Part VIII, line 1		► \$		

b Assets included in Form 990, Part X

	Organizations Maintaining Co											ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	as, cr	песк	·		_		_	ise of	ITS	
а	Public exhibition		d	Г	Loan	orexo	hange progr	ams				
b	Scholarly research		e	Γ	Othe	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and expla	ıın hov	w the	y furthe	er the	organızatıor	ı's ex	cempt purpos	e in		
5	During the year, did the organization solicit o								nılar	_		_
D.	assets to be sold to raise funds rather than t								'aall ka Fassa		Yes	No
Par	Part IV, line 9, or reported an an						n answere	a "Y	es" to Forn	1 990	J,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	edıary	forc	ontribu	itions	or other ass	ets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		F					
							_			Amou	ınt	
С	Beginning balance						_	1c				
d	Additions during the year						_	1d				
е	Distributions during the year							1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatio	n has	been p	orovided in P	art :	XIII			Г
Pa	rt V Endowment Funds. Complete											
		(a)Current year	(b)) Prior	year	b (c) ⊺	wo years back	(d)	Three years ba	:k (e	Four ye	ears back
1a	Beginning of year balance							╄				
Ь	Contributions							+		-		
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curi	rent year end balan	ce (lın	ne 1g	, colum	ın (a))	held as					
а	Board designated or quasi-endowment 🕨											
ь	Permanent endowment ►											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that	are held	danda	admınıstere	d for	the			
	organization by								Г.) - (i)	Yes	No
	(i) unrelated organizations					•		•	-	Ba(i) Ba(ii)		
Ь	(ii) related organizations							٠.	· · · [3b	<u> </u>	
4	Describe in Part XIII the intended uses of th	•						-	· · · L		<u> </u>	
Par	t VI Land, Buildings, and Equipme					10.						
	Description of property		·		Cost or s (invest		(b) Cost or of basis (other		(c) Accumula depreciatio		(d) Bo	ok value
1a	Land			1			536	,636		\dashv		536,636
b	Buildings						7,360	,772	529	,014		6,831,758
С	Leasehold improvements						61,282	,959	9,429	,921		1,853,038
d	Equipment						3,422		1,262			2,159,894
e	Other						131	,354				131,354
	I. Add lines 1a through 1e (Column (d) must e											

Part VII Investments—Other Securities. See			
(a) Description of security or category	(b)Book value	(c) Method o	
(including name of security)		Cost or end-of-ye	ar market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
	+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	-		
Part VIII Investments—Program Related. Se	o Form 000 Dart V line	1 O	
		1	<u> </u>
(a) Description of investment type	(b) Book value	(c) Method o	
		Cost or end-of-ye	ear market value
	+	<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, III	ne 15.		
(a) Descri			(b) Book value
	561011		
(1) BOND ISSUANCE COSTS, NET			2,305,523
(2) CASH & INVESTMENTS - RESTRICTED BY BOND			2,584,447
(3) CASH - RESTRICTED BY NMTC			
			2,603,495
(4) INVESTMENTS - LEASE SECURITY DEPOSIT			1,444,158
(5) DEPOSITS			300,418
	TION		
(6) DUE FROM NOBLE NETWORK EDUCATION FOUNDA	110 N		128,806
(7) INVESTMENTS - RESTRICTED FOR STUDENTS SCH	OLARSHIPS		500,270
		1	
Tabal (Caluman /h) annah annah 5 200 0 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	- · ·		0.00= 11=
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15			9,867,117
Part X Other Liabilities. See Form 990, Part >	K, line 25.		
1 (a) Description of liability	(b) Book value		
Federal income taxes			
DEFERRED RENT	2,606,439		
DEFERRED LEASE INCENTIVE	3,118,382		
	<u> </u>		
-			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	5,724,821		
2. Fin 48 (ASC 740) Footnote In Part XIII, provide the tex	. L . C L L C		A - A - A - A - A - A - A - A - A - A -

j Par	Reconciliation of Revenue per Audited Financial Statements with Revenue per Retur	<u>n</u>
1	Total revenue, gains, and other support per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains 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	
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	
Part	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn
1	Total expenses and losses per audited financial statements	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25	
а	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:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	
Part	t XIII Supplemental Information	
Com	nplete this part to 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

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493042003434

OMB No 1545-0047

2012

2012

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

NOBLE NETWORK OF CHARTER SCHOOLS

Schools

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

► Attach to Form 990 or Form 990-EZ.

Employer identification number

36-4241970

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? 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? 3. Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the period of solicitation for students, or during the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 4. Does the organization maintain the following? 4. Does the organization maintain the following? 5. Records indicating the racial composition of the student body, faculty, and administrative staff? 6. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 6. Copies of all material used by the organization or on its behalf to solicit contributions? 6. If you answered "No" to any of the above, please explain If you need more space, use Part II 7. Does the organization discriminate by race in any way with respect to a Students' nights or privileges? 7. Sol Does the organization discriminate by race in any way with respect to a Students' nights or privileges? 7. Sol Does the organization receive any financial assistance? 8. No 8. No 9. Admissions policies? 9. Sol No 1. Yes 6. No 1. Yes	Pa	rt I		YES	NO
brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 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 need more space use Part II 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4 Copies of all material used by the organization or on its behalf to solicit contributions? 4 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 Does the organization of faculty or administrative staff? 5 Does the organization of the financial assistance? 6 Does the organization of the financial assistance? 7 Does the organization of the student body, please explain If you need more space, use Part II 8 Does the organization of the students and ever been revoked or suspended? 8 Does the organization of the students and ever been revoked or suspended? 9 Does the organization receive any financial aid or assistance from a governmental agency? 10 Does the organization of the students an	1		1	Yes	
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If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5 No b Admissions policies? 5 Employment of faculty or administrative staff? 5 C No d Scholarships or other financial assistance? 5 Educational policies? 5 No f Use of facilities? 5 No h Other extracurricular activities? 1 If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6 Does the organization receive any financial aid or assistance from a governmental agency? 5 Has the organization receive any financial aid or assistance from a governmental agency? 6 No If you answered "Yes" to either line 6 a or line 6 b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05		with student admissions, programs, and scholarships?	4c	Yes	
a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II foa Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? b Has the organization receive any financial aid or assistance from a governmental agency? c As a Yes fob No If you answered "Yes" to either line 6 a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 0.1 through 4 0.5	d		4d_	Yes	
c Employment of faculty or administrative staff? 5c No d Scholarships or other financial assistance? 5d No e Educational policies? 5e No f Use of facilities? 5f No g Athletic programs? 5g No h Other extracurricular activities? 1f you answered "Yes" to any of the above, please explain If you need more space, use Part II 5a Does the organization receive any financial aid or assistance from a governmental agency? 5b Has the organization's right to such aid ever been revoked or suspended? 5c No No No 1f you answered "Yes" to 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	_		5a		No
d Scholarships or other financial assistance? Educational policies? 5e No f Use of facilities? 5f No g Athletic programs? 5g No h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to 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	b	Admissions policies?	5b		No
e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	c	Employment of faculty or administrative staff?	5c		No
f Use of facilities? g Athletic programs? 5g No h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to 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					
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to 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					
If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to 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	g	Athletic programs?	5g		No
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to 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	h		<u>5h</u>		No
If you answered "Yes" to 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				Yes	No.
	_	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05		Yes	IN O

Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	NOBLE NETWORK OF CHARTER SCHOOLS FULLY DISCLOSES ITS NONDISCRIMINATORY POLICY TO ALL POTENTIAL STUDENTS COPIES OF THIS POLICY CAN BE OBTAINED UPON REQUEST
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE SCHOOL RECEIVES PER CAPITA TUITION FROM CHICAGO PUBLIC SCHOOLS AND STATE AND FEDERAL GRANTS THROUGH OTHER GOVERNMENTAL AGENCIES

Schedule E (Form 990 or 990-EZ) 2012

NOBLE NETWORK OF CHARTER SCHOOLS

DLN: 93493042003434

OMB No 1545-0047

Open to Public

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Supplemental Information Regarding

Inspection

Employer identification number

36-4241970

Part I	Fundraising Acti	i vities. Complete	ıf the or	ganızatı	on answered "Yes" t	o Form 990, Part IV	, lıne 17.
a	all solicitations ternet and email solid one solicitations -person solicitations e organization have a employees listed in f	citations written or oral agree Form 990, Part VII) : paid individuals or e	ment with or entity entities (f	e f g n any indi in connec	Following activities Che Solicitation of non Solicitation of gov Special fundraising vidual (including officer stion with professional fires)	-government grants ernment grants g events -s, directors, trustees undraising services?	F Yes F No ndraiser is
Total		(ii) Activity	fundrais custo contrib Yes	Did ser have ody or crol of outlons? No	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization

_		G (Form 990 or 990-EZ) 2012				Page 2		
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi					
		<u> </u>	(a) Event #1 TASTE OF COLLEGE 2013 (event type)	(b) Event #2 FALL DINNER (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))		
₽	1	Gross receipts	61,411	52,650	25,076	139,137		
Revenue	2	Less Contributions	450	52,650	14,525	67,625		
<u>~</u>	3	Gross income (line 1 minus line 2)	60,961		10,551	71,512		
	4	Cash prizes	5,286			5,286		
ဟ	5	Noncash prizes						
Direct Expenses	6	Rent/facility costs	2,500	399	1,860	4,759		
	7	Food and beverages .	25,177	6,966	21,585	53,728		
	8	Entertainment	3,555			3,555		
	9	Other direct expenses .	1,661	2,274	2,648	6,583		
	10	10 Direct expense summary Add lines 4 through 9 in column (d)						
	11	Net income summary Combine Ii	ne 3, column (d), and line	10	•	-2,399		
Par	t II	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii	rganization answered '	'Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than		
Revenue		+==,	(a) Bingo	(b) Pull tabs/Instant pingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
<u>~</u>	1	Gross revenue						
enses	2	Cash prizes						
cben	3	Non-cash prizes						
Direct Exp	4	Rent/facility costs						
ă	5	Other direct expenses						
	6	Volunteerlabor	☐ Yes ☐ No	┌ Yes ┌ No	☐ Yes ☐ No			
	7	Direct expense summary Add line	s 2 through 5 ın column (d	i)				
	8	Net gaming income summary Com	ibine lines 1 and 7 in colu	mn (d)	🕨			
9 a b	Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states?							
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspen	ded or terminated during	the tax year?			

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

OMB No 1545-0047

DLN: 93493042003434

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

ame or the organization						Employer identification	on number
OBLE NETWORK OF CHARTER	SCHOOLS					36-4241970	
Part I General Informa	ition on Grants and	d Assistance				•	
Does the organization maint the selection criteria used to Describe in Part IV the orga	o award the grants or as	sıstance?					▽ Yes
Part II Grants and Othe Form 990, Part IV,				United States. Com rt II can be duplicated			es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
_							
Enter total number of sectionEnter total number of other of						· · · , –	
or Paperwork Reduction Act Notice.			-	Cat No 50055P			le I (Form 990) 2012

Schedule I	(Form 990) 2012	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, F	Part IV, line 22.
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS	323	259,226			

Part IV Supplemental In	formation
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Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
		SCHOLARSHIPS SCHEDULE I PART I #2 ELIGIBILITY - IN ORDER TO EARN A SCHOLARSHIP FROM THE NOBLE NETWORK ALUMNI OFFICE, A STUDENT MUST COMPLETE AN APPLICATION CRITERIA - APPLICANTS MUST HAVE A 2 0 MINIMUM CUMULATIVE GPA RECIPIENTS WILL BE CHOSEN BASED UPON A DISPLAY OF VALUES FOUND CONSISTENT WITHIN THE ENTIRE NOBLE NETWORK SCHOLARSHIP - THE STUDENT DEMONSTRATES A COMMITMENT TO HARD WORK AND GETTING EXTRA HELP TO ACHIEVE ACADEMIC GOALS DISCIPLINE - THE STUDENT SERVES AS AN EXCELLENT ROLE MODEL FOR STUDENTS THROUGH THEIR BEHAVIOR AND SPIRIT HONOR - THE STUDENT SHOWS CONCERN FOR OTHERS AND IS WILLING TO HELP THE NOBLE NETWORK ACHIEVE ITS MISSION THE NETWORK ALUMNI COORDINATOR WILL VERIFY ENROLLMENT IN COLLEGE AND ADHERENCE TO THE TRAITS OF SCHOLARSHIP, DISCIPLINE, AND HONOR AS OUTLINED ABOVE THE AMOUNT OF THE SCHOLARSHIP WILL BE BASED ON NEED AND AVAILABLE FUNDS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493042003434

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

NOBLE NETWORK OF CHARTER SCHOOLS

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

36-4241970 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in 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 idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, 2 directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 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 Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Yes 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

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 in 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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to 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

Identifier	Return Reference	Explanation
	,	SOME MEMBERS OF SENIOR MANAGEMENT WERE COMPENSATED WITH BONUSES BASED ON METRICS IMPORTANT TO THE FINANCIAL AND OPERATIONAL SUCCESS OF THE ORGANIZATION, INCLUDING CONTRIBUTIONS RAISED, GRANTS FROM FOUNDATIONS, INCREASES IN AVERAGE PER PUPIL FUNDING, AND THE SUCCESSFUL EXECUTION OF CERTAIN FINANCING AGREEMENTS

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 36-4241970

Name: NOBLE NETWORK OF CHARTER SCHOOLS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule 3, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees											
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form			
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ			
MICHAEL MILKIE	(ı) (ıı)	198,453 0	20,000	2,500	13,892 0	12,591	247,436 0	0			
LOU DEROSE	(ı) (ıı)	_	30,600 0	0	4,000 0	13,779 0	221,779 0	0			
RHONDA KOCHLEFL	(ı) (ıı)	_	60,000 0	0	4,000 0	13,845 0	235,170 0	0			
ERIC THOMAS	(ı) (ıı)		2,000 0	0	10,413 0	11,064 0	192,070	0			
MICHAEL MADDEN	(ı) (ıı)		15,000 0	0	4,000 0	13,820	177,080 0	0			
PABLO SIERRA	(ı) (ıı)	·	40,000 0	28,400	7,481 0	4,186 0	186,934 0	0			
DANIEL ALEXANDER	(ı) (ıı)	1	2,000	27,649	4,000	12,698	165,819 0	0			
JOSEPH TENBUSCH	(ı) (ıı)	1	41,000 0	5,128	7,193 0	3,434 0	159,511 0	0			
WILLIAM OLSEN	(ı) (ıı)		40,000 0	200	7,481 0	13,758	168,306 0	0			
KYLE COLE	(ı) (ıı)	132,965 0	10,000	753 0	4,000	4,233 0	151,951 0	0			

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DLN: 93493042003434

2012

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number

NO	BLE NETWORK OF CHARTER SC	HUUIS															
	BLE NETWORK OF CHARTER 3C	.110013							36	-42419	70						
Р	art I Bond Issues				T												
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price		(f) Description (of purpose	(g) De	feased	beh	On alf of suer		Pool ncing			
									Yes	No	Yes	No	Yes	No			
A	ILLINOIS FINANCE AUTHORITY	86-1091967	45203AAM9	08-30-2006	11,383,5!		IFA SERIES 2006 - RENOVATION O			x		x		Х			
В	ILLINOIS FINANCE AUTHORITY	86-1091967	45203ABN6	05-31-2007	13,788,1!	50 IF	FA SERIES 2007 ENOVATION O	-		х		×		Х			
Part II Proceeds																	
					Α		В			С			D				
1	A mount of bonds retired																
_2	A mount of bonds legally defea	ısed —————															
3	Total proceeds of issue				11,383,550 13,788,150												
4	Gross proceeds in reserve fun	8	11,5	12	979,078												
5	Capitalized interest from proce	5	42,0	57	824,788												
6	Proceeds in refunding escrows																
7	Issuance costs from proceeds			2	25,00	00	272,400				I						
8	Credit enhancement from proc				8	19,30	09	936,312									
9	Working capital expenditures f	from proceeds															
10	Capital expenditures from prod	ceeds			6,9	63,9	74 10	,775,572									
11	Other spent proceeds				2,0	21,69	98										
12	Other unspent proceeds																
13	Year of substantial completion	<u> </u>			2006		2007										
					Yes	No	Yes	No	Yes	N	lo	Yes	;	No			
14	Were the bonds issued as part	t of a current refundı	ng issue?		×			х									
15	Were the bonds issued as part	t of an advance refur	nding issue?			Х		Х				1					
16	Has the final allocation of proceeds been made?				X		X										
17				 													
	allocation of proceeds?			Х		X											
Pa	rt IIII Private Business U		1 .														
				Yes	No	Yes	No	Yes	C N	lo	Yes	<u>D</u>	No				
1	1 Was the organization a partner in a partnership, or a member of an LLC, which owned					X		X		†			+				
					1	^		/\ I						,			

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds?

financed property?

Χ

Part Private Business Use (Continued) C D Α В Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 % 0 00000% 0 00000% other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 0 00000% 0 00000% 501(c)(3) organization, or a state or local government Total of lines 4 and 5 0 00000% 0 00000% % % Does the bond issue meet the private security or payment test? 7 Χ Х Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of % % % % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С Α D Yes Yes No No Yes No Yes No Has the issuer filed Form 8038-T? 1 Χ Χ If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Exception to rebate? Х Χ b No rebate due? Х Х C If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was a hedge terminated?

Part IV Arbitrage (Continued)

SCHEDULE K, PART III, LINE 9 &

PART IV, LINE 7 - WRITTEN PROCEDURES

			Yes	No	Yes	No	Yes	No	Yes	No		
5a	Were gross proceeds invested in contract (GIC)?	a guaranteed investment		Х		Х						
b	Name of provider											
С	Term of GIC											
d	Was the regulatory safe harbor for value of the GIC satisfied?	or establishing the fair market										
6	Were any gross proceeds investor period?	ed beyond an available temporary		x		Х						
7	Has the organization established the requirements of section 148	·		x		х						
Pa	rt V Procedures To Unde	rtake Corrective Action										
			<i>A</i>	1	В		С		D)		
			Yes	No	Yes	No	Yes	No	Yes	No		
1	Has the organization established that violations of federal tax requ and corrected through the volunt self-remediation is not available	urements are timely identified ary closing agreement program if		×		х						
P	art VI Supplemental Info	ormation. Complete this part to	<u>provide additioi</u>	<u>nal informatio</u>	on for respor	ises to quest	ions on Sche	<u>edule K (see</u>	instructions)).		
	Identifier	Return Reference				Explana	ition					
COL	EDULE K, PART II, LINE 11, LUMN A - OTHER SPENT		\$2,021,698 OF EXEMPT BONDS						IOR ISSUE O	FTAX-		

Α

В

THE ORGANIZATION ADOPTED WRITTEN PROCEDURES AFTER JUNE 30, 2013 THESE PROCEDURES ARE

CURRENTLY IN EFFECT BEGINNING WITH THE JUNE 30, 2014 FISCAL YEAR

С

Schedule K (Form 990) 2012

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DLN: 93493042003434

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2012
Open to Public

Inspection

Name of the organization NOBLE NETWORK OF CHARTER SCHOOLS	Employer identifi	cation number
	36-4241970	

Identifier	Return Reference	Explanation							
	FORM 990, PART VI, SECTION B, LINE 11	MANAGEMENT ASSISTS IN PREPARING AND THEN REVIEWING A DRAFT OF FORM 990 PREPARED BY THE ORGANIZATION'S CPA FIRM A FINAL COPY IS PROVIDED TO THE BOARD OF DIRECTORS BEFORE FILING WITH THE IRS							
	FORM 990, PART VI, SECTION B, LINE 12C	THIS POLICY REQUIRES ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES TO DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO CONFLICTS NOBLE NETWORK OF CHARTER SCHOOLS ENFORCES AND MONITORS ITS COMPLIANCE BY REVIEWING DISCLOSURE STATEMENTS REGULARLY AND REQUIRES ALL PARTIES TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE THROUGHOUT THE YEAR							
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS DETERMINES THE COMPENSATION FOR THE ORGANIZATION'S CEO AND SUPERINTENDENT SALARY FOR ALL OTHER EMPLOYEES IS DETERMINED BY MANAGEMENT'S RESEARCH OF COMPARABLE POSITIONS AT COMPARABLE ORGANIZATIONS THE CEO AND SUPERINTENDENT REVIEW AND APPROVE THE COMPENSATION ACCORDINGLY							
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION FURNISHES THIS INFORMATION UPON REQUEST							

DLN: 93493042003434

SCHEDULE R (Form 990)

Name of the organization NOBLE NETWORK OF CHARTER SCHOOLS

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2012

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

				36-42419	70			
Part I Identification of Disregarded Entities (C	omplete if the organizatio	n answered "Yes" to	Form 990, Par	rt IV, line 33.)				
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Di	(f) irect controlling entity		
(1) NOBLE DAY CARE L3C 1333 W CHICAGO AVE CHICAGO, IL 60642 26-3214132	DAY CARE	IL	29,127	153,409	NOBLE NETV SCHOOLS	NORK OF CHARTER	<u> </u>	
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations du		1			art IV, line			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	on Public charity (if section 501)		(f) Direct controlling entity	Section (13) co ent	ontrolle tity?
(1) NOBLE NETWORK EDUCATION FOUNDATION 1 N STATE STREET 7TH FLOOR	TYPE 3 SUPPORTING ORGANIZATION	IL	501(C)(3)	11C		BLE NETWORK OF ARTER SCHOOLS	Yes Yes	No
CHICAGO, IL 60602 32-0342169								<u> </u>
For Paperwork Reduction Act Notice, see the Instructions for For	m 990.	Cat No 5013	5Y		ı	Schedule R (For	n 990) 2	012

(a) Name, address, and EIN o related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	the organi the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of entro (C corp, S corp, or trust)		otal Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

	\Box		
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	1р		No
q Reimbursement paid by related organization(s) for expenses	1 q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No
		'	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of other organization (b) Transaction Transaction type (a-s) (c) Method of determining am	ount ır	nvolved	
(1) NOBLE NETWORK EDUCATION FOUNDATION L 63,000 ACCTG RECORDS			

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID:

Software Version:

EIN: 36-4241970

Name: NOBLE NETWORK OF CHARTER SCHOOLS

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

	Complete this part to provide additional information for responses to questions on Schedule R (see instructions)									
	Identifier	Return Reference	Explanation							
_										