

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



DLN: 93493350007084

Form **990**

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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

generally cannot redact the information on the form
► Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013	calendar year, or tax year beginning 07-01-2013 , 20	13, and endir	ng 06-30	-2014			
B Che	eck if a	pplica	C Name of organization NOBLE NETWORK OF CHARTER SCHOOLS				D Employ	er id	entification number
☐ Add	Iress ch	nange					36-42	4197	70
∏ Naı	ne cha	nge	Doing Business As						
Init	ıal retu	ım	Number and street (or P O box if mail is not delivered to st	reet address) F	Room/suit	e	E Telepho	ne nur	mber
Ter	mınate	ed .	1 NORTH STATE STREET FLOOR 7-L				(773)	278-	6895
M Am	ended	return	City or town, state or province, country, and ZIP or foreign CHICAGO, IL 60602	postal code			(,,,,,		
☐ App	lication	n pend	ng				G Gross re	ceipts	\$ 145,355,409
			F Name and address of principal officer				this a group	retur	
			MICHAEL MILKIE 1 NORTH STATE STREET FLOOR 7-L			SU	bordinates?		┌ Yes 🗸 No
			CHICAGO,IL 60602			H(b) A	e all subordır	nates	┌ Yes ┌ No
	x-exen	ont ets	us	\/1\ or			cluded?	a liet	(coounctructions)
)(1) or 52		11	No, attach	a iist	(see instructions)
J W	ebsite	e: I +	VWW NOBLENET WORK ORG			H(c) G	roup exempti	on nu	ımber ►
K Forr	n of or	ganıza	on 🔽 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨			L Year o	f formation 199	9 1	M State of legal domicile IL
Pa	rt I	S	mmary						
	'		describe the organization's mission or most significal STILL IN STUDENTS THE SCHOLARSHIP, DISCIPL ND		ONORN	IECESSA	RY TO SUCC	EED	IN COLLEGE AND
ž	:								
<u> </u>	·								
Governance	2	 Chec	this box 🛏 if the organization discontinued its opera	ations or disp	posed of	more tha	n 25% of its	net a	ssets
			, -						
Activities &			er of voting members of the governing body (Part VI, I	•				3	2.2
ĬĮ.	l		er of independent voting members of the governing boo					4	21
Ę			number of individuals employed in calendar year 2013 number of volunteers (estimate if necessary)					<u>5</u> 6	1,468
4			number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C						398
	l		nrelated business taxable income from Form 990-T, lii					7a 7b	0
	_						rior Year	Ť	Current Year
	8	Со	tributions and grants (Part VIII, line 1h)				93,192,3	82	125,364,763
≡	9		gram service revenue (Part VIII, line 2g)				8,285,2	52	8,840,647
Rayenue	10	Inv	estment income (Part VIII, column (A), lines 3, 4, and	l7d)			144,8	76	241,352
ά	11		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c,	•			580,0	50	493,680
	12		al revenue—add lines 8 through 11 (must equal Part V	•			102,202,5	60	134,940,442
	13		nts and similar amounts paid (Part IX, column (A), line				259,2	-	454,024
	14		efits paid to or for members (Part IX, column (A), line				·	0	0
\$	15	Sa 5-	aries, other compensation, employee benefits (Part IX 0)	, column (A),	lines		53,118,5	76	67,874,961
Expenses	16a	Pro	essional fundraising fees (Part IX, column (A), line 11	e)				0	0
ਡੌ	ь	Tot	fundraising expenses (Part IX, column (D), line 25) • 855,461						
_	17	Οt	er expenses (Part IX, column (A), lines 11a–11d, 11f	-24e)			33,332,2	60	40,729,687
	18		al expenses Add lines 13–17 (must equal Part IX, co		•		86,710,0	-	109,058,672
. 07	19	Re	enue less expenses Subtract line 18 from line 12 .				15,492,4	-	25,881,770
Net Assets or Fund Balances						ьедіпі	ning of Curren Year	'	End of Year
336 388	20	То	al assets (Part X, line 16)				99,844,4	8 0	145,581,560
A Mark	21	То	al liabilities (Part X, line 26)				57,750,2	74	77,580,392
	22	_	assets or fund balances Subtract line 21 from line 20				42,094,1	34	68,001,168
Pai	t II	Si	gnature Block						
my kı	nowled	dge a	of perjury, I declare that I have examined this return, and belief, it is true, correct, and complete Declaration knowledge						
		k ,	****				2014-12-15		
Sign	1	7 3	gnature of officer				Date		
Here			SEPH DRAGO CHIEF FINANCIAL OFFICER						
			pe or print name and title						
			Print/Type preparer's name JAMES G QUAID Preparer's signature		Da 20		Check if self-employed	PTIN P0064	11738
Paid			Firm's name ► OSTROW REISIN BERK & ABRAMS LTD		I		Firm's EIN 🕨 36		
Pre	•		Firm's address ► 455 N CITYFRONT PLAZA DR SUITE 1500				Phone no (312)	670	7444
Use	On	IV	THILL 3 dudiess & TOO IN CITTI KOINT FLAZA DK SUITE 1300				1 10 (21Z)	070-	, TTT

CHICAGO, IL 60611

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

✓ Yes ☐ No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	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^{\bullet}	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? <i>If "Yes," complete Schedule C, Part III</i>	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 2	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
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	
e	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	Yes	
12a	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	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	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
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	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 or other assistance to any domestic organization or government 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 or 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? <i>If "Yes," complete Schedule J.</i>	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 25a	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		Νo
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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? <i>If "Yes," complete Schedule L, Part III </i>	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? If "Yes," complete Schedule L, Part IV		1	i
_		28a		No
	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	Yes	
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? If "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? <i>If "Yes," complete Schedule R, Part I</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	

G I	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	. J No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 83		163	140
	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	1		
	gaming (gambling) winnings to prize winners?	1c	1	
3	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			
1	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	
ı	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" to line 3b, provide an explanation in Schedule O	3b		
1	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
ı	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?			
	2	5c		
1	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	ı	
	Organizations that may receive deductible contributions under section 170(c).			
	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 7d			
	The test, indicate the number of forms 5252 med during the year.			
	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	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?	8		
	Sponsoring organizations maintaining donor advised funds.			
	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.			
	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		 	
	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	i	

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

36	ection A. Governing Body and Management					
					Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	22			
	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	1b	21			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co	•		3		No
4	Did the organization make any significant changes to its governing documents since filed?	e the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation's assets? .	5		Νo
6	Did the organization have members or stockholders?			6		Νo
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?		elect or appoint one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?		members, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written activities by the following	ons ui	ndertaken during the			
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, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	evenu	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	tıvıtıe	s of such chapters,	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the act	tıvıtıe on's e	s of such chapters, exempt purposes?	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it	tivitie on's e ts gov	s of such chapters, exempt purposes? erning body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e ts gov • •	s of such chapters, exempt purposes? erning body before filing	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its form?	tivitie on's e ts gov • • • Form 9	s of such chapters, exempt purposes? erning body before filing	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e ts gov Form 9 ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with	tivitie on's e ts gov Form 9 ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	tivitie on's e ts gov Form 9 Iy inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FO 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	tivitie on's e ts gov Form 9 ly inte the p inthe p inthe p	s of such chapters, exempt purposes? erning body before filing 290 erests that could give olicy? If "Yes," describe and approval by	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FOId 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the	tivitie on's e ts gov Form 9 Ithe p 	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FOId 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the	tivitie on's e ts gov Form 9 ly inte the p iew ariee deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	tivitie on's e ts gov Form 9 ly inte the p iew ariee deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	tivitie on's e ts gov Form 9 ly inte the p iew ar ne deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of the organization invest in, contribute assets to, or participate in a joint venture of the following persons in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the following persons in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the following persons	tivitie on's e ts gov Form 9 ly inte the p iew arine deli or sim ization e step	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take	tivitie on's e ts gov Form 9 ly inte the p iew arine deli or sim ization e step	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's e ts gov Form 9 ly inte the p iew arine deli or sim ization e step	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

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.

Own 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 60602 (312) 450-8932

Form 990	(2013)	
----------	--------	--

_				_
D	-	α	Δ	4
г	a	ч	_	•

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

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See 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 for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	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

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han d on is	ne l both	box, an d	heck unless officer stee)	3	Repor comper from organiza	table nsation the tion (W-	(E) Reportable compensation from related organizations (W	·-	(F) Estima amount o compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	C	organizati relate organiza	ed
												-		
1b	Sub-Total							<u> </u>						
C	Total from continuation sheet	s to Part VII, S	ection /	٠.	•			۰						
d	Total (add lines 1b and 1c) .							Þ		1,735,096		0		190,998
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	nan			
													Yes	
3	Did the organization list any fo					key	emplo	yee,	, or highes	t compen	sated employee		1.55	
4	on line 1a? <i>If "Yes," complete S</i> For any individual listed on line					• mne	neatio	n and	d other co	mnensatu	on from the	3		No
•	organization and related organ												.	
5	Did any person listed on line 1	a receive or acc	rue coi	npen	• satı	• on fr	om an	• y unr	related org	· · · ıanızatıon	or individual for	4	Yes	
	services rendered to the organ											5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax vear	
		(A) lame and business						, ,			(B) scription of services		(C Comper)
	NBERG TRAURIG LLP 77 W WACKER D	R SUITE 3100 CHIC	AGO IL 60	0601						LEGAL	•			112,500
CLLE (CUSTOM APPAREL 4611 WHITEHALL CO	JUKT ALGUNQUIN II	_60102							UNIFORMS				110,447
												_		
	Total number of independent co \$100,000 of compensation fron			not	lımıt	ed t	o thos	e list	ted above)	who rece	ived more than			

Contributi	1770
Program Service Revenue	
Other Revenue	

Form 99								Page 9
Part V	<u> </u>	Statement o Check if Schedi	o f Revenue ule O contains a respons	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
रु ह	1a	Federated cam	paigns 1a					
rani	ь	Membership du	es 1b					
Θğ.	С	Fundraising eve	ents 1c	47,375				
iffs Iar	d	Related organiz	zations 1d					
imi	е	Government grants	s (contributions) 1e	99,082,144				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions are similar amounts no	ons, gifts, grants, and 1f ot included above	26,235,244				į į
ntrik d Ot	g	Noncash contribution 1a-1f \$	ons included in lines	5,102,877				
<u>င</u> a	h	Total. Add lines	s 1 a - 1 f	•	125,364,763			
e				Business Code				
۲eu	2a	FOOD PROGRAM		611110	4,338,691	4,338,691		
<u>22</u>	b	SCHOOL FEES	TUTTON -	611110	3,325,567	3,325,567		
Š	c d	UNIFORM FEES	TOTITON	611110	614,674	614,674		
<i>3</i> 3	e e	SCHOOL FUNDRAIS	SING	611110 611110	515,264 46,451	515,264 46,451		
E	f		am service revenue	011110	40,431	40,431		
Program Serwoe Revenue	_	Total. Add lines			8,840,647			
	3		s 2a-2f					
		and other simil	aramounts)	🟲 📗	66,585			66,585
	4 5	Royalties	stment of tax-exempt bond p	roceeds •				
		Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(7)					
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d	, ,	me or (loss)					
	_	C	(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	10,541,055					
	ь	Less cost or other basis and	10,366,288					
	_c	sales expenses Gain or (loss)	174,767					
	d	, ,	(ss)		174,767			174,767
	8a	Gross income f	_	·				
Other Revenue		Ψ	s reported on line 1c)					
<u>.</u>		,	а	79,374				
ŧ	b		penses b	48,679	20.505			
0	c 9a		(loss) from fundraising e	vents 🛌	30,695			30,695
	34		rom gaming activities ne 19 a					
	l		penses b]
			(loss) from gaming activ	ities				
	10a	Gross sales of returns and allo						
	ь	Less cost of g	oods sold b					
	С		(loss) from sales of inve					
		Miscellaneous		Business Code	463.005			463.005
	11a	MISCELLANEC	ous	900099	462,985			462,985
	b с							
	d	All other reven	ue					
	e		s 11a-11d	🕨	463.005			
	12	Total revenue.	See Instructions	🕨	462,985	0.040.51		725.225
				- [134,940,442	8,840,647	(735,032

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this				<u>.</u> .
	ot include amounts reported on lines 6b, b, 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	454,024	454,024		
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	1,213,357	1,073,093	124,612	15,652
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	54,357,335	48,577,821	5,188,901	590,613
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	4,789,662	4,575,416	203,991	10,255
9	Other employee benefits	5,008,644	4,655,549	331,956	21,139
10	Payroll taxes	2,505,963	2,120,742	346,576	38,645
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,247,024	2,376,226	774,875	95,923
12	Advertising and promotion				
13	Office expenses	1,761,799	1,601,685	145,983	14,131
14	Information technology	4,381,768	4,224,882	156,095	791
15	Royalties				
16	Occupancy	5,631,298	5,232,642	398,656	
17	Travel		, ,	,	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,276,957	2,068,685	208,272	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,335,641	3,185,765	149,876	
23	Insurance	384,824	384,824		
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	4,420,284	4,392,872	27,412	
Ь	EDUCATION MATERIALS	2,912,066	2,461,612	450,454	
c	PROF DEVELOPMENT	1,746,469	1,431,657	289,761	25,051
d	SPORTS ACTIVITIES	1,291,665	1,225,545	66,120	
e	All other expenses	9,339,892	8,135,068	1,161,563	43,261
25	Total functional expenses. Add lines 1 through 24e	109,058,672	98,178,108	10,025,103	855,461
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

Par	tΧ	Check if Schedule O contains a response or note to any line in this F	art X			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		7,881,650	1	36,965,849
	2	Savings and temporary cash investments		2,502,923	2	80,166
	3	Pledges and grants receivable, net		6,027,360	3	11,848,275
	4	Accounts receivable, net		6,120,948	4	7,504,192
	5	Loans and other receivables from current and former officers, direct employees, and highest compensated employees Complete Part II Schedule L	ors, trustees, key of		5	
Assets	6	Loans and other receivables from other disqualified persons (as defi 4958(f)(1)), persons described in section 4958(c)(3)(B), and contr and sponsoring organizations of section 501(c)(9) voluntary employ organizations (see instructions) Complete Part II of Schedule L	ibuting employers		6	
χ. 	7	Notes and loans receivable, net			7	
4	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		2,412,748		1,787,185
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a	84,664,143	, ,		1,101,100
	Ь	Less accumulated depreciation 10b	14,387,542	61,512,680	10c	70,276,601
	11	Investments—publicly traded securities		3,518,982	11	
	12	Investments—other securities See Part IV, line 11		, ,	12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		9,867,117	15	17,119,292
	16	Total assets. Add lines 1 through 15 (must equal line 34)		99,844,408		145,581,560
	17	Accounts payable and accrued expenses		6,118,780		10,591,812
	18	Grants payable		2, 112,122	18	,,
	19	Deferred revenue		3,332,437	19	1,797,575
	20	Tax-exempt bond liabilities		22,417,585		41,618,053
_	21	Escrow or custodial account liability Complete Part IV of Schedule			21	11,010,000
Liabilities	22	Loans and other payables to current and former officers, directors, t key employees, highest compensated employees, and disqualified				
æ		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties .		20,156,651	23	18,236,384
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related the and other liabilities not included on lines 17-24) Complete Part X of		5 70 4 00 4		5 000 500
		D	• •	5,724,821	25	5,336,568
	26	Total liabilities. Add lines 17 through 25		57,750,274	26	77,580,392
Φ S		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ an lines 27 through 29, and lines 33 and 34.	a complete			
Fund Balance	27	Unrestricted net assets		33,119,247	27	48,277,404
<u>8</u>	28	Temporarily restricted net assets	-	8,974,887	28	19,723,764
	29	Permanently restricted net assets		, ,	29	, ,
Ĭ	-	Organizations that do not follow SFAS 117 (ASC 958), check here				
		complete lines 30 through 34.	, una			
S O.	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
AS:	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net Net	33	Total net assets or fund balances		42,094,134	33	68,001,168
Z	34	Total liabilities and net assets/fund balances		99,844,408	34	145,581,560
	1	<u> </u>		, ,		Form 000 (2012)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		134,9	940,442
2	Total expenses (must equal Part IX, column (A), line 25)	2		109,0	58,672
3	Revenue less expenses Subtract line 2 from line 1	3		25,8	381,770
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		42,0	94,134
5	Net unrealized gains (losses) on investments	5			25,264
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		68,0	001,168
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review 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 ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: Software Version:

EIN: 36-4241970

Name: NOBLE NETWORK OF CHARTER SCHOOLS

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

Form 990, Part VII - Compensati Compensated Employees, and Ir						, .	,	p.o,cco,g.		
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033-11130/	2/1033-11136/	related organizations
ALLAN MUCHIN	15 00	х		x				0	0	0
BOARD CHAIRMAN JOHN HARRIS	3 00									
VICE CHAIRMAN	3 00	×		Х				0	0	0
MICHAEL MILKIE CEO	40 00	х		х				221,261	0	22,222
JOHN BUTLER	1 00	х						0	0	0
DIRECTOR GUY COMER	1 00									
DIRECTOR		Х						0	0	0
CECIL CURTWRIGHT DIRECTOR	1 00	х						0	0	0
REBECA NIEVES HUFFMAN DIRECTOR	1 00	х						0	0	0
LIAM KREHBIEL	1 00	х						0	0	0
DIRECTOR HARVEY MEDVIN	2 00	X						0	0	0
DIRECTOR ANNE MUELLER	10 1 00							0	0	Ů
DIRECTOR	1 00	х						0	o	0
MARTIN NESBITT DIRECTOR	1 00	х						0	0	0
NANCY GOLDER NORTHRIP DIRECTOR	1 00	Х						0	0	0
TROY RATLIFF	1 00	х						0	0	0
BRUCE RAUNER	1 00	X						0	0	0
DIRECTOR JONATHAN REINSDORF	1 00	X						0	0	0
DIRECTOR WILLIAM ROWE	1 00									, , , , , , , , , , , , , , , , , , ,
DIRECTOR	1 00	Х						0	0	0
JEAN E SHERIDAN	1 00	х						0	0	o
STEVE SULLIVAN	10	×						0	0	0
DIRECTOR BRYAN TRAUBERT MD	1 00								0	
DIRECTOR MENNO VERMEULEN	1 00	×						0	0	0
DIRECTOR		Х						0	0	0
DAVID WEINBERG DIRECTOR	1 00	х						0	0	0
JENNIFER WILSON	1 00	Х						0	0	0
JOSEPH DRAGO	40 00			Х				70,065	0	0
TREASURER & CFO JESSICA FLORES	40 40 00	-								
SECRETARY/DIR OF STUDENT ENROLLMENT				Х				67,441	0	8,163
RHONDA KOCHLEFL CHIEF EXTERNAL AFFAIRS OFFICER	40 00				x			237,713	0	26,374
-		-			•	•			-	

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1033 (1130)	2,1033 11130)	related organizations
ERIC THOMAS	40 00				х			175,684	0	17,507
ASSISTANT SUPERINTENDENT										
MICHAEL MADDEN	40 00				х			175,583	0	29,434
CHIEF OPERATING OFFICER										
PABLO SIERRA PRINCIPAL	40 00					x		171,480	0	12,111
WILLIAM OLSEN PRINCIPAL	40 00					x		166,952	0	21,718
KYLE COLE	40 00					х		151,199	0	22,997
CHIEF EDUCATION OFFICER										,
TYSON KANE PRINCIPAL	40 00					х		148,882	0	18,276
KIMBERLY NEAL	40 00									
PRINCIPAL	40 00					Х		148,836	0	12,196

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493350007084

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

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.

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

Open to Public **Inspection**

lame	of	the	org	jai	nizati	on		
IOBLE	NET	WOR	K C)F	CHART	ER	SCHO	OLS

Employer identification number

					. (411				36-42419			
	rt I			blic Charity Sta						<u>nstructions</u>	•	
	_		-	te foundation becaus	•			•	-			
1	<u> </u>		-	on of churches, or a				ection 170(l	o)(1)(A)(i).			
2	고			in section 170(b)(1								
3	<u> </u>			perative hospital se								
4	Г			h organization opera	ted ın conjun	iction with a	hospital des	cribed in sec	tion 170(b)(1)(A)(iii). E	nter the	
_	_	hospita	al's name, ci	ty, and state erated for the benefi	+ - f II					.		
5	ı					e or universi	ty owned or o	perated by a	a governmen	tai uiiit desc	ribed iii	
_	_	section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
6	<u> </u>			=	=						1 l- l	
7	ı	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)										
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)										
9	Ė			at normally receives					outions, mem	bership fees	, and gross	
	·			ities related to its e								
				oss investment inco								
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section !	509(a)(2). (C	omplete Pai	rt III)	•		
10	Γ	Anorga	anızatıon or	ganized and operated	d exclusively	to test for p	public safety	See section	1 509(a)(4).			
11	Γ	An orga	anization or	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fund	ctions of, or t	o carry out t	the purposes of	
			•	ly supported organiz				•		ee section 5	09(a)(3). Check	
				bes the type of supp						-	II	
_	_			b Type II c ox, I certify that the								
е	ı		_	ox, I certify that the ion managers and ot	-		•			•	•	
			1509(a)(2)			oo.o pan	, ၁۵۶۶۰۰۰					
f				received a written d	etermınatıon	from the IR	S that it is a	Type I, Typ	e II, or Type	III supporti	ng organizatio <u>n,</u>	
_			this box	2006 has the argan		atad any aift	or contributi	on from any	of the		J	
g			ng persons?	2006, has the organ	ization accep	oted any gnt	or contributi	on nom any	orthe			
				rectly or indirectly o	controls, eith	er alone or t	together with	persons des	scribed in (ii))	Yes No	
		and (111) below, the	governing body of th	ne supported	organizatioi	n?			11g	(i)	
		(ii) A fa	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				11g	(ii)	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g((iii)	
h		Provide	the followi	ng information about	the supporte	ed organızat	ion(s)					
-	i) Nan		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you	•	(vi) Is		(vii) A mount of	
	suppoi			organization	organizati		the organi		organizat		monetary	
0	rganiz	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor	'	col (i) org		support	
				or IRC section	docume		Заррон	•	"" "" "	J		
				(see								
				instructions))	Yes	No	Yes	No	Yes	No	1	
Tota	.1											

Sch	edule A (Form 990 or 990-EZ) 2013						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 failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (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						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5))			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(1) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, ne 12. Also complete this part for any additional information. (See instru								
	Facts And Circumstances Test									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 0	000 er 000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493350007084

OMB No 1545-0047

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.

Political Campaign and Lobbying Activities

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

Open to Public Inspection

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) orga	inizations Complete Part III				
	me of the organization BLE NETWORK OF CHARTER SCHOOLS			Emp	oloyer ider	ntification number
1101	DEL HELWORK OF CHARTER SCHOOLS			36-	4241970	
Par	t I-A Complete if the or	ganization is exempt under	section 501(d	c) or is a sec	tion 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	cal campaign acti	ıvıtıes ın Part IV		
2	Political expenditures				.	\$
3	V olunteer hours					-
	-	ganization is exempt under				
1		e tax incurred by the organization und			•	\$
2	·	e tax incurred by organization manag		า 4955	•	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?			☐ Yes ☐ No
4a	Was a correction made?					☐ Yes ☐ No
b	If "Yes," describe in Part IV					
	<u> </u>	ganization is exempt under	•	•)1(c)(3).
1		ended by the filing organization for se			ties 🟲	\$
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to ot	her organizations	for section 527	.	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b	•	\$
4	Did the filing organization file F	Form 1120-POL for this year?				┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification number (Ei For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered	m the filing orga to a separate po	nızatıon's lıtıcal orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount p filing organiz funds If none,	zatıon's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
				1		1

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

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2013						Page 2
Pä	art III-A Complete if the organization	is exemp	t under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► If the filing organization belongs to a	on offiliated	aroup (and	List in Dort IV or	ah affiliated are	un mambaria nam	o addraca EIN
^	expenses, and share of excess lobb			iistiii Paitiv ea	ich ammateu gro	up member s nam	e, address, ETN
<u>B</u>	Check ► ☐ if the filing organization checked bo	x A and "lim	ited contro	ol" provisions ap	oly		
	Limits on Lobbying E (The term "expenditures" means ar			l.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	opinion (gras	s roots lob	bying)			
b	Total lobbying expenditures to influence a legisl						
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and 1d)					
f	Lobbying nontaxable amount Enter the amount is columns	from the follo	wing table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbyi	ing nontax	able amount is:			
	Not over \$500,000	20% of the	amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	us 15% of the	e excess over \$500,	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	us 10% of the	e excess over \$1,00	0,000		
	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						
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)					
h	Subtract line 1g from line 1a If zero or less, ent	er-0-					
i	Subtract line 1f from line 1c If zero or less, ente	er-0-					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line	1ı, dıd the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t Lobbying Exp	section 5 he instruc	01(h) el ctions fo	r lines 2a thr	have to cor ough 2f on p		ne five
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
<u>2a</u>	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
d	Grassroots nontaxable amount						

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT				
		(a)	((b)	
	For each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying activity.		No	Am	oun	t
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	1		
С	Media advertisements?		No			
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?		Νo			
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	O ther activities?	Yes			3	0,000
j	Total Add lines 1c through 1i				3	0,000
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	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 sec	tio	1
				Y	es	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	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 line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 152(a) pendeductible lebbung and political expenditures (do not include amounts of political					

- Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year
- Carryover from last year
- c Total
- 3 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 political expenditure next year?
- Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

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

Return Reference	Explanation
PART II-B, LINE 1	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

2a

2b

2c

3

4 5

Belledale e (Form 330 of	rage -r		
Part IV Suppler	nental Information <i>(continu</i>	ed)	
Return Referer	ce	Explanation	
-			
-			

Schedule D (Form 990) 2013

DLN: 93493350007084

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

emai	Revenue Service and its instruct	10113 13 at <u>#####13.gov/101111330</u> .			Tiishect	.1011
	me of the organization HE NETWORK OF CHARTER SCHOOLS			oloyer identifica 4241970	ition numbe	<u></u>
Pa	organizations Maintaining Donor Adv				. Complet	e if the
	organization answered Tes to Form 550	(a) Donor advised funds		(b) Funds and	other accou	nts
	Total number at end of year					
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor adv	ısed	☐ Yes	┌ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?				☐ Yes	┌ No
Ī	t II Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part I\	/, line 7.	
	Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of a Preservation of a	certifie	d historic struc	ture	
	easement on the last day of the tax year			1		
				Held at the	End of the	Year
	Total number of conservation easements		2a			
	Total acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified histo	. ,	2c			
	Number of conservation easements included in (c) acq historic structure listed in the National Register		2d		4	
	Number of conservation easements modified, transferr the tax year -	ed, released, extinguished, or terminat	ea by tr	ne organization	auring	
	Number of states where property subject to conservati	ion easement is located ►				
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, har	ndling of	f violations, and	│ │ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation ease	ments o	during the year		
	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durin	g the year		
	Does each conservation easement reported on line 2 (c) and section $170(h)(4)(B)(II)$?	d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)	☐ Yes	┌ No
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia				
1	Complete if the organization answered "Y		or Ot	her Similar	Assets.	
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furthera		
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education	statem	nent and balanc		ıc
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X					
	If the organization received or held works of art, historic following amounts required to be reported under SFAS					
	Revenues included in Form 990, Part VIII, line 1			► \$		
	Assets included in Form 990, Part X			-		
	meradea mir omi 200, i dit A			r +		

Part	TIT Organizations Maintaining Co	<u>llections of Art,</u>	, His	<u>tori</u>	<u>cal Ti</u>	reası	ures, or O	the	<u>r Similar</u>	Ass	ets (co	<u>ontinued)</u>
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, ch	eck	any of	the fol	lowing that a	are a	sıgnıfıcant	use o	of its	
а	Public exhibition		d	Γ	Loan	orexo	hange progr	ams				
b	Scholarly research		e	Γ	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and explai	ın how	v the	y furth	er the	organızatıon	ı's ex	cempt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part o	fthe	organ	ızatıor	n's collection	۱?			Yes	┌ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						n answere	d "Y ——	es" to For	m 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	for c	ontribi	utions	or other ass	ets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ving t	able		_					
_							-	_		Amo	unt	
С	Beginning balance							1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?							ļ	Yes	┌ No
_ь	If "Yes," explain the arrangement in Part XII						-					ļ
Pa	rt V Endowment Funds. Complete	f the organization (a)Current year		wer Prior			Form 990, Two years back				o)Eour w	ears back
1a	Beginning of year balance	(a)Current year	(0)	PHOI	уеаг	b (c)	IWO YEARS DACK	(u)	Tillee years b	ack (e)rour y	ears back
b	Contributions							+				
c	Net investment earnings, gains, and losses							+		-		
_								+		_		
d	Grants or scholarships							╀		_		
е	Other expenditures for facilities and programs											
f	Administrative expenses							<u> </u>				
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g	, colum	nn (a))	held as	•		•		
а	Board designated or guasi-endowment	·	-	_								
ь	Permanent endowment -											
С	Temporarily restricted endowment ►											
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiza	ation t	hat a	are hel	d and	admınıstered	d for	the			
	organization by								,		Yes	No
	(i) unrelated organizations			•		•		٠		3a(i)		
b	(ii) related organizations If "Yes" to 3a(ii), are the related organization							•		3a(ii) 3b	<u> </u>	<u> </u>
4	Describe in Part XIII the intended uses of th	·				•		•				<u> </u>
Par	t VI Land, Buildings, and Equipme	nt. Complete if t				n ans	wered 'Yes	' to	Form 990	, Par	t IV, lı	ne
	11a. See Form 990, Part X, line 1	.0.			Cartan		(h)Cook on or	.	(2) (22)		(d) Da	-1
	Description of property				Cost or s (inves		(b) Cost or ot basis (othe		(c) Accumu depreciati		(a) Bo	ok value
1a	Land						2,736	,976				2,736,976
b I	Buildings						7,360	,772	71	6,564		6,644,208
c l	Leasehold improvements						63,881	,942	11,78	9,341	5	2,092,601
d I	Equipment						4,529	,231	1,88	1,637		2,647,594
e (O Els			1					1			
	Other						6,155	,222	<u> </u>			6,155,222

See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
	 	
	- 	
	_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u>*</u>	
	omplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
	1	
	 	
	_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u>*</u>	
		0, Part IV, line 11d See Form 990, Part X, line 15
(a) Descr	iption	(b) Book value
(1) BOND ISSUANCE COSTS, NET		2,713,989
(2) CASH & INVESTMENTS - RESTRICTED BY BOND		7,834,336
(3) CASH - RESTRICTED BY NMTC		2,603,858
(4) INVESTMENTS - LEASE SECURITY DEPOSIT		757,863
(5) DEPOSITS		494,641
(6) DUE FROM NOBLE NETWORK EDUCATION FOUNDA		191,806
(7) INVESTMENTS - RESTRICTED FOR STUDENTS SCH	10 LARSHIPS	2,522,799
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1	(5.)	▶ 17,119,292
		to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.		, , , , , , , , , , , , , , , , , , , ,
1 (a) Description of liability	(b) Book value	
Federal income taxes		
DEFERRED RENT	2,417,231	
DEFERRED LEASE INCENTIVE	2,919,337	
	1	
	+	

Par			ue per Audited Financi 'Yes' to Form 990, Part I\			ts With R	levenue p	er Re	turn Complete ii	Ī
1			ort per audited financial state					1		_
2	A mounts inclu	ded on line 1 but not o	n Form 990, Part VIII, line 1	. 2						_
а	Net unrealized	gains on investments		[2a					
ь	Donated servi	es and use of facilities	S		2b			1		
c	Recoveries of	prior year grants .		[2c			1		
d					2d					
e	Add lines 2a t	•						2e		
3	Subtract line 2	e from line 1						3		_
4			t VIII, line 12, but not on line	1						_
а		•	n Form 990, Part VIII, line 7	1	4a					
ь				.	4b					
c								4c		
5	Total revenue	Add lines 3 and 4c. (T	his must equal Form 990, Pa	ırt I, lıne 1	2).			5		_
Part	XIII Recon	iliation of Expens	ses per Audited Financed 'Yes' to Form 990, Part	cial Stat	emer			per l	Return. Complet	e
1	Total expense	and losses per audite	ed financial statements .					1		
2	A mounts inclu	ded on line 1 but not o	n Form 990, Part IX, line 25							
а	Donated servi	es and use of facilities	s		2a					
b	Prior year adju	stments			2b					
c	Other losses				2c					
d	Other (Descri	e ın Part XIII)			2d					
e	Add lines 2a tl	rough 2d						2e		
3	Subtract line 2	e from line 1						3		
4	A mounts inclu	ded on Form 990, Part	IX, line 25, but not on line 1	:						
а	Investment ex	oenses not included oi	n Form 990, Part VIII, line 7	b	4a					
b	Other (Descri	e ın Part XIII)			4b					
C	Add lines 4a a	nd 4b						4c		
5	Total expense	Add lines 3 and 4c. ((This must equal Form 990, P	art I, line	18)			5		
Part	Supp	emental Informa	ition							
Part			I, lines 3, 5, and 9, Part III, 2d and 4b, and Part XII, lines						e any additional	
	Return Refe	rence	Explanation							
PART X, LINE 2		THE I ON R INTE FOUN ADOI MAN, LIAB FEDE TO E AUTH MAN,	SCHOOL IS A TAX-EXEMPT INTERNAL REVENUE CODE ELATED INCOME PURSUAN RNAL REVENUE SERVICE H NDATION WITHIN THE MEA PTED THE REQUIREMENTS AGEMENT HAS DETERMINE ILITY RELATED TO UNCER RAL AND STATE TAX AND, XAMINATIONS BY THE INT HORITIES, GENERALLY FOR AGEMENT BELIEVES THAT MINATIONS BY TAXING AU	E (THE CONT TO SEC HAS DETE ANING OF FOR ACC ED THAT T TAIN TAX OR INFOR ERNAL RE THREE Y	DE) A CTION RMIN SECT OUNT THE SC (POSI RMAT) EVENU EARS OOL I	ND IS EXE I 501(A) C ED THAT T ION 509(A TING FOR TIONS AS TON RETU JE SERVIC AFTER TH	MPT FROM FTHE COD THE SCHOO A) OF THE C UNCERTAIN AS NOT REC S OF JUNE 3 RNS OF THE CE AND STA IE RETURNS GER SUBJE	FEDER OE IN A OLIS N CODE OTAX F QUIRE O, 201 E SCHO OTE TA S WERE CT TO	AL INCOME TAXE ADDITION, THE OT A PRIVATE THE SCHOOL HAS POSITIONS AND D TO RECORD A 4 AND 2013 OOL ARE SUBJECT XING E FILED INCOME TAX	
										—

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493350007084

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

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.

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

Open to Public Inspection

Name of the organization NOBLE NETWORK OF CHARTER SCHOOLS **Employer identification number**

	36-4241970			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
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	3	Yes	
	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
Ь	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	I Scholarships or other financial assistance?	5d		No
	Educational policies?	5e		No
Г	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	<u>5h</u>		No
6~	Does the organization receive any financial aid or assistance from a governmental agency?	- - 6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b	165	No
7	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 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial pondiscrimination? If "No," explain on Part II			
	- DERBY RIDE (3-30 IM/3-/I B 30/ COVEDDO GACIAL DODDISCEDMINATION/IT NO AVDIAID OD PACT I	. 7		

Part II Supplemental Information. 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)

Return Reference	Explanation
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
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) 2013

DLN: 93493350007084

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding 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. Attach to Form 990 or Form 990-EZ. See separate instructions.

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

Open to Public Inspection

BLE NETWORK OF CHARTE	D CCHOOLS			Employer iden	ich icación number
BLE NETWORK OF CHARTE	.K SCHOOLS			36-4241970	
	tivities. Complete rs are not required			to Form 990, Part IV	, line 17.
Indicate whether the organ	nization raised funds t	through any of the	following activities Che	eck all that apply	
Mail solicitations		e	Solicitation of nor	n-government grants	
☐ Internet and email sol	ıcıtatıons	f	☐ Solicitation of gov	ernment grants	
Phone solicitations		g	☐ Special fundraisin	g events	
In-person solicitations	s				
Did the organization have or key employees listed in					Г _{Yes} Г _{No}
If "Yes," list the ten highe to be compensated at leas			rs) pursuant to agreem	ents under which the fu	ndraiser is
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(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
1		Yes No			
2					
3					
1					
5					
5					
,					
3					
)					
)					
:al		>			
List all states in which the registration or licensing	organization is regis	tered or licensed to	o solicit contributions o	r has been notified it is	exempt from

		G (Form 990 or 990-EZ) 2013				Page 2
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1 TASTE OF COLLEGE 2013 (event type)	(b) Event #2 FALL DINNER (event type)	(c) O ther events (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	81,074	45,675		126,749
Revenue	2	Less Contributions	1,700	45,675		47,375
<u>~</u>	3	Gross income (line 1 minus line 2)	79,374			79,374
	4	Cash prizes	5,117			5,117
60	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă ă	7	Food and beverages .	30,213	3,540		33,753
Direct	8	Entertainment	4,195			4,195
à	9	Other direct expenses .	2,165	3,449		5,614
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(48,679)
	11	Net income summary Subtract li	ne 10 from line 3, column	(d)		30,695
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		'Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue		, , , , , , , , , , , , , , , , , , , 	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				+
enses	2	Cash prizes				
xpen	3	Non-cash prizes				
Direct Exp	4	Rent/facility costs				
돌	5	Other direct expenses				
	6	Volunteer labor	Г Yes%	┌ Yes	Г Yes% Г Nо	
	7	Direct expense summary Add line	s 2 through 5 in column (d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, co	lumn (d)		
9 a b	Is t	er the state(s) in which the organiza he organization licensed to operate No," explain	gaming activities in each	of these states?		「Yes 「No
		re any of the organization's gaming Yes," explain	licenses revoked, suspen	ded or terminated during	the tax year?	

						1:			
Does	s the organization operate gaming activi	ties with nonmember	rs?	Г	Yes No				
12									
	formed to administer charitable gaming	g [,]			· Fyes F	No No			
13	Indicate the percentage of gaming act	ivity operated in							
а	The organization's facility					%			
b	An outside facility			13b		%			
14	nter the name and address of the person who prepares the organization's gaming/special events books and records								
	Name ▶								
	Address 🟲								
15a b	Does the organization have a contract revenue?	••••••••••••••••••••••••••••••••••••••	he organization 🟲 \$		· 「Yes「	– No			
	amount of gaming revenue retained by the third party 🕨 \$								
C	If "Yes," enter name and address of th	e third party							
	Name ▶								
	Address ►								
16	Gaming manager information								
	Name 🕨								
	Gaming manager compensation ► \$								
	Description of services provided								
	Director/officer	Employee	☐ Independent con	tractor					
17	Mandatory distributions								
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	proceeds to					
	retain the state gaming license?				Г _{Yes} Г	- No			
b									
	n the organization's own exempt activities during the tax year 🕨 💲								
Pai		5b, 15c, 16, and 17	xplanations required by Part I 7b, as applicable. Also comple			and			
	Return Reference		Explanati	on					
		<u> </u>		Schodulo G /For	000 av 000 F	7) 2012			

DLN: 93493350007084

OMB No 1545-0047

Schedule I (Form 990)

Department of the Treasury

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

Open to Public

Internal Revenue Service Intermation about Schedule 1 (Form 990) and its instructions is at <u>www.irs.gov/torm990</u> . Hame of the organization							Employer identification number			
NOBLE NETWORK OF CHARTER SCH	36-4241970									
Part I General Informatio 1 Does the organization maintain the selection criteria used to aw 2 Describe in Part IV the organization	records to substantia ard the grants or ass ation's procedures fo	ate the amount of the sistance? r monitoring the use o	f grant funds in the Unite	d States			Γ Yes Γι			
Form 990, Part IV, line							es" to			
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount 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 gra or assistance			
2 Enter total number of section 50		-								
3 Enter total number of other orga	nızatıons lısted ın th	e line 1 table				<u> ▶ _</u>				

(a)Type of grant or assistance

(b) Number of

recipients

(f)Description of non-cash assistance

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

(d)A mount of

non-cash assistance

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

(e)Method of valuation (book,

FMV, appraisal, other)

(c)A mount of

cash grant

(1) SCHOLARSHIPS		289	454,024				
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation						
	SCHOLARSHIPS 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						

ABOVE THE AMOUNT OF THE SCHOLARSHIP WILL BE BASED ON NEED AND AVAILABLE FUNDS

DLN: 93493350007084

OMB No 1545-0047

Compensation Information Schedule J (Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Internal Revenue Service Name of the organization

NOBLE NETWORK OF CHARTER SCHOOLS

Department of the Treasury

Employer identification number

36-4241970

ď	Questions Regarding Compensation					
			Yes	No		
1a	Check the appropiate 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)					
b	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					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III					
	Compensation committee Written employment contract					
	☐ Independent compensation consultant ☐ Compensation survey or study					
	Form 990 of other organizations Approval by the board or compensation committee					
4	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?					
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
C	Participate in, or receive payment from, an equity-based compensation arrangement?					
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.					
5	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					
а	The organization?	5a	Yes			
b	Any related organization?	5b		No		
	If "Yes," to line 5a or 5b, describe in Part III					
6	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					
а	The organization?	6a		No		
b	Any related organization?	6b		Νo		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III					
8	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		No		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9				

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)MICHAEL MILKIE CEO	(i) (ii)	198,511 0	22,750 0	0 0	7,036 0	15,186 0	243,483 0	0 0
(2)RHONDA KOCHLEFL CHIEF EXTERNAL AFFAIRS OFFICER	(i) (ii)	157,713 0	80,000 0	0	8,734 0	17,640 0	264,087 0	0
(3)ERIC THOMAS ASSISTANT SUPERINTENDENT	(i) (ii)	173,934 0	1,750 0	0	4,228 0	13,279 0	193,191 0	0
(4)MICHAEL MADDEN CHIEF OPERATING OFFICER	(i) (ii)	152,583 0	23,000 0	0	11,79 4 0	17,640 0	205,017	0
(5) PABLO SIERRA PRINCIPAL	(i) (ii)	109,680 0	61,800 0	0	7,651 0	4,460 0	183,591 0	o 0
(6)WILLIAM OLSEN PRINCIPAL	(i) (ii)	109,952 0	57,000 0	0 0	4,078 0	17,640 0	188,670 0	0 0
(7)KYLE COLE CHIEF EDUCATION OFFICER	(i) (ii)	149,449 0	1,750 0	0	17,826 0	5,171 0	174,196 0	0
(8)TYSON KANE PRINCIPAL	(i) (ii)	94,882 0	54,000 0	0	7,359 0	10,917 0	167,158 0	0
(9)KIMBERLY NEAL PRINCIPAL	(i) (ii)	95,486 0	53,350 0	0	6,755 0	5,441 0	161,032 0	0

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 5	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) 2013

Additional Data

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

(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Defe			(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensa	ation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
MICHAEL MILKIE CEO	(I) (II)	198,511 0	22,750	0		7,036 0	15,186 0	243,483 0	0 0
RHONDA KOCHLEFL CHIEF EXTERNAL AFFAIRS OFFICER	(I) (II)	157,713 0	80,000	0		8,734 0	17,640 0	264,087 0	0
ERIC THOMAS ASSISTANT SUPERINTENDENT	(I) (II)	173,934 0	1,750	0		4,228 0	13,279 0	193,191 0	0 0
MICHAEL MADDEN CHIEF OPERATING OFFICER	(I) (II)	152,583 0	23,000	0		11,794 0	17,640 0	205,017 0	0
PABLO SIERRA PRINCIPAL	(I) (II)	109,680 0	61,800	0		7,651 0	4,4 60 0	183,591 0	0
WILLIAM OLSEN PRINCIPAL	(I) (II)	109,952 0	57,000	0		4,078 0	17,640 0	188,670 0	0
KYLE COLE CHIEF EDUCATION OFFICER	(I) (II)		1,750	0		17,826 0	5,171 0	174,196 0	0
TYSON KANE PRINCIPAL	(I) (II)	94,882 0	54,000	0		7,359 0	10,917 0	167,158 0	0
KIMBERLY NEAL PRINCIPAL	(I) (II)		53,350	0		6,755 0	5,441 0	161,032	0

DLN: 93493350007084

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

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.

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

Open to Public **Inspection**

name or	the organization	
NOBLE	NETWORK OF CH	ARTER:

Employer identification number

NO	BLE NETWORK OF CHARTER SO	CHOOLS								36-	42419	70	cion nu	iiDCi	
P	art I Bond Issues										12 113				
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Descriptio	n of purpose	(g) De	feased	(h) On ed behalf o issuer			Pool incing
										Yes	No	Yes	No	Yes	No
A	ILLINOIS FINANCE AUTHORITY	86-1091967	45203AAM9	08-30-2006	11,3	x		SERIES 200 OVATION	6 -		×		×		X
В	ILLINOIS FINANCE AUTHORITY	86-1091967	45203ABN6	05-31-2007	13,7		IFA SERIES 2007 - RENOVATION				X		х		х
c	ILLINOIS FINANCE AUTHORITY	86-1091967	45203ACF2	10-24-2013	19,9			SERIES 201 OVATION	3 -		Х		х		х
Pa	rt III Proceeds			•						I					<u>.</u>
						A		В	3		С			D	
1	A mount of bonds retired					2,233,	750		1,951,250						
	A mount of bonds legally defea	ased 													
3	<u> </u>	otal proceeds of issue					550	:	13,788,150		19,90	3,820			
4	<u> </u>	Gross proceeds in reserve funds				811,	512		979,078		3,00	0,000			
_5	<u> </u>	Capitalized interest from proceeds				542,	057		824,788		84	5,927			
6	Proceeds in refunding escrows														
7	Issuance costs from proceed					225,	,000 272,400		398,076						
8	Credit enhancement from pro					819,	,309 936,312								
9	Working capital expenditures														
10	Capital expenditures from pro	ceeds				6,963,	974	:	10,775,572	14,347,344					
11	O ther spent proceeds					2,021,	698								
12	O ther unspent proceeds					1,311,	473				1,31	1,473			
13	Year of substantial completio	n			2.0	06		20	07						
					Yes	No		Yes	No	Yes	N		Yes		No
14	Were the bonds issued as par				Х				Х		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(
15	Were the bonds issued as par	t of an advance refur	nding issue?			X			Х		>	(
16	Has the final allocation of proceeds been made?				X			Х			>	<			
17	Does the organization mainta allocation of proceeds?	ın adequate books ar	nd records to supp	ort the final	Х			Х		Х					
Pa	rt IIII Private Business U	Jse													
						A		. E		C			D		
					Yes	No		Yes	No	Yes	N	0	Yes		No

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

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

Χ

Χ

Χ

Χ

Χ

			A	E	3		С	ı	D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		х		×		х		
b	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?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		Х		х		
d	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?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5	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 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		Х		Х		Х		
8a	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 issued?		х		Х		х		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	x		х		х			
Pai	t IV Arbitrage								
	Δ		1	R		C		D	

	CIV Albitrage								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		Х		Х		
2	If "No" to line 1, did the following apply?			•					
а	Rebate not due yet?		Х		Х	Х			
b	Exception to rebate?		Х		Х		Х		
С	No rebate due?	Х		Х			Х		
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			•					
3	Is the bond issue a variable rate issue?		Х		Х		Х		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		×		X		Х		
ь	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								
							Sc	hedule K (Forn	1 990) 2013

Par	t IV Arbitrage (Continued)								
	<u> </u>	А	Α		В		С		
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X		×		
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х		x		
7	Has the organization established written procedures to monitor the requirements of section 148?	х		х		X			

Part V Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure
that violations of federal tax requirements are timely identified
and corrected through the voluntary closing agreement program if
self-remediation is not available under applicable regulations?

Α		В		С		D		
Yes	No	Yes	No	Yes	No	Yes	No	
X		X		x				

Part VI Supplemental Info	Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).								
Return Reference	Explanation								

SCHEDULE K, PART II, LINE 11, COLUMN A - OTHER SPENT PROCEEDS

\$2,021,698 OF 2006 BOND PROCEEDS WERE USED TO CURRENTLY REFUND A PRIOR ISSUE OF TAX-EXEMPT BONDS WHICH WAS RETIRED ON THE BOND CLOSING DATE

Schedule K (Form 990) 2013

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

DLN: 93493350007084

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

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

Name of the organization NOBLE NETWORK OF CHARTER SCHOOLS **Employer identification number**

36-4241970

Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı	_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	2	5,075,387	FAIR MARKET VAL	.UE		
	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ► () O ther ► ()							
	Other ►()							
	Other ()							
	Number of Forms 8283 received	hy the orga	l Inization during the tay yea	r for contributions				
	for which the organization comple				29			
				<u>-</u>	•		Yes	No
30a	During the year, did the organize	ation receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that			
	it must hold for at least three ye	ars from th	e date of the initial contribu	ıtıon, and which is not requi	red to be used			
	for exempt purposes for the enti	re holding p	period?			30a		Νo
b	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gi	ft acceptan	ce policy that requires the	review of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	*	es or related organizations	to solicit, process, or sell	noncash 	32a		No
ь	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t an amount	in column (c) for a type of	property for which column (a) is checked,			

Part II Supplem

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference

Explanation

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493350007084

OMB No 1545-0047

2013

Open to Public Inspection

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.

Attach to Form 990 or 990-E2

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

Name of the organization
NOBLE NETWORK OF CHARTER SCHOOLS

Employer identification number

36-4241970

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
FORM 990, PART VI, SECTION B, LINE 12C	THIS POLICY REQUIRES ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES TO DISCLOSE ANNUALLY INTER ESTS THAT COULD GIVE RISE TO CONFLICTS NOBLE NETWORK OF CHARTER SCHOOLS ENFORCES AND MONI TORS 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 SUPERINT ENDENT SALARY FOR ALL OTHER EMPLOYEES IS DETERMINED BY MANAGEMENT'S RESEARCH OF COMPARABL E 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

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

DLN: 93493350007084

2013

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2013

36-4241970

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Internal Revenue Service

Name of the organization NOBLE NETWORK OF CHARTER SCHOOLS

(Form 990)

SCHEDULE R

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Department of the Treasury **Employer identification number**

Part I Identification of Disregarded Entities Comple	te if the organization	answered "Yes" on	Form 990, Par	t IV, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity		
(1) NOBLE DAY CARE L3C 1333 W CHICAGO AVE CHICAGO, IL 60642 26-3214132	DAY CARE	IL	-21,882	245,615	5 NOBLE N SCHOOL	IETWORK OF CHARTER S		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during t	he tax year.	he organization ans	swered "Yes" o	n Form 990, Pa	art IV, I	ıne 34 because ıt l	had on	.e
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	ion (e) Public charity (if section 501)	status (c)(3)) (f) Direct controlling entity		Section (13) co	9) 5120 Introl
							Yes	N
(1) NOBLE NETWORK EDUCATION FOUNDATION 1 N STATE STREET 7TH FLOOR	TYPE 3 SUPPORTING ORGANIZATION	IL IL	501(C)(3)	11C		NOBLE NETWORK OF CHARTER SCHOOLS	Yes	
CHICAGO, IL 60602 32-0342169							<u> </u>	<u> </u>

Cat No 50135Y

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	oox managır partner		(k) Percentage ownership
						,			Yes	No		Yes	No	
												_		
													\square	
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllir entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	Section (b) (continue)	i) on 512 (13) rolled tity?	No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations lis	sted in Parts II-IV?								
а	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				
С	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	e Loans or loan guarantees by related organization(s)										
f	Dividends from related organization(s)				1f		No				
g	Sale of assets to related organization(s)				1 g		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)											
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)										
m Performance of services or membership or fundraising solicitations by related organization(s)											
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No				
	Sharing of paid employees with related organization(s)				10		No				
_											
-	Reimbursement paid to related organization(s) for expenses				1p 1q		No No				
q	Reimbursement paid by related organization(s) for expenses				-		140				
r	O ther 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	e this line, including co	vered relationships	and transaction thresholds							
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount i	nvolved					
(1) N	OBLE NETWORK EDUCATION FOUNDATION	L	63,000	ACCTG RECORDS							

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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 regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions													
(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 sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(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
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
												\Box	
	•												

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013