

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



Form 990

Department of the Treasury

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

OMB No 1545-0047

Open to Public Inspection

TIRE	tital Nevent									
Α	For the	2013 calen	dar year, or tax year be	ginning 7/1	01 ,	2013, and endin	g 6/3	0	. 2014	
В	Check if a	pplicable:	C					D Employer iden	tification Number	
	Addre	ss change	MENLO CHARTER		S		1	46-2869	768	
	Name	change	16315 GREVILLE				Γ	E Telephone num	ber	
	X Initial	return	GARDENA, CA 90	260				(310) 2	14-3400	
	Termi	nated					<u> </u>	15,45,7		
	Amen	ded return					1	G Gross receipts	\$ 1,284,	966
	$\vdash$	cation pending	F Name and address of prince	cipal officer. KF	N DEEMER			group return for sul		X No
			SAME AS C ABOVE		M DUDUIDIN		H(b) Are all si	ubordinates include Itach a list (see ins		No
1	Tay.eye	mpt status	X 501(c)(3) 501(c)		nsert no.) 4947(a	a)(1) or 527	If 'No,' al	ttach a list (see ins	structions)	_
÷	Websi	<del></del>	. <del> </del>	<u> </u>	110011101) 1 14517(1	EX17 01 1 327	Mak Group av	emption number	-	
K		organization.	X Corporation Trust	Association	Other -	L Year of formati			legal domiche: CA	
				Association	Other	L Tear or formati	OII ZUIS	IN State of	egar domiche. CA	
[[-	1 Br	Summar	y be the organization's mi	ssion or most	constraint activities	e. mo acour	טמת מח	TET OD CON	CODUCT	
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ΛeΓ	2 6	eck this ho	x F if the organiza	tion discontinu	ed its operations o	r disposed of mo	re than 25	% of its net as		
පි	3 NL		ting members of the go							7
ಿಶ		ımber of in-	dependent voting memb	ers of the gove	erning body (Part V	/I, line 1b)		4		7
ë.	5 To	ital number	dependent voting memb of individuals employed of volunteers (estimate	l in calendar ye	ear 2013 (Part V, II	ne 2a) F	7.5-15. 44	<u> </u>		Ó
Activities &	6 To	ital number	of volunteers (estimate	If necessary).			JEIVE	E .) · · · · · · · · · · · · · · · · · ·		0
Æ	7 a To	ital unrelate	d business revenue froi	m Part VIII, col	lumn (C), line 12	10		7a		0.
	b Ne	t unrelated	business taxable incon	ne from Form 9	990-T, line 34			jō <b>7b</b>		0.
						MAY E	3   Pri	or Year 💛	Current Ye	
<u> </u>			and grants (Part VIII, II				·	92	1,079,	
en D	9 Pr	ogram serv	ice revenue (Part VIII, I	ine 2g)					205,	955.
Revenue			come (Part VIII, column				·	1 9		
ш.			(Part VIII, column (A),						1 204	000
	·	- W-d	<ul> <li>add lines 8 through milar amounts paid (Paid)</li> </ul>						1,284,	900.
			•							
	1		to or for members (Par		•		<u></u>			
9	1		r compensation, employ							
2	16a Pr	ofessional f	undraising fees (Part IX	(, column (A), I	ine 11e)		·			
Expenses	<b>b</b> To	tal fundrais	ing expenses (Part IX,	column (D), lin	e 25) 🟲					
ш	17 Ot	her expens	es (Part IX, column (A),	lines 11a-11d,	, 11f-24e)		. [		105,	591.
	18 To	tal expense	s. Add lines 13-17 (mus	st equal Part IX	(, column (A), line	25)			105,	591.
	19 Re	venue less	expenses. Subtract line	18 from line 1	2				1,179,	375.
3 6							Beginning	of Current Year	End of Yea	
Not Assets Fund Balanc	<b>20</b> To		Part X, line 16)					0.	7,863,	766.
1	<b>21</b> To	tal liabilitie:	(Part X, line 26)		· · · · · · · · · · · · · · · · · · ·			0.	6,684,	391.
Σű	22 Ne	t assets or	fund balances. Subtract	l line 21 from li	ne 20			0.	1,179,	375.
Pa	rt II	Signatur	Block				•			
Unde	r penalties	of persury. I de	lare that I have examined this i	eturn, including acq	ompanying schedules an	d statements, and to the	ne best of my l	knowledge and beli	ef, it is true, coirect,	and
com	olete Declar	ration of prepar	er (other than officer) is based	on all information of	which preparer has any	knowledge				
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He	re		Y BONDI				OFFICE	R		
			orint name and title					<del></del>		
		Print/Type pr	eparer's name	Preparer's sign	ature	PA   5/15	-1,  ci	heck if	PTH	
Pai		JAMES A.	ROTHERHAM, CPA		Rotherham, C	·~   2 113	112   56	elf employed	P00911471	
	parer	Firm's name		HAM & COMPA						
Us	e Only	Firm's addres	s 1011 CAMINO DE	L RIO S STE	410		Fi	rm's EIN ► 45-	1180982	
		<u> </u>	SAN DIEGO, CA				PI	none no (619)	543-9702	
			s return with the prepar			s)			X Yes	No
BA	A For Pa	perwork Re	duction Act Notice, se	e the separate	instructions.	TEEA	0113L 11/08	/13	Form 990	(2013)

	990 (2013)													_				46-	-28	6976	8	F	Page 2
Par			of Pro	_				•															
			edule O				ise or	note	to any	/ line	in this	Part	111										
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	5.111									.,													
2	Form 990 or	r 990-EZ	<u>.</u> ?	•		•	•		ces dui	ring tr	ne year	whici	n wer	e not	istea	on th	e prio	r			Yes	X	No
3	If 'Yes,' des Did the orga If 'Yes,' des	anızatıor	cease	condu	ıctıng,	or ma	ke sıg		int cha	anges	in hov	v it c	ondu	cts, a	ny pr	ograr	n ser	vices?			Yes	X	No
4	Describe the Section 501( others, the t	e organii c)(3) and	zation's d 501(c)(	progr 4) org	am sei anizatio	rvice a	accom d sect	plishr ion 49 each	ments 147(a)( progr	for ea 1) trus am se	ach of sts are ervice	its th requi repor	ree l red to rted.	larges o repo	t prog t the	jram amou	servi	ces, a grants	s me and	easur alloca	ed by ations	exper to	ses
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4 d	Other progra		ices (De	escrib	e ın S												<b></b>			· <b></b>			
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# Form 990 (2013) MENLO CHARTER PROPERTIES Part IV | Checklist of Required Schedules

	- Tonoshus, or required conceanes		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	110
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, 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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10		X
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			
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ŀ	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	11 b		<u> </u>
(	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	11 c		X
•	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	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u>X</u>
	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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	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	х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
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		_ <u>x</u> _
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		<u> </u>
	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		X
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	ļ	<u> </u>
t	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

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Pa	rt IV	Checklist of Required Schedules (continued)			
				Yes	No
21	Did to	the organization report more than \$5,000 of grants or other assistance to any domestic organizations or ernment on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	21		х
22	Did t	the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	22		х
23	and f	he organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete edule J	23		х
24	the I	he organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of ast day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and plete Schedule K. If 'No,'go to line 25a	24a		Х
	<b>b</b> Did t	the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	any 1	he organization maintain an escrow account other than a refunding escrow at any time during the year to defease tax-exempt bonds?	24c		
	<b>d</b> Did t	the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	<b>a Sect</b> disqi	ion 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a ualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	that t	e organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete edule L, Part I	25b		Х
26	form	he organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or ler officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? , complete Schedule L, Part II	26		Х
27	contr	he organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial ributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member by of these persons? If 'Yes,' complete Schedule L, Part III	27		х
	ınstrı	the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV uctions for applicable filing thresholds, conditions, and exceptions).			
	a A cu	rrent or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	<b>b</b> A fan Sche	mily member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete edule L, Part IV	28b		Х
	office	ntity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an er, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did t	the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	contr	the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation ributions? If 'Yes,' complete Schedule M	30		Х
31		the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did th Sche	he organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete edule N, Part II	32		х
33	Did th 301.7	he organization own 100% of an entity disregarded as separate from the organization under Regulations sections 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33	Х	
34		the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, V, line 1	34	Х	
35	<b>a</b> Did t	the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	<b>b</b> If 'Ye entity	es' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled y within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Secti orgai	ion 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related nization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х

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 BAA Form 990 (2013)

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

# Form 990 (2013) MENLO CHARTER PROPERTIES Part V | Statements Regarding Other IRS Filings and Tax Compliance

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

Form 990 (2013) MENLO CHARTER PROPERTIES Part VI | Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below. and for a 'No' response to line 8a. 8b. or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section 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 lf there are material differences in voting rights among members 1 a of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 7 b Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Δ 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X X 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a X a The governing body? X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a 10a Did the organization have local chapters, branches, or affiliates? b if 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE SCHEDULE O Schedule O how this was done 120 X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15 a X b Other officers of key employees of the organization 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b **Section C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ▶ CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Upon request Other (explain in Schedule O) SEE SCH. O Own website Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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#### Form 990 (2013) MENLO CHARTER PROPERTIES

Page 7 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and

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

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

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

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

		(C)								
(A) Name and Title	(B) Average hours per week (list	one bo	er an	not oless placed and	check perso irecto	more to n is both or/truste	than h an e)	(D)  Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee Individual trustee or director		Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099 MISC)	from the organization and related organizations
(1) BRUCE GREENSPON	2									
PRESIDENT	0	X		X			_	0.	0.	0.
(2) KEN DEEMER SECRETARY	2	Х		х				0.	0.	0.
(3) BRADLEY JEWETT	22									
<u>TREASURER</u>	0	X		Х				0.	0.	0.
(4)_MEGAN_HADDEN MEMBER	2	Х						0.	0.	0.
(5) JOHN QUITER	2							0.		
MEMBER	0	x						0.1	0.	0.
(6) TRACY BONDI	2									
OFFICER	0			Х				0.	0.	0.
(7) ALLISON SUFFET DIAZ OFFICER	2			х				0.	0.	0.
										<u> </u>
	ļ				$\dashv$					
_(9)	{·	.	.			l				
(10)										
<u>(11)</u>	<b></b>				_					
(12)			$\dashv$		$\dashv$					
				_	_					
(13)										
(14)										

Tart vii Section A. Onicers, Directors, Trus	1	rvey	Ш		_	cs,	alli	u mignest con	ipensaleu Emp	oyee	> (com	muea)
. (A) Name and title	Average hours per week (list any	offi	cer a	check ess pond a	sition more erson direct	e than is bot or/trus	th an stee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	amo	(F) stimated unt of on opensat	other
	hours for related organiza - tions below dotted line)	0. ₽	nstitutional trustee	Officer	Key employee	employee	Former	(W 2/1099 MISC)	(W-2/1099-MISC)	org	rom the ganization d relate anization	on ed
(15)		-					_					
(16)		-				_	-					
(17)										_		
(18)											•	
(19)						_						
(20)												
(21)												
(22)												
(23)												
(24)												
(25)				_						-		
1 b Sub-total			<b></b>				<b>-</b>	0.	0.	<del></del>		0.
c Total from continuation sheets to Part VII, Section	ı A						▶	0.	0.			0.
d Total (add lines 1b and 1c)							►	0.	0.			0.
2 Total number of individuals (including but not limited to from the organization ▶ 0	those in	sted	abov	ve) v	vho i	recei	ved	more than \$100,00	0 of reportable comp	ensatio	1	
											Yes	No
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such			key	em	ploy	ee,	or h	ighest compensat	ted employee	3		Х
<b>4</b> For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual	eportabl than \$1	e co: 50,00	mpe 00?	nsa If 'Y	tion es'	and com	oth olete	er compensation t e Schedule J for	from	4		х
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compen	satio	n fro	om a	any <i>I fo</i> i	unre	late	d organization or	ındıvıdual	5		X
Section B. Independent Contractors	,						,					
Complete this table for your five highest compensa- compensation from the organization. Report compensa-	ited inde	peno he ca	dent	cor	itrac ⁄ear	tors endi	that	t received more th	nan \$100,000 of ganization's tax year.			
(A) Name and business addres	ss							(B) Description o	of services	(( Compe	) nsatio	n
								<del></del>				
	<u> </u>			-								
	***						$\dashv$	<u>-</u>				
2 Total number of independent contractors (including but \$100,000 of compensation from the organization ▶		ted to	tho	se li	sted	abo	ve) v	who received more	than			

	Check if Schedule O contains a response or note to	any line in this Part \	<b>√</b> IIIL		
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
13	1a Federated campaigns 1a			· · · · · · · · · · · · · · · · · · ·	
RAN	b Membership dues 1 b				
S.S.	c Fundraising events 1c				
FE	d Related organizations . 1 d				
NS.	e Government grants (contributions)	_			
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 1,079,011				
N N	g Noncash contributions included in lines 1a-1f: \$				
<u>~</u>	h Total. Add lines 1a-1f  Business Code	1,079,011.			
8	2a DENTAL THOOME		205 055	*	* * * * *
짍	2a RENTAL INCOME531120	205,955.	205,955.		
<u>5</u>	c				
8	d	-			<del> </del>
S	e				<del> </del>
8	f All other program service revenue	-			
욡	g Total. Add lines 2a-2f	205,955.			
	3 Investment income (including dividends, interest and				
	,	<b>•</b>			
	4 Income from investment of tax-exempt bond proceeds.				
	5 Royalties	<u> </u>			
	(i) Real (ii) Personal	-			
	b Less. rental expenses	-			
	c Rental income or (loss)	$\dashv$			
	d Net rental income or (loss)	<u></u>			
	(i) Socurition (ii) Other				_
	7 a Gross amount from sales of assets other than inventory.	-			
	b Less cost or other basis and sales expenses				
	c Gain or (loss)	7			
	d Net gain or (loss)	** * *			i
ÆNUE	8a Gross income from fundraising events (not including . \$				
	of contributions reported on line 1c).				
OTHER RE	See Part IV, line 18	_{			
틍	b Less: direct expenses b	_			
	c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19	-			
		_			
	b Less' direct expenses  c Net income or (loss) from gaming activities	<b>.</b>	-		
- }		1	ļ		
	10a Gross sales of inventory, less returns and allowances . a				
	b Less. cost of goods sold c Net income or (loss) from sales of inventory				
ŀ	Miscellaneous Revenue Business Code				
ŀ	11a			*	
	b	<del> </del>	-		
	с		<del>                                     </del>	<del></del>	
	d All other revenue	<del> </del>			
	e Total. Add lines 11a-11d	<u> </u>			
	12 Total revenue. See instructions	1,284,966.	205,955.	0.	0.

	t IV Statement of Europianal Expon			40-286	19/06 Faye 10
	t IX Statement of Functional Expen		thar arganizations must s	omplete column (A)	
366	tion 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a	response or note to any	y line in this Part IX	· ·	· II
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
	Fees for services (non-employees):				
	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees Other. (If line 11g amt exceeds 10% of line 25, column				-
_	(A) amount, list line 11g expenses on Schedule 0) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	<u></u>			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	98,616.		98,616.	
23	Insurance	30,010.	-		
	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	MANAGEMENT & GENERAL	6,775.		6,775.	
	BANKING FEES	200.		200.	
C					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	105,591.	0.	105,591.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2013)

BAA

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 328,093. 2 Savings and temporary cash investments Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 7,634,289 b Less' accumulated depreciation 10b 10 c 98,616 7,535,673. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11. 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 0. 7,863,766. Accounts payable and accrued expenses 17 150.223 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 ABI Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 6,534,168. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 6,684,391. 0. X and complete Organizations that follow SFAS 117 (ASC 958), check here > lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 1,179,375. Temporarily restricted net assets 28 Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 33 0. 1,179,375. Total liabilities and net assets/fund balances 34 34 0. 7,863,766.

Form 990 (2013) MENLO CHARTER PROPERTIES	46-28697	68	Pa	age <b>1</b> 2
Part XI Reconciliation of Net Assets	·			
Check if Schedule O contains a response or note to any line in this Part XI				
1 Total revenue (must equal Part VIII, column (A), line 12)	1	1.2	84,9	<del>)</del> 66.
2 `Total expenses (must equal Part IX, column (A), line 25)	2		05,5	
3 Revenue less expenses Subtract line 2 from line 1	3		79,3	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0.
5 Net unrealized gains (losses) on investments	5			
6 Donated services and use of facilities	6			
7 Investment expenses .	7			-
8 Prior period adjustments .	. 8			
9 Other changes in net assets or fund balances (explain in Schedule O).	9			0.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
column (B))	10	1,1	79,3	<u> 375.</u>
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response or note to any line in this Part XII				
			Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain		_		ĺ
in Schedule O				
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	)	2 a	. *	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled separate basis, consolidated basis, or both:	d or reviewed on a			
Separate basis Consolidated basis Both consolidated and separate basis				
b Were the organization's financial statements audited by an independent accountant?		2 b	x l	l
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited of	nn a cenarate	20		
basis, consolidated basis, or both:	on a separate			Į
X Separate basis Consolidated basis Both consolidated and separate basis				
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c	x	
If the organization changed either its oversight process or selection process during the tax year, ex		120	- ^	
in Schedule O.	Apiairi			
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Audit Act and OMB Circular A-133?	the Single	3 a		х
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the r or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	21		
or addits, explain why in ochedule of and describe any steps taken to dildergo such addits		3 b		

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Form **990** (2013)

#### SCHEDULE A (Form 990 or 990-EZ)

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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. 2013

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2013

Name of the organization Employer identification number MENLO CHARTER PROPERTIES 46-2869768 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. X Type II Type III — Functionally integrated Type III - Non-functionally integrated C By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 11 g (i) Х A family member of a person described in (i) above? X 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Х h Provide the following information about the supported organization(s). (1) Name of supported organization (v) Did you notify the organization in column (i) of your support? (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (iv) Is the (vii) Amount of monetary (vi) Is the organization in column (i) listed in organization in support column ( your a organized in the (see instructions) our governing document? Yes No Yes No Yes No ENVIRONMENTAL CHARTER SCHOOLS (A) 33-0920934 NON-PROFIT Х Х X 105,590. (B) (C) (D) (E) Total 105,590

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

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

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

Se	ction A. Public Support						·
Cal beg	endar year (or fiscal year jinning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	<b>Public support.</b> Subtract line 5 from line 4						
Se	ction B. Total Support	,					•
Cal beg	endar year (or fiscal year inning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12	
	First five years. If the Form 990 is organization, check this box and	stop here		nird, fourth, or fifth	tax year as a section	on 501(c)(3)	► 🗌
	ction C. Computation of Pul			·			
	Public support percentage for 20	, ,	``	ne 11, column (f))		14	%
	Public support percentage from 2	•	•			15	%
	a 33-1/3% support test — 2013. If and stop here. The organization	qualifies as a put	olicly supported o	rganization			▶ ∐
1	b 33-1/3% support test — 2012. If t and stop here. The organization	he organization d qualifies as a pul	id not check a bo blicly supported o	x on line 13 or 16 organization	oa, and line 15 is	33-1/3% or more	, check this box
17	a 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstance	s' test, check this	box and ston her	e. Exnlaın ın Par	t IV how
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' i	and-circumstance test. The organiza	s' test, check this ation qualifies as a	box and <b>stop her</b> a publicly support	<b>e.</b> Explain in Par ed organization	t IV how the ►
	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a,			
$R\Delta\Delta$					Cal	adula A /Farm O	00 or 000 EZV 2012

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal yr beginning in) >	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants')						V,
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge.						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
I	a 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						
•	: Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
	tion B. Total Support					···	
	dar year (or fiscal yr beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
	Amounts from line 6					1	
	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						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).						
13	Total Support. (Add Ins 9,10c, 11 and 12)						<del>-</del>
	First five years. If the Form 990 organization, check this box and			id, third, fourth, c	or fifth tax year as	a section 501(	c)(3)
	tion C. Computation of Pul						
	Public support percentage for 20			e 13, column (f))	)	1!	
	Public support percentage from 2					10	6 %
	tion D. Computation of Inv				<del></del>		
	Investment income percentage for				ımn (f))	17	
	Investment income percentage fr					18	
	33-1/3% support tests — 2013. If is not more than 33-1/3%, check						
C	33-1/3% support tests – 2012. If line 18 is not more than 33-1/3%	the organization of the check this box a	uid not check a bo ind <b>stop here.</b> The	ox on line 14 or l e organization qu	ine 19a, and line 1 ialifies as a publicl	b is more than y supported or	ganization ►
20	Private foundation. If the organiz	zation did not che	ck a box on line 1	4, 19a, or 19b, c	theck this box and	see instruction	ns. ►

Schedule A	(Form 990 or 990-EZ) 2013	MENLO CHARTER PI	ROPERTIES	46-2869768	Page 4
Part IV	Supplemental Information or 17b; and Part III, line (See instructions).	on. Provide the expl 12. Also complete the	anations required by Part ils part for any additional	II, line 10; Part II, line 17a information.	
	<b></b>				
				· <b></b>	
<b>-</b>					
				- <b></b>	
		<b></b>			
				· <b></b>	<b>-</b>
				·	
<del>-</del>					
			<b></b>		
				·	
			<b></b>		

# SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	VLO CHARTER PROPERTIES	r Advised Funds or Other Similar Funds		46-2869768	
Par	Complete if the organization ansi	wered 'Yes' to Form 990, Part IV, line 6.	or ACC	ounts.	
-		(a) Donor advised funds	<b>(b)</b> Fu	unds and other accounts	_
1	Total number at end of year	.,	<u></u>		
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and dor are the organization's property, subject to the	or advisors in writing that the assets held in donor organization's exclusive legal control?	advised t	funds Yes No	
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant funds c of the donor or donor advisor, or for any other pur	an be use rpose con	ed only ferring Yes No	
Par					_
		wered 'Yes' to Form 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., r		a biotorios	lly important land area	
	Protection of natural habitat	Preservation of a		· ·	
	Preservation of open space		certifica	iistoric structure	
2	<u>'</u> '	eld a qualified conservation contribution in the form of	a conserv	ation easement on the	
	last day of the tax year.				
		_		eld at the End of the Tax Year	<u>r</u>
	Total number of conservation easements	<u> </u>	2a	·-··	
	<ul> <li>Total acreage restricted by conservation ease</li> <li>Number of conservation easements on a certification</li> </ul>	<u> </u>	2 b	·	—
		` ' <b> </b>			—
	structure listed in the National Register	n (c) acquired after 8/17/06, and not on a historic	2 d		
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished, or terminated by the o	rganization	n during the	
4	Number of states where property subject to conse				
5	and enforcement of the conservation easemer			Yes No	
6	<u> </u>	nspecting, and enforcing conservation easements durir		•	
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easements during the	e year		
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of section	n 170(h)(4	Yes No	
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	conservation easements in its revenue and expense s o the organization's financial statements that descri	tatement, ribes the	and balance sheet, and organization's accounting for	
Par	t III Organizations Maintaining Colle	ctions of Art, Historical Treasures, or Otl wered 'Yes' to Form 990, Part IV, line 8.	her Sim	ilar Assets.	_
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	SFAS 116 (ASC 958), not to report in its revenue ld for public exhibition, education, or research in furthe cial statements that describes these items	statemen erance of p	t and balance sheet works of ublic service, provide,	
t	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	SFAS 116 (ASC 958), to report in its revenue stat r public exhibition, education, or research in furtherance	ement an	d balance sheet works of art, c service, provide the	
	(i) Revenues included in Form 990, Part VIII,	line 1		<b>►</b> \$	
	(ii) Assets included in Form 990, Part X			<b>►</b> \$	_
	amounts required to be reported under SFAS		gain, prov		
	Revenues included in Form 990, Part VIII, line	1		<b>►</b> \$	_
t	Assets included in Form 990, Part X			<b>►</b> \$	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition d Loan or exchange programs
b Scholarly research e Other
c Preservation for future generations
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No
Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.
1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  b If 'Yes,' explain the arrangement in Part XIII and complete the following table:
Amount
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21?
<b>b</b> If 'Yes,' explain the arrangement in Part XIII. Check here if the explantion has been provided in Part XIII
Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back
1 a Beginning of year balance
<b>b</b> Contributions
c Net investment earnings, gains, and losses
d Grants or scholarships
e Other expenditures for facilities and programs
f Administrative expenses
g End of year balance
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment
b Permanent endowment > %
c Temporarily restricted endowment ► %
The percentages in lines 2a, 2b, and 2c should equal 100%.
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  Yes No
(i) unrelated organizations.
(ii) related organizations
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds.
Part VI Land, Buildings, and Equipment.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.
Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  (d) Book value
1 a Land
<b>b</b> Buildings 6,660,292. 98,616. 6,561,676
c Leasehold improvements
d Equipment
e Other 973, 997. 973, 997
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c) )  7,535,673

Part VII Investments – Other Securities.	l'Vas' ta Earm 000	N/A  Note: N/A  Note: N/A  Note: N/A  N/A  N/A	Part V line 12
Complete if the organization answered  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year	
(1) Financial derivatives	(b) book value	(C) Method of Valuation Cost of Cha-of-year	II market value
(2) Closely-held equity interests			<del></del>
(3) Other			-
		-	
(A) (B)			
(b)			
(C) (D) (E)			
(F)			<del></del>
(F)	··	<del></del>	
(G)	<del></del>	<del> </del>	
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII Investments - Program Related		N/A	
Complete if the organization answered	'Yes' to Form 990	), Part IV, line 11c. See Form 990,	Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-	year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	· · · · · ·		
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part IX Other Assets.	N/A		
Complete if the organization answered	I 'Yes' to Form 990	, Part IV, line 11d. See Form 990,	Part X, line 15.
(a) De	scription		(b) Book value
(1)			
(2)			
(3)			
(4) (5)			
(6)			
(7)	·		
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (	B), line 15.)	<u> </u>	
Part X Other Liabilities.	anno 000. Dant IV. lana 1	1 11f Can Farry 000 Dark V lung 05	
Complete if the organization answered 'Yes' to F	orm 990, Part IV, line I (b) Book value		
(a) Description of liability (1) Federal income taxes	(b) Book value		
(2)		<del></del>	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(10) (11)			
(10)	Notate to the organization's f	Inancial statements that reports the greenization's light	lity for uncertain

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains on investments 2a	
b Donated services and use of facilities 2b	1
c Recoveries of prior year grants	<b>1</b>
d Other (Describe in Part XIII.)	<b>1</b> 1
e Add lines 2a through 2d	7 2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII ) . 4b	1
c Add lines 4a and 4b.	1 4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	<del>-</del>
a Donated services and use of facilities 2a	
b Prior year adjustments 2b	
c Other losses 2c	- <del> </del>
d Other (Describe in Part XIII.)	1
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	1 ]
c Add lines 4a and 4b	4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
Part XIII Supplemental Information.	
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	t V, r additional information
BAA	Schedule <b>D</b> (Form 990) 2013

### **SCHEDULE O** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

MENLO CHARTER PROPERTIES	46-2869768
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
A DRAFT OF THE TAX RETURNS ARE REVIEWED AND APPROVED BY THE BO	DARD PRIOR TO FILING.
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCE	MENT OF CONFLICTS
BOARD MEMBERS FILE A FORM 700 EACH YEAR	
FORM 990, PART VI, LINE 18 - EXPLANATION OF OTHER MEANS FORMS AVAILA	ABLE FOR PUBLIC INSPECTION
DOCUMENTS AVAILABLE UPON REQUEST	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY	AVAILABLE
DOCUMENTS AVAILABLE UPON REQUEST	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	

MENLO CHARTER (g) Sec 512(b)(13) controlled entity? 욷 (f) Direct controlling entity × PROPERTIES Open to Public inspection Identification of Related Tax-Exempt Organizations Complete of the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. OMB No 1545-0047 Yes 201 Employer identification number (f)
Direct controlling
entity 46-2869768 N/A 7,858,149. (e) End-of-year assets Public charity status (if section 501(c)(3)) 170 (B) (1) (A) Part I Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33. 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. 1,274,815. Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. e (d) Total income Related Organizations and Unrelated Partnerships (d) Exempt Code section 501 (C) (3) (c)
Legal domicile (state or foreign country) CA (c)
Legal domicile (state or foreign country) S CHARTER SCHOOL REAL ESTATE (b) Primary activity HOLDING PUBLIC CHARTER (b) Primary activity SCHOOL BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a) (a) Name, address, and EIN of related organization ENVIRONMENTAL CHARTER SCHOOLS

16315 GREVILLEA AVE.

LAWNDALE, CA 90260

33-0920934 MENIO\_165TH PLACE, LLC 16315\_GREVILLEA AVENUE MENLO CHARTER PROPERTIES <u>GARDENA, CA 90260</u> 46-2869768 Department of the Treasury Internal Revenue Service Name of the organization **SCHEDULE R** (Form 990) Part II EΪ 1 |ئ 2 ାଞ୍ଚ € ල

Schedule R (Form 990) 2013

TEEA5001L 06/26/13

Schedule R (Form 990) 2013 MENLO CHARTER PROPERTIES

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(k) Percentage ownership				π  <.	Sec 512(b)(13) controlled entity?	Yes No					Schedule <b>R</b> (Form 990) 2013
General or managing partner?				90, Pa		۶					R (Form
				orm 9	(h) Percentage ownership						chedule
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)				Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	(g) Share of end-of- year assets						S
Disproportionate allocations?	<del></del>			nswer ear.			<del>.</del>				
Disp tio alloca	3			ation ar	(f) Share of total income						
(g) Share of end-of-year assets				rganiz ring th							
Sha end-c				Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answeren 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	Type of entity (C corp, S corp, or trust)						
Share of total income				omplet ation o	1 Jype			ļ			
Share Inco				<b>Frust</b> Corpora	(d) Direct controlling						16/27/13
t income irelated, rom tax ctions				ion or d as a							TEEA5002L 06/27/13
Predominant income (related, unrelated, excluded from tax under sections 512-514)				rporati s treate	(c) Legal domicile (state or foreign						TEE
				s a Co	Legal (state						
(d) Direct controlling entity				<b>cable a</b> organi	activity						
				ns Tay elated	(b) Primary activity						
(c) Legal domicile (state or foreign country)				<b>nizatio</b> nore r		<del>-        </del>					
activity				d Orgal	(a) Name, address, and EIN of related organization						
(b) Primary activity				<b>Relate</b> ot t had c	related o						
			1 1 1	ion of I	(a) EIN of		1 1		1           		 
(a) Name, address, and EIN of related organization				<b>itificat</b> 34 bec	ess, and	           1	1 1	   1 	     	1 1 1 1 1 1 1 1 1 1	 
(a) address ted orga				<b>Ider</b> □ line	ne, addr				     		
Name, rela	(E)	(2)	(3)	Part IV	Nan	(E)	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	(2)	. ! ! ! ! !	(6)	BAA
				· — ·		1 - 1	, ,	' '		, - 1	

Schedule R (Form 990) 2013 MENLO CHARTER PROPERTIES

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

			-	- 1-	1.
Note. Complete line 1 if any entity is listed in Parts II, III, of IV of this schedule.  1. During the tay year did the accompanies energy in any of the following transactions with one or more related organizations listed in Barts II.N/2	Marke II.W2			res	2
ra			-	4	×
<b>b</b> Gift, grant, or capital contribution to related organization(s)			1 p		×
c Gift, grant, or capital contribution from related organization(s)			10		×
d Loans or loan guarantees to or for related organization(s)			19		×
e Loans or loan guarantees by related organization(s)			-J	H	×
f Dundande from ralatad organization(e)			, -		^>
					: >
		•	<b>5</b>	1	×
h Purchase of assets from related organization(s)	٠		- - -		×
i Exchange of assets with related organization(s)			- -		×
j Lease of facilities, equipment, or other assets to related organization(s)			-Î	×	
k Lease of facilities, equipment, or other assets from related organization(s)			, <del>*</del>		×
I Performance of services or membership or fundraising solicitations for related organization(s).			11		×
m Performance of services or membership or fundraising solicitations by related organization(s)			1 =		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		•	-		×
o Sharing of paid employees with related organization(s)			10		×
			* ,		
p Reimbursement paid to related organization(s) for expenses			Пр		×
q Reimbursement paid by related organization(s) for expenses			19		×
r Other transfer of cash or property to related organization(s)			<u> </u>	***	×
s Other transfer of cash or property from related organization(s)			18		: ×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	d relationships and tran	saction thresholds.		1	:
(a) Name of related orga	(b) Transaction	(c) Amount involved	(d) Method of determining	termin	E
	type (a-s)		amount ir	volved	_
(1) ENVIRONMENTAL CHARTER SCHOOLS	ŗ	205,954.	FMV		]
(2)	ļ				1
(3)					
(4)					
(5)					]
, (9)					]
BAA TEEA5003L 06/27/13		Schedt	Schedule R (Form 990) 2013	990) 20	013

46-2869768

MENLO CHARTER PROPERTIES Schedule R (Form 990) 2013

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. Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Name, address, and EIN of entity Primary activity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Predominant // income (related, unre-lated, excluded from tax incles	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule	General or managing partner?	(k) Percentage ownership
			section 512-514)	Yes No			Yes No	(6001) 11110 -	Yes No	· · ·
(I)										
(2)										
	·									
	•									
(3)										
	,									
(4)										
	•									
(5)										
	•									
(9)										
	•									
( <i>i</i> )										
	.,							·		
(8)										
ВАА			1 1 1 EE	TEEA5004L 06/27/13				Schedule	Schedule R (Form 990) 2013	90) 2013

Schedule R	(Form 990) 2013 ME	NLO CHARTER PROPERTIES	46-2869768	Page 5
Part VII	Supplemental In	formation	dula Disconsiderational	
	Provide additiona	I information for responses to questions on Sche	dule R (see instructions).	
<del></del>			<del></del>	
			<b></b>	
		<del></del>		

6/30/14	201	2013 FEDE	RAL	B00	K DEP	RECIA	TION	SCH	ERAL BOOK DEPRECIATION SCHEDULE				PAGE 1
			Σ	ENLO C	HARTER	MENLO CHARTER PROPERTIES	RTIES						46-2869768
NO. DESCRIPTION	DATE DATE ACQUIRED SOLD.	E COST/	BUS SCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	METHOD LIFERATE	CURRENT DEPR
FORM 990/990-PF													
BUILDINGS													
1 BUILDINGS	7/01/13	6,660,292	762'(						6,660,292		1/3	93	98,616
TOTAL BUILDINGS MISCELLANFOLIS		6,660,292	),292	0	0	0	0	0	6,660,292	0	_		98,616
2 CONSTRUCTION IN PROGRESS	7/01/13	3/6	973,997						973,997				0
TOTAL MISCELLANEOUS		376	973,997	0	0	0	0	0	973,997	0			0
TOTAL DEPRECIATION		7,634,289	1,289		0				7,634,289	0			98,616
GRAND TOTAL DEPRECIATION		7,634,289	1,289	0	0	0	0	0	7,634,289	0			98,616