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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning SEP 1, 2013 and ending AUG 31, 2014

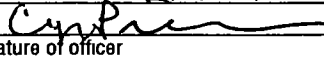
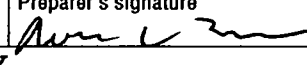
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE CO-OP SCHOOL Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 87 IRVING PLACE City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 11238 F Name and address of principal officer CYNTHIA PIERCE SAME AS C ABOVE	D Employer identification number 46-1402442 E Telephone number 347-721-3408 G Gross receipts \$ 3,353,848. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: WWW.THECOOPSCHOOL.COM K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other L Year of formation: 2014 M State of legal domicile: NY

Part I Summary

1	Briefly describe the organization's mission or most significant activities SEE SCHEDULE O		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	12
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	70
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 25,040.	Current Year 98,746.
	9 Program service revenue (Part VIII, line 2g)	2,743,442.	3,199,064.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10.	179.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	89,151.	36,559.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,857,643.	3,334,548.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,718,422.	2,059,991.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) 25,091.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	955,640.	1,113,355.	
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,674,062.	3,173,346.	
19 Revenue less expenses Subtract line 18 from line 12	183,581.	161,202.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 1,574,756.	End of Year 1,830,227.
	21 Total liabilities (Part X, line 26)	1,026,342.	1,120,611.
	22 Net assets or fund balances Subtract line 21 from line 20	548,414.	709,616.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer:  CYNTHIA PIERCE, PRESIDENT Type or print name and title	Date: 6/19/15
Paid Preparer Use Only	Print/Type preparer's name: ROBERT L. MANGER Preparer's signature:  Date: 06/16/15 Check if self-employed: <input type="checkbox"/> PTIN: P01593286 Firm's name: MANGER & COMPANY Firm's EIN: 13-3798026 Firm's address: 295 MADISON AVENUE, SUITE 901 NEW YORK, NY 10017 Phone no.: 212-986-3025	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

PS

SCANNED JUL 14 2015

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

THE MISSION OF THE CO-OP SCHOOL IS TO INSPIRE PASSION AND TEACH CHILDREN TO BECOME PROTAGONISTS IN THEIR OWN EDUCATIONAL JOURNEY BY FOSTERING THEIR INNATE SENSE OF CURIOSITY AND CREATIVITY. THE CO-OP SCHOOL FACILITATES JOYFUL LEARNING THROUGH A UNIQUE AND RIGOROUS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses

4a (Code) (Expenses \$ 1,439,332. including grants of \$) (Revenue \$ 1,243,500.) PRESCHOOL PROGRAM:

OUR PRESCHOOL PROGRAM FOLLOWS THESE GUIDING PRINCIPLES AS THE BASIS FOR OUR CURRICULUM:

- CHILDREN CONSTANTLY LEARN AS THEY PLAY.
- CHILDREN LEARN TO BE SOCIALLY INTERACTIVE THROUGH DRAMATIC PLAY.
- FEELING, TOUCHING AND CREATING THROUGH SENSORY ACTIVITIES ENHANCE COGNITIVE SKILLS.
- PAINTING, PASTING AND PARTICIPATION IN ART ACTIVITIES ALLOWS CHILDREN TO EXPRESS THEMSELVES CREATIVELY.
- CUTTING, ASSEMBLING AND THREADING OBJECTS ENCOURAGE THE DEVELOPMENT

4b (Code) (Expenses \$ 1,233,969. including grants of \$) (Revenue \$ 1,403,862.) ELEMENTARY SCHOOL -

OUR ELEMENTARY SCHOOL PROGRAM OFFERS A VARIED AND DIFFERENTIATED INSTRUCTION THAT EDUCATES THE ENTIRE CHILD ON ALL LEVELS: EMOTIONAL, SOCIAL, PHYSICAL AND INTELLECTUAL. WE TEACH READING, WRITING, MATHEMATICS AND SCIENCE THROUGH VARIOUS CURRICULA. WE CULTIVATE READERS THROUGH A BALANCED LITERACY APPROACH AND MATHEMATICIANS THROUGH REAL WORLD PROJECT-BASED LEARNING THAT ENCOURAGES REASONING AND PROBLEM SOLVING DEVELOPMENT.

4c (Code) (Expenses \$ 263,594. including grants of \$) (Revenue \$ 551,702.) OTHER PROGRAMS:

PLAYGROUP -

IN OUR PLAYGROUP PROGRAM CHILDREN AGES 6 MONTHS TO 2 YEARS OLD ATTEND WITH A PARENT OR CAREGIVER TO PLAY AND INTERACT WITH THEIR PEERS. THIS IS A TIME FOR FREE PLAY, AND AGE-APPROPRIATE TOYS, MUSICAL INSTRUMENTS AND ART MATERIALS ARE PROVIDED.

CAMP -

OUR SIX WEEK SUMMER CAMP PROGRAM IS DESIGNED FOR ACTIVE AND CREATIVE

4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 2,936,895.

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>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
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>		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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
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>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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		X
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 entry or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
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)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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	X	

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

X

Table with columns for question number, question text, and Yes/No columns. Includes rows 1a-1b, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7g, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, 14a-14b.

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.

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

X

Section A. Governing Body and Management

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
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

THE CO-OP SCHOOL - 347-721-3408
40 BREVORT PLACE, BROOKLYN, NY 11216

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) AMY MACPARLANE PRESIDENT(9/1/13-8/31/14)	3.00	X		X				0.	0.	0.
(2) MATT POLAZZO VICE PRESIDENT(9/1/13-8/31/14)	4.00	X		X				0.	0.	0.
(3) MONIQUE JOHNSON SECRETARY(9/1/13-8/31/14)	4.00	X		X				0.	0.	0.
(4) RACHEL WHITE TREASURER(9/1/13-8/31/14)	4.00	X		X				0.	0.	0.
(5) STEVE SELWOOD DIRECTOR(9/1/13-11/30/13)	2.00	X						0.	0.	0.
(6) MEGAN ROBERTS DIRECTOR(9/1/13-11/30/13)	3.00	X						0.	0.	0.
(7) EMILY ANTONIADES DIRECTOR(9/1/13-11/30/13)	3.00	X						0.	0.	0.
(8) ROBERT ROSS DIRECTOR(9/1/13-8/31/14)	3.00	X						0.	0.	0.
(9) HILI TSARFATI DIRECTOR(9/1/13-8/31/14)	3.00	X						0.	0.	0.
(10) COURTNEY VAGLIARDO DIRECTOR(9/1/13-8/31/14)	3.00	X						0.	0.	0.
(11) ELIZA FACTOR DIRECTOR(9/1/13-11/30/13)	3.00	X						0.	0.	0.
(12) CYNTHIA PIERCE DIRECTOR(12/1/13-8/31/14)	3.00	X						0.	0.	0.
(13) ROIE PARCHI DIRECTOR(12/1/13-8/31/14)	3.00	X						0.	0.	0.
(14) CHRISTINE NOLLEN DIRECTOR(12/1/13-8/31/14)	3.00	X						0.	0.	0.
(15) BEN CHEAH DIRECTOR(12/1/13-8/31/14)	3.00	X						0.	0.	0.
(16) MEREDITH GREY EXECUTIVE DIRECTOR(9/1/13-11/30/13)	40.00			X				70,371.	0.	6,200.

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes sub-totals for lines 1b, 1c, and 1d.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. All entries in column A are marked as NONE.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	89,616.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,130.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			98,746.			
Program Service Revenue	2 a <u>ELEMENTARY SCHOOL TUIT</u>	Business Code 611710	1,403,862.	1,403,862.			
	b <u>PRESCHOOL TUITION</u>	611710	1,243,500.	1,243,500.			
	c <u>SUMMER CAMP</u>	611710	228,894.	228,894.			
	d <u>OTHER PROGRAMS</u>	611710	211,329.	211,329.			
	e <u>STUDENT FEES</u>	611710	111,479.	111,479.			
	f All other program service revenue						
	g Total. Add lines 2a-2f			3,199,064.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		179.	179.			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ <u>89,616.</u> of contributions reported on line 1c) See Part IV, line 18	a		19,300.			
b Less direct expenses		b	19,300.				
c Net income or (loss) from fundraising events				0.			
9 a Gross income from gaming activities See Part IV, line 19	a						
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a <u>RENT</u>			36,559.	36,559.			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			36,559.				
12 Total revenue. See instructions.			3,334,548.	3,235,802.	0.	0.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	109,202.	54,601.	54,601.	
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	1,633,656.	1,558,526.	72,960.	2,170.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	145,887.	137,035.	8,553.	299.
10 Payroll taxes	171,246.	159,622.	11,519.	105.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	33,329.		33,329.	
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 Sch O.)	114,669.	109,634.	5,035.	
12 Advertising and promotion	14,214.	14,214.		
13 Office expenses	89,515.	67,982.	327.	21,206.
14 Information technology				
15 Royalties				
16 Occupancy	650,534.	633,617.	16,917.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	17,357.	15,621.	1,736.	
23 Insurance	45,250.	43,468.	1,765.	17.
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.)				
a TRAINING	54,674.	53,307.	1,367.	0.
b BAD DEBT EXPENSE	24,139.	24,139.		
c CLEANING SERVICE AND SU	19,590.	19,474.	116.	
d REPAIRS AND MAINTENANCE	18,422.	18,196.	226.	
e All other expenses	31,662.	27,459.	2,909.	1,294.
25 Total functional expenses. Add lines 1 through 24e	3,173,346.	2,936,895.	211,360.	25,091.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,135,845.	1	844,745.
	2 Savings and temporary cash investments	15,460.	2	515,639.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	70,710.	4	91,547.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	51,742.	9	66,433.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 292,909.		
	b Less: accumulated depreciation	10b 48,646.	10c 233,399.	244,263.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	67,600.	15	67,600.
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,574,756.	16	1,830,227.	
Liabilities	17 Accounts payable and accrued expenses	29,945.	17	23,944.
	18 Grants payable		18	
	19 Deferred revenue	595,170.	19	677,267.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	401,227.	25	419,400.
	26 Total liabilities. Add lines 17 through 25	1,026,342.	26	1,120,611.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	497,246.	27	661,785.
	28 Temporarily restricted net assets	51,168.	28	47,831.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	548,414.	33	709,616.	
34 Total liabilities and net assets/fund balances	1,574,756.	34	1,830,227.	

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	3,334,548.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,173,346.
3	Revenue less expenses Subtract line 2 from line 1	3	161,202.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	548,414.
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	709,616.

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		X
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?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization THE CO-OP SCHOOL
Employer identification number 46-1402442

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.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 X 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).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
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).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2).
10 An organization organized and operated exclusively to test for public safety.
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
e 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 section 509(a)(2)
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
(i) 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?
(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?
h Provide the following information about the supported organization(s)

Table with 3 rows (11g(i), 11g(ii), 11g(iii)) and 2 columns (Yes, No)

Table with 7 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of monetary support. Includes a Total row.

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

Schedule A (Form 990 or 990-EZ) 2013

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.)

Section A. Public Support

Calendar 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 include any "unusual grants.")				25,040.	98,746.	123,786.
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				25,040.	98,746.	123,786.
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						123,786.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4				25,040.	98,746.	123,786.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				10.	179.	189.
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						123,975.
12 Gross receipts from related activities, etc. (see instructions)					12	6,068,216.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	99.85	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>			

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

Calendar 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 include any "unusual grants.")						
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						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12

Also complete this part for any additional information. (See instructions)

Lined area for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization **THE CO-OP SCHOOL** Employer identification number **46-1402442**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

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
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

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

Part IV 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? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c 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 Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation 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
1a Beginning of year balance					
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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

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 (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		226,971.	33,967.	193,004.
d Equipment		65,938.	14,679.	51,259.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				244,263.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b 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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization 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: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	404,780.
(3) EXPANSION FEE DEPOSITS	14,620.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	419,400.

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	3,334,548.
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		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	3,334,548.
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	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,334,548.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements		1	3,173,346.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	3,173,346.
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	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	3,173,346.

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 V, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

EXPLANATION: GAAP REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE LIKELY THAN NOT" THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN.

THE ADOPTION OF THIS GUIDANCE DID NOT HAVE AN IMPACT ON THE SCHOOL'S FINANCIAL STATEMENTS, AS MANAGEMENT BELIEVES THAT THERE ARE NO UNCERTAIN TAX POSITIONS WITHIN ITS FINANCIAL STATEMENTS.

THE SCHOOL'S FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX IS SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER IT IS

FILED.

332054
09-25-13

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2013

▶ Attach to Form 990 or 990-EZ.

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE CO-OP SCHOOL

Employer identification number

46-1402442

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE CO-OP SCHOOL BELIEVES THAT JOYFUL LEARNING LAYS THE FOUNDATION FOR
LIFELONG LEARNING AND CRITICAL THINKING: CREATIVITY CANNOT EXIST
WITHOUT PASSION. WE EXTEND THIS BELIEF TO ALL OF OUR PROGRAMS -
ELEMENTARY AND PRESCHOOL EDUCATION, SUMMER CAMP AND TODDLER PLAYGROUP.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONSTRUCTIVIST APPROACH THAT LISTENS TO AND HONORS THE INDIVIDUAL
INTERESTS AND STRENGTHS OF EACH CHILD. THE CO-OP SCHOOL DOESNOT JUST
BELONG TO THE STUDENTS AND EDUCATORS, BUT EXTENDS TO THE FAMILY
COMMUNITY AS A WHOLE. IT BELONGS TO THOSE WHO PARTICIPATE IN IT, AND IS
A MORE RESILIENT AND CREATIVE PLACE BECAUSE OF IT.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OF FINE MOTOR SKILLS.
- PHYSICAL ACTIVITY AND MOVEMENT, SUCH AS BALANCING, CRAWLING, DANCING
AND JUMPING, HELP TO DEVELOP GROSS MOTOR SKILLS.
- READING STORIES EVERY DAY PROMOTES LITERACY WHILE EXPOSING CHILDREN
TO DIFFERENT CULTURES AND EXPERIENCES.
- POSITIVE INTERACTION AND COMMUNICATION ARE ENCOURAGED AMONG ALL THE
CHILDREN AS WELL AS BETWEEN ADULTS AND CHILDREN.

OUR CURRICULUM ENCOURAGES TEACHERS TO ASK OPEN-ENDED QUESTIONS AND
INTERACT WITH CHILDREN ON THEIR EYE LEVEL.

Name of the organization

THE CO-OP SCHOOL

Employer identification number

46-1402442

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

KIDS AGES TWO TO NINE! WE OFFER AN EXCITING SUMMER OF MUSIC, MOVEMENT, SPORTS, FINE AND CRAFT ARTS THAT INSPIRE KIDS TO EXPLORE THEIR PASSIONS AND TRY NEW THINGS.

SPACE RENTAL-

THE CO-OP SCHOOL'S LARGE RECREATION ROOM ON THE GROUND FLOOR OF 87 IRVING PLACE IS AVAILABLE TO RENT FOR SPECIAL OCCASIONS. IT IS OVER 1200 SQUARE FEET AND CONTAINS AN ADJOINING FULL SIZE KITCHEN. THE SPACE IS GREAT FOR LUNCHEONS, CONFERENCES, READINGS, PERFORMANCES, CHILDREN'S BIRTHDAY PARTIES AND OTHER EVENTS.

FORM 990, PART V, LINE 7B:

EXPLANATION: THE CO-OP SCHOOL WILL, IN THE YEAR ENDED AUGUST 31, 2015, PROVIDE THE DONOR WITH A WRITTEN STATEMENT INDICATING THAT THEIR DEDUCTION IS LIMITED TO THE EXCESS OF THE CONTRIBUTION OVER THE VALUE OF ANY GOODS OR SERVICES RECEIVED IN RETURN.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE SCHOOL'S EXTERNAL AUDITOR REVIEWS THE FORM 990 WITH THE FINANCE COMMITTEE AND THE FINANCE COMMITTEE SUBMITS THE FORM 990 TO THE ENTIRE BOARD FOR REVIEW.

FORM 990, PART VI, LINE 12B:

EXPLANATION: IN THE YEAR ENDED AUGUST 31, 2014 EVERY NEW BOARD MEMBER

Name of the organization

THE CO-OP SCHOOL

Employer identification number

46-1402442

RECEIVED A CONFLICT OF INTEREST POLICY. IN THE YEAR ENDED AUGUST 31, 2015 THE CO-OP SCHOOL IS PLANNING TO INITIATE A POLICY IN WHICH ALL BOARD MEMBERS WILL SIGN A WRITTEN STATEMENT REGARDING CONFLICTS OF INTEREST WHICH WILL INDICATE THAT THEY HAVE OR DO NOT HAVE A CONFLICT OF INTEREST REGARDING THE SCHOOL.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: IN THE YEAR ENDED AUGUST 31, 2015 THE CO-OP SCHOOL IS PLANNING TO INITIATE A POLICY IN WHICH ALL BOARD MEMBERS WILL SIGN A WRITTEN STATEMENT REGARDING CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A:

EXPLANATION: THE PROCESS OF DETERMINING THE EXECUTIVE OFFICER'S AND KEY EMPLOYEES' COMPENSATION INCLUDES A REVIEW OF THE SALARIES OF THESE INDIVIDUALS BY THE BOARD'S COMPENSATION COMMITTEE. IN DOING SO, THE COMMITTEE USES EXTERNAL DATA ON COMPARABLE SALARIES INCLUDING NON-PROFIT SALARY SURVEYS AND REVIEWS OF FINANCIAL INFORMATION FROM SIMILAR ORGANIZATIONS.

FORM 990, PART VI, SECTION C, LINE 18:

EXPLANATION: THE SCHOOL'S FORM 990 AND FORM 1023 ARE AVAILABLE UPON REQUEST. FORM 990 IS ALSO POSTED THE GUIDESTAR WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: UPON REQUEST, THE SCHOOL PROVIDES ITS GOVERNING DOCUMENTS, AND FINANCIAL STATEMENTS AVAILABLE TO MEMBERS OF THE PUBLIC WITHIN A REASONABLE PERIOD OF TIME UPON SUCH REQUEST.

2013 DEPRECIATION AND AMORTIZATION REPORT
FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	LEASEHOLD IMPROVEMENTS	101205	SL	39.00	16	2,730.			2,730.	1,889.		70.
2	LEASEHOLD IMPROVEMENTS	080109	SL	39.00	16	117,521.			117,521.	12,178.		3,013.
3	LEASEHOLD IMPROVEMENTS	091109	SL	39.00	16	28,470.			28,470.	2,891.		730.
4	EQUIPMENT	031910	SL	10.00	16	5,954.			5,954.	2,033.		595.
5	PLAYGROUND	072811	SL	10.00	16	34,195.			34,195.	7,125.		3,420.
6	RUGS	072811	SL	10.00	16	689.			689.	207.		69.
7	LOCKS	090310	SL	10.00	16	335.			335.	102.		34.
8	TABLES	122310	SL	10.00	16	395.			395.	106.		40.
9	CHAIRS	011911	SL	10.00	16	390.			390.	101.		39.
10	LEASEHOLD IMPROVEMENTS	072012	SL	39.00	16	9,533.			9,533.	275.		244.
11	LEASEHOLD IMPROVEMENTS	083012	SL	39.00	16	8,490.			8,490.	227.		218.
12	LEASEHOLD IMPROVEMENTS	051512	SL	39.00	16	5,370.			5,370.	178.		138.
13	AWNING	101411	SL	10.00	16	850.			850.	163.		85.
14	LEASEHOLD IMPROVEMENTS	092011	SL	39.00	16	5,835.			5,835.	294.		150.
15	LEASEHOLD IMPROVEMENTS	012612	SL	39.00	16	2,468.			2,468.	103.		63.
16	COMPUTER	051412	SL	10.00	16	800.			800.	107.		80.
17	OFFICE FURNITURE LEASEHOLD	091311	SL	10.00	16	597.			597.	120.		60.
18	IMPROVEMENTS	071212	SL	39.00	16	2,387.			2,387.	69.		61.

328102
05-01-13

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
19	SPRINKLER COVER LEASEHOLD	101812SL		39.00	16	355.			355.	8.		9.
20	IMPROVEMENT	111812SL		39.00	16	7,067.			7,067.	136.		181.
21	COLUMN PADDING	091912SL		5.00	16	960.			960.	96.		192.
22	LIBRARY TABLES	012913SL		5.00	16	1,264.			1,264.	126.		253.
23	SCIENCE TABLES	060713SL		5.00	16	2,815.			2,815.	282.		563.
24	EQUIPMENT	060713SL		5.00	16	1,500.			1,500.	150.		300.
25	FLOOR TILES	010113SL		5.00	16	1,079.			1,079.	108.		216.
26	FOAM BLOCKS	010113SL		5.00	16	5,502.			5,502.	550.		1,100.
27	WALL ENGRAVEMENTS FLOOR CLEANING	010113SL		5.00	16	325.			325.	33.		65.
28	MACHINE	010113SL		5.00	16	1,400.			1,400.	140.		280.
29	TABLES	010113SL		5.00	16	1,404.			1,404.	140.		281.
30	SHELVES	010113SL		5.00	16	1,540.			1,540.	154.		308.
31	CHAIRS	010113SL		5.00	16	612.			612.	61.		122.
32	GARDEN PLANTERS	010113SL		5.00	16	600.			600.	60.		120.
33	BLOCKS	010113SL		5.00	16	225.			225.	23.		45.
34	COMPUTER EQUIPMENT	010113SL		5.00	16	4,910.			4,910.	491.		982.
35	IPADS	010113SL		5.00	16	500.			500.	50.		100.
36	LAPTOPS	010113SL		5.00	16	500.			500.	50.		100.

328102
05-01-13

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
37	COLUMN PADDING	010113	SL	5.00	16	604.			604.	60.		121.
38	FURNITURE	062013	SL	5.00	16	4,516.			4,516.	404.		1,059.
39	TABLES	063014	SL	5.00	16	400.			400.			40.
40	CHAIRS	063014	SL	5.00	16	110.			110.			11.
41	COTS	063014		.000	16	1,580.			1,580.			0.
42	BUILDING BLOCKS	063014		.000	16	690.			690.			69.
43	SHELVES	063014		.000	16	320.			320.			32.
44	CARPETING	063014		.000	16	716.			716.			72.
45	TABLES	063014		.000	16	190.			190.			19.
46	BOOK SHELVES	063014		5.00	16	398.			398.			40.
47	CUBBIES	063014		5.00	16	663.			663.			66.
48	BOOK TOWER	063014		5.00	16	350.			350.			35.
49	STORAGE SHELVES	063014		5.00	16	520.			520.			52.
50	WRITING CENTER	063014		5.00	16	190.			190.			19.
51	BOOK DISPLAYS			5.00	16	310.			310.			31.
52	MUSIC RISERS			5.00	16	3,217.			3,217.			322.
53	CARPETING			5.00	16	1,239.			1,239.			124.
54	BUILDING STUDIES			.000	16	8,142.			8,142.			0.

328102
05-01-13

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
55	PLAYGROUND			5.00	16	6,302.			6,302.			630.
56	GARDEN PLANTERS	063014SL		5.00	16	376.			376.			38.
57	TEE PEE MATERIALS	063014SL		5.00	16	626.			626.			63.
58	SPRINKLER COVER	063014SL		5.00	16	980.			980.			98.
59	COMPUTER	063014SL		5.00	16	903.			903.			90.
	* TOTAL 990 PAGE 10 DEPR					292,909.		0.	292,909.	31,290.	0.	17,357.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions THE CO-OP SCHOOL	Employer identification number (EIN) or 46-1402442
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions 87 IRVING PLACE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions BROOKLYN, NY 11238	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

THE CO-OP SCHOOL

• The books are in the care of ▶ **40 BREVORT PLACE - BROOKLYN, NY 11216**
Telephone No ▶ **347-721-3408** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **APRIL 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
 ▶ calendar year _____ or
 ▶ tax year beginning **SEP 1, 2013**, and ending **AUG 31, 2014**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions THE CO-OP SCHOOL	Employer identification number (EIN) or 46-1402442
	Number, street, and room or suite no. If a P.O. box, see instructions 87 IRVING PLACE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions BROOKLYN, NY 11238	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

THE CO-OP SCHOOL

• The books are in the care of **40 BREVORT PLACE - BROOKLYN, NY 11216**

Telephone No **347-721-3408**

Fax No

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **JULY 15, 2015**

5 For calendar year _____, or other tax year beginning **SEP 1, 2013**, and ending **AUG 31, 2014**

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return

Change in accounting period

7 State in detail why you need the extension

FINANCIAL STATEMENTS NEEDED TO PREPARE A COMPLETE AND ACCURATE RETURN ARE NOT YET AVAILABLE.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Title **PRESIDENT**

Date