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SCANNED APR 13

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 Open to Public

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.

Inspection

<u> </u>			dar year, or tax year beginning 07/01/2015	· · ·								
<u>B</u>	Chec	k if applicable	C Name of organization Charter School Solution	ns, Inc.	D Empl	loyer identification number						
	Addre	ess change	Doing business as		47-3863601							
	Name	change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telep	phone number						
	Initial	return	9555 W Sam Houston Parkway S	200								
	Final n	eturn/terminated	City or town, state or province, country, and ZIP or foreign postal code									
	Amer	ided return	Houston, TX 77099		G Gross	s receipts \$ 1,026,474.						
	Applica	ition pending	F Name and address of principal officer Hakan Yagci			return for subordinates? Yes X No						
_			9555 W Sam Houston Parkway S Ste. 2	200 Houst H(b)	Are all subc	ordinates included? Yes No						
<u></u>	Гах-ех	empt status	X 501(c)(3)	527	If "No," attac	ch a list (see instructions)						
<u>J \</u>	Vebsi	e: <b>▶www</b> .	<pre>charterschoolsolutionstx.org</pre>	H(c)	Group exem	ption number						
		f organization		ear of formation 201	5 M	State of legal domicile TX						
Р	art I	Summa	ary									
	1	Briefly desc	ribe the organization's mission or most significant activities									
9		Facilitate charter school campus development projects.										
Governance												
/eri	2	Check this b	pox lacksquare if the organization discontinued its operations or disposed of mo	ore than 25% of its net	assets							
်	3	Number of v	roting members of the governing body (Part IV, line 1a)	CEIVED	3	3						
	4	Number of a	ndependent voting members of the governing body (Part VI, line 1b)		. 4	3						
Activities &	5	Total number	er of individuals employed in calendar year 2015 (Part V, line 2a)		5	2						
Ξ	6	Total number	er of volunteers (estimate if necessary)	2 7 2017 G	6	0						
Act	7a	Total unrela	ted business revenue from Part VIII, column (C), line 12	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	7a	8,689.						
			d business taxable income from Form 990-T, line 34	JENI IT	7b	0.						
				Prior-Yea	,	Current Year						
	8	Contribution	s and grants (Part VIII, line 1h)									
Revenue	9		vice revenue (Part VIII, line 2g)			·						
	10		ncome (Part VIII, column (A), lines 3, 4, and 7d)	·								
ě	11		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,026,474.						
	12		ie – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		-	1,026,474.						
	13		similar amounts paid (Part IX, column (A), lines 1-3)		-	1,020,4/4.						
	14		d to or for members (Part IX, column (A), line 4)		<del></del>							
	15	-	er compensation, employee benefits (Part IX, column (A), lines 5-10)	-		59,892.						
es			I fundraising fees (Part IX, column (A), line 11e)	` <b> -</b>		33,032.						
ens	1		Ising expenses (Part IX, column (D), line 25) ▶									
Expenses	1		<del></del>			024 056						
			ses (Part IX, column (A), lines 11a-11d, 11f-24e)			934,956.						
	18		ses Add lines 13-17 (must equal Part IX, column (A), line 25).			994,848.						
	19	Revenue les	s expenses Subtract line 18 from line 12	Bii		31,626.						
is or	20	Total assets	(Part V. Inn. 16)	Beginning of Curr	ent Year	End of Year						
Ssef Bala	20		(Part X, line 16)			57,093,371.						
Net Assets or Fund Balances	21		es (Part X, line 26)			57,061,748.						
_		Signatu	or fund balances Subtract line 21 from line 20	·		31,623.						
			ry, I declare that I have examined this return, including accompanying schedules a	and statements, and to the	- bast of m	diamental and ball of the						
			ete Declaration of preparer (other than officer) is based on all information of whice		-	y knowledge and belief, it is						
	e, con	ect, and comp	1	in preparer has any know	_ <del></del>	2/00/7						
S.	ign	Signatùr	e of officer	Dat		2/2017						
	ere	•	<b>V V</b>	50.								
	E1 E		n Yagci, CEO									
_	<del></del> -		t/Type preparer's name Preparer's signature	Date	Ta	If PTIN						
	aid	L		Jule	Check	∟ "						
	repa		Daughenbaugh	<del></del>		nployed P00853019						
U	se O		n's name BUSINESS BYEXPERTS, LLC			47-2218091						
			n's address 4606 FM 1960 W		one no							
			ton, TX 77069		332)9	10-8900						
May	the I	RS discuss the	nis return with the preparer shown above? (see instructions)	<u>.</u>	<u> </u>	Yes X No						

		Charter School S			47-3863601 Page 2
Par		_	vice Accomplishments		_
			onse or note to any line in this Part III		<u></u>
1	•	ribe the organization's mission			
			chools and education		
			ansas, New Mexico, N		uri,
	Louisi	iana, Oklahoma,	Tennessee, and Texa	as.	
2			ant program services during the year whi		
	-				· · 🗌 Yes 🗓 No
		scribe these new services on So			
3			nake significant changes in how it condu		
	services?.				· · · Yes 🗶 No
		scribe these changes on Sched			
4			e accomplishments for each of its three I		
			organizations are required to report the a	amount of grants and allocations to otl	ners,
	the total exp	penses, and revenue, if any, for	each program service reported		
		070	074	<del></del>	···
4a	(Code		, 874 . including grants of \$	) (Revenue \$	)
	Develo	opment of Harmon	ny Academy in El Pas	so, Texas.	
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-				
		····			
					•
40	(Code	) (Expenses \$	including grants of \$	\ /Pavenue \$	
40	(Code	) (cxpenses #	moldding grants or \$	) (Nevenue \$	/
		<del></del>			
			<del> </del>	· ·- · ·- ·- ·- ·- ·- ·- ·- ·- ·-	
	<del></del>				
			<del></del>		
					· · · · · · · · · · · · · · · · · · ·
				<del></del>	
4d	_	ram services (Describe in Sche		_	
	(Expenses		grants of \$ ) (Re	evenue \$	
	Total progr	am service expenses			978,874.
UYA					Form <b>990</b> (2015)

			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	<u> </u>	X
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	<u> </u>	X
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			ļ
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		1	
	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		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? If "Yes," complete Schedule D, Part II.	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u> </u>
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		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI,	1	3 4 254	1
	VII, VIII, IX, or X as applicable	1	فتكت	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	_X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	١		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			v
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-+	<u> </u>
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	اممما	]	v
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		<u>x</u> _
e f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
	the organization's separate of consolidated financial statements for the tax year include a roothole that addresses  the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120		
~	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>x</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Ì	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/7'Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
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>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	] ]		
	If "Yes," complete Schedule G, Part III	19		<u> </u>
IVA		F	ΔΩΛ	

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete Schedule J	23		x
24 a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	1 1		
	through 24d and complete Schedule K If "No," go to line 25a	24a	x	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
_	to defease any tax-exempt bonds?	24c		X
d		24d		X
25 a		170		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is this organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
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 "Yes," complete Schedule L, Part II	26		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		İ	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	}	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		15.3	V 34.
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	.Airlinei	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		$\dashv$	
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	<del>  " </del>		
•	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N,	<del>     </del>		
-	Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<del>"  </del>		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ŀ	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			<u></u>
•	or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	555	$\neg +$	
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1000		
	related organization? If "Yes,", complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<del>                                     </del>		<u> ~2</u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		l	
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<del>  "</del>	$\dashv$	
	400 44 4 41 = 1000 41	38	x	
	197 Note. All Form 990 filers are required to complete Schedule O	<u> </u>	42	

	Check if Schedule O contains a response or note to any line in this Part V			. П
	<del></del>		Yes	No
1 a	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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		i	
	reportable gaming (gambling) winnings to prize winners?	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return .	.		1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	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?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature of other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	ļ		
	(FBAR)			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			İ
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			ļ
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	, S.	4 4	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	أخنش		
	and services provided to the payor?	7a		
b	if "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		, ,
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		——
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	∤	—
h	if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		l
9	Sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	<del>,                                    </del>		X
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	$\dashv$	$\frac{\mathbf{x}}{\mathbf{x}}$
10	Section 501(c)(7) organizations. Enter	<u> </u>		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1	1	1
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	ĺ		
	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is 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			
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	1	}
	the organization is licensed to issue qualified health plans	İ	- 1	}
C	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
JYA		Form	990	(2015)

Form 990 (2015) Charter School Solutions, Inc. 47-3863601 Page 6 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 Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 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 members of the governing body? . 7a X Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? . . . X 8a **b** Each committee with authority to act on behalf of the governing body? 8b X 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No **10 a** Did the organization have local chapters, branches, or affiliates? 10a X 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 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12 a Did the organization have a written conflict of interest policy? If "No," go to line 13. 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . 12c 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 X 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? The organization's CEO, Executive Director, or top management official. . . . 15a X 15b X Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement . . . . . . . 16a X with a taxable entity during the year? . . . . 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 take steps to safeguard the organization's exempt status with respect to such arrangements?...... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed 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. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 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

State the name, address, and telephone number of the person who possesses the organization's books and records > (713) 900 - 7173 Hakan Yagci 9555 W Sam Houston Parkway S Ste. 200 Houston, TX 77099

orm 000 (2015)	Charter	Sahool	Solutions.	Tna
orm 990 (2015)	Charter	SCHOOL	SOLUTIONS.	Inc.

UYA

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Form 990 (2015)

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 definintion 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

Check this box in heither the organization i	lor arry rela	100 0	gai	(C		COIII	pen	Saled any cur	ent officer, direc	ior, or trustee
(A)	(B)			Posi				(D)	(E)	(F)
Name and Title	Average	(do n				than c	ne	Reportable	Reportable	Estimated
	hours per	box, ı	unles	s pe	rson	is both	an	compensation	compensation from	amount of
	week (list any hours for	office	officer and a director/trustee)					from	related	other
	related	Individual to	Ins	9	6	en E	Fo	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	direc	ttut	Officer	Key employee	ples	Former	(W-2/1099-MISC)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	organization
	below dotted	함	ona		횽	8 8	[	(		and related
	line)	Individual trustee or director	Institutional trustee		ee ee	mpe				organizations
		8	stee			Highest compensated employee				
	ļ		-	_		e <u>e</u>	-			
(1) Hakan Yagci	40.00									
CEO						X		39,000.		
(2) Gokturk Tunc										-
Vice-President		X						L		
(3) Bilal Erturk										
Board Secretary		X				<u> </u>				
(4) Robert Schulman						Ì		)		
President		X				ļ	<u> </u>			
(5)	<b> </b>									
(6)	<del> </del>						_			
(0)	,			i						
(7)										<del></del>
			Щ							·
(8)	ļ								JI	
(9)	ļ			_			-			<del></del>
(3)			Ì			}				
(10)	<u> </u>									<del></del>
			Ш			<u> </u>				
(11)							]			
(12)	<del> </del>		Н			<del> </del>	$\vdash$	-		<del></del>
1:-/										
(13)										
(14)	<del> </del>		Н				<u> </u>			
(17)	<del> </del>									
<del></del>			ш					<u> </u>		- 000

Part VII Section A. Officers, Directors, Iri	istees, Ke	y Emi	ploy	yee	<u>s, a</u>	na H	ghe	est Compensa	ited Employe	es (continued)
•				(0	<b>C)</b>					
. (A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average hours per	(do not check more than o box, unless person is both							Reportable compensations from	Estimated amount of
	week (list any	l.				or/trust		from	related	other
	hours for	-	_		_		<del></del>	the	organizations	compensation
	related organizations	dividual:	stitu	Officer	ey e	Highest co	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	
	below dotted	Individual trustee or director	Institutional trustee		Key employee	st co	4	(VF2) 1039-1VIIOC)		organization and related
	line)	trust	1 2	}	yee	l mg				organizations
	]	e	stee	ĺ		Highest compensated employee				
			L	_		e e				
(15)				1	1	1				
(16)	<del>  -</del>			├-	├—	├──	<u> </u>			<del></del>
(10)										
(17)			<b>-</b>		$\vdash$	<u> </u>				
				ĺ						
(18)										
				_	<u> </u>					
(19)						}				
(20)			<u> </u>	-		l —				<del></del>
(20)					1	1				
(21)					<u> </u>	-				
					l					
(22)										
			_		L.,					
(23)										
(24)				-	<u> </u>	<u> </u>		<u> </u>		
(24)				ĺ						
(25)					<del> </del>			<del></del>		
1b Sub-total								39,000.		
c Total from continuation sheets to Pa	ert VII, Sec	tion A	٩.							
d Total (add lines 1b and 1c)		·				<del>.</del>		39,000.	L	
2 Total number of individuals (including to reportable compensation from the organization)			tho	se	liste	d abo	ve)	who received	more than \$10	00,000 of
reportable compensation from the orga	IIIZation									
3 Did the organization list any former office	er, director	, or tr	uste	ee. I	kev	emple	ove	e, or highest co	ompensated	Yes No
employee on line 1a? If "Yes," complete					-		-			. 3 X
4 For any individual listed on line 1a, is the	sum of rep	oortab	ole d	com	per	satio	n an	d other compe	ensation from	
organization and related organizations gi	reater than	\$150,	,000	)?	If	"Yes,	" co	mplete Schedu	le J for such	
individual			•				•			4 X
5 Did any person listed on line 1a receive of for services rendered to the organization									zation or indiv	The state of the s
Section B. Independent Contractors	: 11 165,	comp	1010	30	1160	ule J	101 3	sucii persoii .	<del></del>	X
1 Complete this table for your five highest	compensat	ed inc	depe	end	ent	contra	acto	rs that receive	d more than \$	100.000 of
compensation from the organization Rep										
tax year. (A)								(B)	<del></del>	(6)
Name and business address								Description of	services	(C) Compensation
	<del></del> -									
							_			
								<del></del>		
2 Total number of independent contractors	(includina	but n	ot li	mite	ed t	o thos	e li	sted above) wh	- 10	
received more than \$100,000 of compen								•		

		Check if Schedule O contain	ns a response or no	te to any line in thi	s Part VIII			
		•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
रे रे	1a	Federated campaigns	1a	<u>T</u>	<del> </del>			00000013-012-014
Contributions, Gifts, Grants and Other Similar Amounts	b				1		†	
عَ وَ	c		· · · · 10	<del></del>	╡			
ifs I A	٦	Related organizations	<del> </del>	<del> </del>	┪			
ວຸ <u>ເ</u>	۾ ا	Government grants (contribu		<del>                                     </del>	┥			
Sign		All other contributions, gifts,			-{			
ig te	١.	and similar amounts not incli	-		-			
불표	_ ا	Noncash contributions include			-	}	į	
S E	9	Total. Add lines 1a-1f	-			4		
	<del>  ''</del>	Total. Add lilles 1a-11	<del>_ · · · · · · · · · · · · · · · · · · ·</del>	Business Code		<del> </del>		
Program Service Revenue	22			Dusiliess Code				
9.0	2a		-		<del>                                     </del>	<del> </del>		
8	b			<del></del>	·	<del> </del>		<del> </del>
Š	_ C			<del></del>	<del>                                     </del>	<del>                                     </del>	_	
Š	d			<del></del>	-			
<u> </u>	e	All other programs are as			<del></del>	<del> </del>	·	
8	<u>'</u>	All other program service rev						
	9	Total. Add lines 2a-2f				4 2 3	, ,	
	3	Investment income (including	=	,				
		and other similar amounts)	• • •					
	4	Income from investment of ta	ax-exempt bond produced	ceeds				
	5	Royalties		<b>P</b>	2 , 27 42 4	,		
			(ı) Real	(ii) Personal				
	_	Gross rents	1,017,785.					
	b			 			ex 1/2/4/5	
	C	Rental income or (loss)	1,017,785.	L		A. Gara	2 6 7 6	
		Net rental income or (loss)			1,017,785.	1,017,785.		
	7a	Gross amount from sales of	(i) Securities	(II) Other		1		\$ 34.
	_	assets other than inventory		<u> </u>				v .
	b	Less cost or other basis					*	
		and sales expenses			<b>↓</b> .			* 4
		Gain or (loss)						
	d	Net gain or (loss)	•	<u> </u>				
e	_							*
len	8a	Gross income from fundraisi	-					
Other Revenu		events (not including \$						
ē		of contributions reported on li	·					
5		•	a		-	1		
		Less direct expenses		<u> </u>				
		Net income or (loss) from fur	_	_ <del> •</del>				
ļ	9a	Gross income from gaming a			ŀ			
ı		See Part IV, line 19			-			
		Less direct expenses						
		Net income or (loss) from gar	-	<u>P</u>				
	10a	Gross sales of inventory, less				-		
		returns and allowances .			1			
		Less cost of goods sold .						
}	С	Net income or (loss) from sal						
		Miscellaneous Revenu		Business Code				
İ		Other		900099	8,689.		8,689.	
	b		<del></del>			<del> </del>		
]	C						<u>-</u>	
Ì		All other revenue						
		Total. Add lines 11a-11d .			8,689.			
	12_	Total revenue. See instruct	ions ·	. ▶	1,026,474.	1,017,785.	8,689.	<del></del>

3660	on solicitis) and solicity organizations must complete all cold		The first complete c		
	Check if Schedule O contains a response or note to any	<del></del>	<del></del>	<del></del>	<u></u>
Do n	ot include amounts reported on lines 6b, 7b, 8b, 9b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
and 1	0b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations		·		
	and domestic governments See Part IV, line 21			ļ	
2	Grants and other assistance to domestic				······································
-					
•	Individuals See Part IV, line 22			<del></del>	<del></del>
3	Grants and other assistance to foreign organizations,				
	foreign governments, and foreign individuals See Part IV,				
	Ines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees,		-		
	and key employees	55,636.	55,636.		
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				
8	Pension plan accruals and contributions (include section				
_	401(k) and 403(b) employer contributions (include section)				
9					
10		4,256.	4,256.	- <del></del>	
	Payroll taxes	7,230.	4,230.	<del></del>	
11	Fees for services (non-employees)	E 00F	E 00E	}	
	Management · · · · · · ·	5,005.	5,005.	<del>+</del>	
	Legal · · · · · · · · ·				<del></del>
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17 .				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O).				
12	Advertising and promotion				
13	Office expenses	92,274.	92,274.		
14	Information technology				
15	Royalties				
16	Occupancy				
17	: -				
18	F	- <del></del>			<del></del> _
10	Payments of travel or entertainment expenses for any				
40	federal, state, or local public officials				
19	Conferences, conventions, and meetings	F.C. 070	F.C. 070		
20	Interest	566,270.	566,270.		
21	Payments to affiliates		000 ===		
22	Depreciation, depletion, and amortization	229,773.	229,773.		
23	Insurance				<del></del>
24	Other expenses Itemize expenses not covered above	1	Ì	}	
	(List miscellaneous expenses in line 24e If line 24e amount	l	ļ	ļ	
	exceeds 10% of line 25, column (A) amount, list line 24e				
	expenses on Schedule O)				
а	Rent Expense	6,447.	6,447.		
	Utilities	1,001.	1,001.		
	Maintenance and Repair	19,494.	19,494.		
d		14,692.	14,692.		
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	994,848.	994,848.	-	
26	Joint costs. Complete this line only if the organization	JJ = 1 0 = 0 .			<del></del>
20		į			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check			ĺ	
_	here ▶ ☐ If following SOP 98-2 (ASC 958-720)				

	_	Check if Schedule O contains a response or note to any line in this Part X			
_	Τ		(A)		(B)
			Beginning of year		End of year
	1	Cash — non-interest-bearing		1	33,726,663.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	20,853.
	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'		ĺ	
		beneficiary organizations (see instructions)	- 0		
ets		Complete Part II of Schedule L	······	6	
Assets	7	Notes and loans receivable, net	<del></del>	7	89,003.
Ä	8	Inventories for sale or use		8	35,003.
	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or	-	Ť	
		other basis Complete Part VI of Schedule D	-		,
	l b	Less accumulated depreciation 10b 229,773.		10c	23,256,852.
	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	<del></del>
	15	Other assets See Part IV, line 11		15	<del></del>
	16	Total assets. Add lines 1 through 15 (must equal line 34)	-		57,093,371.
-	17	Accounts payable and accrued expenses		17	2,257,706.
	18	Grants payable		18	
	19	Deferred revenue		19	
S	20	Tax-exempt bond liabilities		20	54,804,042.
Ë.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees,		3 44	, , ,
<u>ia</u>		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		25	
	26	Total liabilities. Add lines 17 through 25		26	57,061,748.
es	i	Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗓 and complete lines 27			
ဥ		through 29, and lines 33 and 34.			
ᆵ	27	Unrestricted net assets		27	
m	28	Temporarily restricted net assets		28	
pu	29	Permanently restricted net assets		29	
표		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete			
5		lines 30 through 34.			
3	30	Capital stock or trust principal, or current funds		30	
Sei	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
et'	27 28 29 30 31 32 33 34	Total net assets or fund balances		33	
Ž_	34	Total liabilities and net assets/fund balances		34	57,061,748.

Check of 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 Total expenses (must equal Part IX, column (A), line 25) 2 994,848. 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 31,626.  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990 Cash Accrual Cher If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O assets, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis Accountant? Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Consolidated basis Separate basis Consolidated basis Separate basis Con	Form 99	O(2015) Charter School Solutions, Inc.		47-386	360	<b>1</b> Pa	ge <b>12</b>
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check of Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990 Cash Accrual 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?  1 Accounting method used to prepare the Form 990 Part A Recrual Other If the organization's financial statements compiled or reviewed by an independent accountant?  1 Accounting method used to prepare the Form 990 Balances Bal	Part						
2 994,848. 3 Revenue less expenses Subtract line 2 from line 1 Net assets of rfund balances at beginning of year (must equal Part X, line 33, column (A))		Check if Schedule O contains a response or note to any line in this Part XI					
3   31,626. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   4   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   10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))   9   10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))   10   31,626.  Part XIII Financial Statements and Reporting   10   31,626.  Part XIII Financial Statements are sponse or note to any line in this Part XII.       1 Accounting method used to prepare the Form 990   Cash   X Accrual   Other     1 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O   2 a Were the organization's financial statements compiled or reviewed by an independent accountant?   2a   X    If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis   Separate basis   Consolidated basis   X Both consolidated and separate basis, consolidated basis, or both     Separate basis   Consolidated basis   X Both consolidated and separate basis, consolidated basis, or both     Separate basis   Consolidated basis   X Both consolidated and separate basis   2c   X    If "Yes," to line 2 ao r 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?   2c   X    If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O   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?   3a   X	1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	.,02	6,4	74.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gams (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments. 9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 31,626.  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990	2	Total expenses (must equal Part IX, column (A), line 25)	2				
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Salancial Statements and Reporting 11 Accounting method used to prepare the Form 990 Cash Accrual Other 12 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 12 Both consolidated and separate basis, consolidated basis Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis of If "Yes," to line 2 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  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?  b If "Yes," id id 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	3	Revenue less expenses Subtract line 2 from line 1	3		3	1,6	26.
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Salancial Statements and Reporting 11 Accounting method used to prepare the Form 990 Cash Accrual Other 12 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 12 Both consolidated and separate basis, consolidated basis Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis of If "Yes," to line 2 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  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?  b If "Yes," id id 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	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				
7 Investment expenses 7	5		5				
8 Pror period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 3,3 column (B)) 10 31,626.  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990 Cash Accrual 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 Separate basis Consolidated basis Abox below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis, consolidated basis, or both Separate basis Abox below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis consolidated basis, or both Separate basis Abox below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Box and the financial statements and selection of an independent accountant?  2b X  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?  2c 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?  3b If "Yes," idd the organization undergo the required audit or audits? explain why in Schedule O and describe any steps taken to undergo such audits  3b	6	Donated services and use of facilities	6				
9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990  Cash  Accrual  Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2 a Were the organization's financial statements compiled or reviewed by an independent accountant?  2a  X  Separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis  Both consolidated and separate basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis, or both  Separate basis  Separate basis  Consolidated basis  Both consolidated and separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis, consolidated basis, or both  Separate basis  Separate basis  Consolidated basis  Separate basis  Consolidated basis  As a result of a federal award, was 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?  2c  X  Separate basis  Consolidated basis  Separate basis  Consolidated basis  Separate  S	7	Investment expenses	7				
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))    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 in Schedule O   2a   Were the organization's financial statements compiled or reviewed by an independent accountant?   2a   X       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   Separate basis   Consolidated basis   X   Both consolidated and separate basis, consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis, consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis, consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis, consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis   Consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis   Consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis   Consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis   Consolidated basis   X   Both consolidated and separate basis   Consolidated basis, or both   Separate basis   Consolidated basis   X   Both consolidated and separate basis   Consolidated basis, or both   Consolidated basis, or both   Consolidated basis, or both   Consolidated basis, or both   Consolidated basis, or both   Consolidated basis, or both   Consolidated basis, or both   Consolidated basis, or both   Consolidated basis, or both   Consolidated basi	8	Prior period adjustments	8				
31, 626.  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990	9	Other changes in net assets or fund balances (explain in Schedule O)	9				
Check if Schedule O contains a response or note to any line in this Part XII.    Accounting method used to prepare the Form 990   Cash   X Accrual   Other	10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
Check if Schedule O contains a response or note to any line in this Part XII.    Accounting method used to prepare the Form 990   Cash   X Accrual   Other		33, column (B))	10		3.	1,6	26.
1 Accounting method used to prepare the Form 990	Part				-		
1 Accounting method used to prepare the Form 990		Check if Schedule O contains a response or note to any line in this Part XII					. 🔲
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  Separate basis  Consolidated basis  XBoth consolidated and separate basis  b 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  Separate basis  Consolidated basis  XBoth consolidated and separate basis  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  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?  3a X  b 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  3b			-			Yes	No
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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    Separate basis		<del>-</del>	)				
basis, consolidated basis	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	X	
Departe basis		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of	n a sepa	arate			
b 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  Separate basis  Consolidated basis  X Both consolidated and separate basis  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  3 a 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?  b 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  3b		basis, consolidated basis, or both					
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  Separate basis  Consolidated basis  The Both consolidated and separate basis  Consolidated basis  The Both consolidated and separate basis  Consolidated basis  The Both consolidated and separate basis  Consolidated basis  The Both consolidated and separate basis  Consolidated and		Separate basis Consolidated basis Both consolidated and separate basis					:
basis, or both  Separate basis  Consolidated basis  X Both consolidated and separate basis  c 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  3 a 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?  b 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  3b	b	Were the organization's financial statements audited by an independent accountant?			2b	X	-
Separate basis  Consolidated basis  X Both consolidated and separate basis  c 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  3 a 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?  b 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  3b		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis, co	onsolidated	27	3.0	3 / 4
c 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  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?  b 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  3b		basis, or both			3 4 4	F7	÷ 5.3
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  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?  b 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  3b		Separate basis Consolidated basis X Both consolidated and separate basis			1	* * * *	
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  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?  b 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  3b	С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			4	7	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O  3 a 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?  b 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  3b					2c	X	uner seekuskus eigeleik
Schedule O  3 a 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?  b 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  3b					7.7	, v	3 - 3
the Single Audit Act and OMB Circular A-133?					* 3	agent.	4 4
the Single Audit Act and OMB Circular A-133?	3 a					، والأنصيب الأنافيد.	orinam market
b 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	-				3a		x
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	b	<del>-</del>				-	
	-				3b		
	UYA				Form	990	(2015)

### SCHEDULE D (Form 990)

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.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public

OMB No 1545-0047

Cha:	rter School Solutions, Inc.		47-3863601
Part	Organizations Maintaining Donor Adv	∕ised Funds or Other Similar Fu	nds or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		<del></del>
		· · · · · · · · · · · · · · · · · · ·	<del> </del>
4	Aggregate value at end of year (during year)	a waters that the second hold is done advised	d fundo oso the oscor-stante
5	•	_	· – –
_	property, subject to the organization's exclusive legal control		
6	Did the organization inform all grantees, donors, and donor		
	purposes and not for the benefit of the donor or donor advi-		
	private benefit?	<u> </u>	Yes No
Part			
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organiz	ation (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of h	istorically 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 qua	alified conservation contribution in the form of	f a conservation easement on the last day
	of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic s	structure included in (a)	
d	Number of conservation easements included in (c) acquire	` '	
u	listed in the National Register	a and 3 11700, and not on a motorio ottocal	2d
3	Number of conservation easements modified, transferred,	released extinguished or terminated by the	
3	organization during the tax year ▶	released, extinguished, or terminated by the	
		geoment is located by	
4	Number of states where property subject to conservation e  Does the organization have a written policy regarding the p		olotions.
5	and enforcement of the conservation easements # holds?		
•			
6	Staff and volunteer hours devoted to monitoring, inspecting	, nanding of violations, and emorcing conse	valion easements during the year
-	A		an anaganta di ma tha cara
7	Amount of expenses incurred in monitoring, inspecting, ha	ndling of violations, and enforcing conservati	on easements during the year
_	<b>&gt;</b> \$		1/4/201/
8	Does each conservation easement reported on line 2(d) ab	ove satisfy the requirements of section 170()	
	and section 170(h)(4)(B)(ii)?	• • •	Yes No
9	In Part XIII, describe how the organization reports conserve		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the	e organization's accounting for
	conservation easements		0.1.0.
Part			
	Complete if the organization answered "		
1a	If the organization elected, as permitted under SFAS 116 (	•	
	historical treasures, or other similar assets held for public e	exhibition, education, or research in furtherar	ice of public service, provide, in Part-XIII,
	the text of the footnote to its financial statements that desc	ribes these items	
b	If the organization elected, as permitted under SFAS 116 (		
	historical treasures, or other similar assets held for public e	exhibition, education, or research in furtherar	nce of public service, provide the following
	amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		. <b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical t		gain, provide the following amounts
	required to be reported under SFAS 116 (ASC 958) relating		-
а	Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
b	Assets included in Form 990, Part X		▶\$
Co-Do	Delegation of the least sections for Form 0	^^	Cabadata D (Farra 200) 2016

Schedu	ule D (Form 990) 2015 Charter Sc	hool Solut:	ions,	Inc.			47 -	38636	01	Page 2
Part		Collections of A	Art, His	torical T	reasures,	or Ot				tinued)
3	Using the organization's acquisition, accessi	on, and other records,	, check an	y of the fol	lowing that ar	e a sign	ificant use of its	collection	tems	
	(check all that apply)									
а	Public exhibition		d	Loan o	or exchange p	rograms	3			
b	Scholarly research		е	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain h	now they f	urther the o	organization's	exempt	purpose in Part	XIII		
5	During the year, did the organization solicit or rather than to be maintained as part of the or			ical treasui			ssets to be sold t		ds Yes	□No
Part		<del></del>	<u> </u>							
	Complete if the organization		on Forn	n 990, Pa	art IV, line	9, or r	eported an a	mount o	n Fo	orm
	990, Part X, line 21						·			
1a	Is the organization an agent, trustee, custodi	an or other intermedia	ry for con	tributions o	r other assets	not inc	luded		-	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the folio	owing table	е						_
							Ar	mount		
С	Beginning balance .				•	1c				
d	Additions during the year					1d	1			
е	Distributions during the year	• •				. 1e				
f	Ending balance		•			. 1f				
2a	Did the organization include an amount on F	orm 990, Part X, line 2	21, for esc	row or cus	todial accoun	t liability	?	. 🔲	Yes	No
b	If "Yes," explain the arrangement in Part XIII	Check here if the exp	olanation h	nas been pi	rovided in Par	t XIII	<u>.</u>			
Part										-
	Complete if the organization		on Forn	n 990, Pa	art IV, line	10				
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three years b	ack (e)	our ye	ars back
1a	Beginning of year balance .		-							
b	Contributions									
С	Net investment earnings, gains, and					i		ļ		
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
9	End of year balance						<u> </u>			
2	Provide the estimated percentage of the curr	•		olumn (a))	held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶%									
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	•								
3a	Are there endowment funds not in the posse	ssion of the organizat	ion that ar	e held and	administered	for the				<del>-,</del>
	organization by								Ye	s No
	(i) unrelated organizations		•	•				3a		
	(ii) related organizations					-		3a(		
b	If "Yes" on 3a(II), are the related organization							. <u>3</u> t		
4	Describe in Part XIII the intended uses of the		ment func	ls						
Par	Land, Buildings, and Equip		on Ear	1 000 E	art IV lina	110 0	See Form 000	) Dad V	' lim -	. 10
	Complete if the organization								<u> </u>	
	Description of property	(a) Cost or othe (investme		(b) Cost or (ot	other basis her)	• •	Accumulated epreciation		ook val	
1a	Land	6,662						6,6	62,	073.
b	Buildings	14,471	,188.				229,773.	14,2	41,	415.
С	Leasehold improvements									
d	Equipment			L						
<u>e</u>	Other	2,353		<u> </u>						364.
	Add lines 1a through 1e (Column (d) must ed	qual Form 990, Part X	, column (	B), line 10d	;)					852.
UYA							So	hedule D	rorm (	990) 2015

Page 2

Schedule D (Form 990) 2015

•	(a) Description of security or category (including name of security)	у	(b) Boo	k value		ethod of valuation end-of-year market value
1) Financial de	erivatives		<del></del>			and or your market value
-	d equity interests					
) Other	o equity interested 1. 1. 1. 1. 1. 1.		· ·			
(A)					· <del></del>	
(B)					- <del></del>	
(C)						
(D)		· · · · · · · · · · · · · · · · · · ·				
(E)			· · ·			<del></del>
(F)						
(G)					* *	
(H)						
	(b) must equal Form 990, Part X, col (B)					
	nvestments — Program Relat					
(	Complete if the organization ans	wered "Yes" on	Form 990, Pa	rt IV, line 1	1c See Form	990, Part X, line 1
	(a) Description of investment		(b) Boo	k value		ethod of valuation and-of-year market value
)						
<u> </u>					<u></u>	
)						
					<del></del>	
					<del></del>	<del></del>
						<del> </del>
)				1		
	(1)11 000 B1 V 1 (B)	1015			** *	
otal. (Column	(b) must equal Form 990, Part X, col (B)	) line 13 ) ▶		24,	and the first	
otal. (Column Part IX	Other Assets.	*	Form 000, Pa			
otal. (Column Part IX	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
Part IX (	Other Assets. Complete if the organization ans	*	Form 990, Pa			
otal. (Column Part IX (	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
Part IX (	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
part IX (Column (Colum	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
Part IX (	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
Part IX ( ( ) ) ) )	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
Part IX ( ( ) ) ) ) ) )	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
Part IX (	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
otal. (Column Part IX (	Other Assets. Complete if the organization ans	swered "Yes" on	Form 990, Pa			990, Part X, line 1
part IX  Part IX  ( ) ) ) ) ) ) ) ) ) )	Other Assets. Complete if the organization ans	swered "Yes" on (a) Description	Form 990, Pa			990, Part X, line 1
Part IX ( ( ) ) ) ) ) ) otal. (Column	Other Assets. Complete if the organization ans	swered "Yes" on (a) Description	Form 990, Pa		1d See Form	990, Part X, line 1
Part IX  ( ) ) ) ) ) ) ) otal. (Column Part X	Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B) Other Liabilities.	swered "Yes" on (a) Description		rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value
Part IX  ( ) ) ) ) ) ) ) otal. (Column Part X (	Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B)	swered "Yes" on (a) Description		rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value
Part IX  (Column  Part IX  (Column  (Co	Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B)  Other Liabilities. Complete if the organization ans ine 25.	wered "Yes" on (a) Description  Inne 15)  wered "Yes" on	Form 990, Pa	rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value
Part IX (Column ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B) Other Liabilities. Complete if the organization ans ine 25.  (a) Description of liability	swered "Yes" on (a) Description	Form 990, Pa	rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value
part IX  Part IX  Otal. (Column  Column  Column  Part X  Otal. (Column  Column   Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B) Other Liabilities. Complete if the organization ans ine 25.  (a) Description of liability	wered "Yes" on (a) Description  Inne 15)  wered "Yes" on	Form 990, Pa	rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value	
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part IX ( ) ) ) ) ) ) ) ) ) part IX ( ( ( ) ) ) ) ) part X ( ( ( ( ( ) ) ( ( ) ) ) ( ( ( ) ( ) ( ( ) ( ( ) ( ( ) ( ( ) ( ( ) ( ( ) ( ( ) ( ( ) ( ( ) ( ( ) ( ) ( ( ) ( ( ) ( ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ) ( ( ) ( ) ( ( ) ( ) ( ) ( ) ( ) ( ( )	Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B) Other Liabilities. Complete if the organization ans ine 25.  (a) Description of liability	wered "Yes" on (a) Description  Inne 15)  wered "Yes" on	Form 990, Pa	rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value
Column   Part IX   Column   Part IX   Column	Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B) Other Liabilities. Complete if the organization ans ine 25.  (a) Description of liability	wered "Yes" on (a) Description  Inne 15)  wered "Yes" on	Form 990, Pa	rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value
otal. (Column Part IX ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Other Assets. Complete if the organization ans  (b) must equal Form 990, Part X, col. (B) Other Liabilities. Complete if the organization ans ine 25.  (a) Description of liability	swered "Yes" on (a) Description  line 15)  swered "Yes" on (b) Book v	Form 990, Pa	rt IV, line 1	1d See Form	990, Part X, line 1 (b) Book value

Schedu	le D (Form 990) 2015 Charter School Solutions, Inc	•	47-38	863601 Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenu		
	Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	1,026,474.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
а	Net unrealized gains (losses) 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		
е	Add lines 2a through 2d		<u>2e</u>	
3	Subtract line 2e from line 1		3	1,026,474.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		-	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
C	Add lines 4a and 4b	•	. <u>4c</u>	
5	7	· · · · · · · · · · · · · · · · · · ·	5	1,026,474.
Part	XII Reconciliation of Expenses per Audited Financial State		ses per Retur	n.
	Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a		<del></del>
1	Total expenses and losses per audited financial statements		. 1	994,851.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1	1.00	
а	Donated services and use of facilities	2a		
b	Prior year adjustments	. 2b		
C	Other losses	. 2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1	· · · · · · ·	3	994,851.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	ļ		
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIII )	. 4b		
С	Add lines 4a and 4b	•	<u>4c</u>	
5	Total expenses Add lines 3 and 4c.(This must equal Form 990, Part I, line 18)	<u></u>	5	994,851.
	XIII Supplemental Information.			<del></del>
	the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV,		ine 4, Part X, line 2	ı
Part XI	lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	additional information		
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Schedule D (Form 990) 2015

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Schedule D (	(Form 990) 2015	<u> Charte</u>	r School	Solutions,	Inc.	47-3863601	Page (
Part XIII	Suppleme	ntal Inform	ation (contin	Solutions, ued)			
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Schedule D (Form 990) 2015

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SCHEDULE K (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

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

**Employer Identification number** 

(i) Pooled financing £ × × Yes ۵ \$0.00 \$0.00 \$0.00 \$0.00 47-3863601 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Yes No (h) On behalf of × × (g) Defeased ŝ × × ပ \$0.00 \$0.00 Yes \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Develop & Lease Description of purpose Charter Schools \$7,290,54 \$237,357 \$118,190 \$535,000  $\mathbf{\omega}$ \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 ε 2,849,000 \$45,933,319 \$1,763,01 ž \$847,300 \$ 45,933,318.55 \$ 7,290,547.00 ⋖ \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Yes (e) Issue price ₹Ş-AB3, AC1, AD9 05/05/2016 50376F: AG2, 06/08/2016 (d) Date issued 50376F: AA5, (c) CUSIP# AF4 (b) Issuer EIN 37-1745851 37-1745851 Inc. Working capital expenditures from proceeds Charter School Solutions, A The Industrial Development of the Capital expenditures from proceeds. Credit enhancement from proceeds Capitalized Interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Year of substantial completion Issuance costs from proceeds (a) Issuer name Amount of bonds retired Other unspent proceeds **Bond Issues** Total proceeds of issue Other spent proceeds County of La Paz, AZ Proceeds Name of the organization Part II Part |  $\mathbf{\omega}$ ပ 9 42 ~ S 9 œ O 13

Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?

Private Business Use

Part III

the final allocation of proceeds?

For Paperwork Reduction Act Notice, see the Instructions for Form 990. of bond-financed property?

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

Schedule K (Form 990) 2015

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Yes

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Yes

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Yes

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Yes

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Yes

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Yes

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Yes

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Does the organization maintain adequate books and records to support

Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue?

4 15 9 4

Has the final allocation of proceeds been made?

47-3863601 Page

2

Schedule K (Form 990) 2015 Charter School Solutions, Inc. Part III Private Business Use (Continued)

ဍ ဍ 0.00000.0 Yes Yes  $\overline{\mathbf{x}}$ 8 38 £ ş 0.00000.0 Yes Yes 8 8 8 ဍ ٩ × × × 0.00000.0 × × × × m Ω Yes Yes 38 8 £ × × ĝ × X × 0.00000.0 × × 4 Yes Yes A  $\overline{\mathbf{A}}$ nongovernmental person other than a 501(c)(3) organization since the bonds were issued?. counsel to review any management or service contracts relating to the financed property? b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities d If "Yes" to line 3c, does the organization routinely engage bond counsel or other Enter the percentage of financed property used in a private business use as a Are there any research agreements that may result in private business use of 8a Has there been a sale or disposition of any of the bond-financed property to a result of unrelated trade or business activity carried on by your organization, other than a section 501(c)(3) organization or a state or local government c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations b If "Yes" to line 8a, enter the percentage of bond-financed property sold or 3a Are there any management or service contracts that may result in private Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and nonqualified bonds of the issue are remediated in accordance with the If "Yes" to line 2c, provide in Part VI the date the rebate computation was another section 501(c)(3) organization, or a state or local government 4a Has the organization or the governmental issuer entered into a qualified Has the organization established written procedures to ensure that all requirements under Regulations sections 1.141-12 and 1.145-27 Does the bond issue meet the private security or payment test? business use of bond-financed property? If "No" to line 1, did the following apply? Is the bond issue a variable rate issue? hedge with respect to the bond issue? Penalty in Lieu of Arbitrage Rebate? d Was the hedge superintegrated? sections 1.141-12 and 1.145-27 e Was the hedge terminated? bond-financed property? Total of lines 4 and 5 **b** Exception to rebate? Arbitrage a Rebate not due yet? b Name of provider c No rebate due? c Term of hedge disposed of performed Part IV S თ 7 က

Schedule K (Form 990) 2015

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

Department of the Treasury

Internal Revenue Service

Name of the organization

## 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.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Charter	School	Solutions,	Inc.	47-3863601
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Schedule O (Form 990 or 990-EZ) (2015)	Page <b>2</b>
Name of the organization	Employer identification number
Charter School Solutions, Inc. Part VI Line 19	47-3863601
Part VI Line 19	
Upon Request	
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Schedule O (Form 990 or 990-EZ) (2015)

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