SCANNED

Return of Organization Exempt From Income Tax

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

lacktriangle Do not enter social security numbers on this form as it may be made public. |Q|► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

For the 2017 calendar year, or tax year beginning JUL 1, 2017 and ending JUN 30 C Name of organization D Employer identification number CONSERVATORY LAB CHARTER SCHOOL Address change FOUNDATION, INC. Name change 04-3443578 Doing business as]Initial |return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 254-8904 2120 DORCHESTER AVENUE (617) termin-ated 2,523,605. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ DORCHESTER, MA 02124 H(a) Is this a group return Applica-」Yes LX No F Name and address of principal officer BRADLEY RICHARDSON for subordinates? same as C above H(b) Are all subordinates included? Tax-exempt status. X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) J Website: WWW.CONSERVATORYLAB.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Year of formation: 1998 M State of legal domicile: MA Part I Summary Briefly describe the organization's mission or most significant activities. THE FOUNDATION'S PURPOSE IS TO Governance SUPPORT THE DISSEMINATION OF LEARNING THROUGH MUSIC AS AN Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI RECEIVED Activities & 4 Total number of individuals employed in calendar year 2017 (Part V. line 2a) 0 Total number of volunteers (estimate if necessary) OCT 3 1 2018 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** OGDEN 441 ,123 820,752. Contributions and grants (Part VIII, line 1h) 844,443 92<u>5,2</u>75. Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 77,139. 48,779. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 362,705 794,806. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 293,769 438,792. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Benefits paid to or for members (Part IX, column (A), line 4) 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 201 325 249,195. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 249,195. b Total fundraising expenses (Part IX, column (D), line 25) 1,021,617 1,029,808. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,516,711 ,717,795. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 <154,006. 77,011. Assets or | Balances **Beginning of Current Year End of Year** 5,367,169. 5,402,492. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 239,528 3,19<u>2,023.</u> Net assets or fund balances Subtract line 21 from line 20 127,641 2,210,469. 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. w 20/8 Signature of officer Sign BRADLEY RICHARDSON, PRESIDENT Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name Paid DAVID F. MURPHY 10/22 /18 self-employed P00482310 Preparer Firm's name **ZINER & MURPHY** Firm's EIN 04-3434210 Use Only Firm's address TWO MAIN STREET, SUITE 240 781-279-2950 STONEHAM, MA 02180 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes

LHA For Paperwork Reduction Act Notice, see the separate instructions. See Schedule O for Organization Mission Statement Continuation

Form 990 (2017)

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC.

Form	n 990 (2017) FOUNDATION, INC.	04-3443578 Pag	e 2
_	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		\Box
1	Briefly describe the organization's mission.		
	THE FOUNDATION'S PURPOSE IS TO SUPPORT THE DISSEMINATI	ON OF LEARNING	
	THROUGH MUSIC AS AN EDUCATIONAL MODEL.		
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
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es? Yes X	Nο
3	If "Yes," describe these changes on Schedule O	,3	110
4	Describe the organization's program service accomplishments for each of its three largest program services,	as maggired by expanses	
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to c		
		others, the total expenses, and	
	revenue, if any, for each program service reported	074 054	
4a			·•)
	THE FOUNDATION RAISED FUNDS TO BENEFIT THE PROGRAMS FO		
	DISSEMINATION OF LEARNING THRU MUSIC AS AN EDUCATIONAL	' WODEL	
		 	
		···	
4b	(Code) (Expenses \$) (Re	evenue \$	
			_ ′
			_
			_
			_
			_
			—
			—
			—
			
4c	(Code) (Expenses \$) (Re	evenue \$	_)
			
			—
		<u> </u>	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 1,123,269.		_
		Form 990 (20	D17)

Form 990 (2017)

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC.

Pai	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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) 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, 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	- <u>-</u>		
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	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	-		-
٠	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-	-	
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?		ĺ	
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	3	 	-
10	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, VIII, IX, or X	10	- 1	
• •	as applicable.	•	İ	
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	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c)	X
ч	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	110		
<u> </u>	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		 -
•	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			
14.0	Schedule D. Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			 -
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	<u>, </u>		 -
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		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? If "Yes," complete Schedule G, Part II	18		Х
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a2 if "Ves."			 -

Form 990 (2017)

complete Schedule G, Part III

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Form 990 (2017) FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	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		<u>X</u>
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		<u>X</u>
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a	X	47
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			v
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		X
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
ь	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		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	230		
	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 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, 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		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	}	<u>X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		1	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
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 conservation]]	Ì	77
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		Ī	v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	-	<u>X</u>
JE	Schedule N, Part II	32	- 1	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? If "Yes," complete Schedule R, Part I	33	ł	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	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 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 related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		İ	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	<u>X</u>	
		F		1017

Form 990 (2017) FOUNDATION, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	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 2a 4			
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)			
За	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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		i	
	financial account in a foreign country (such as a bank account, securities account, or other financial 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 (FBAR)	ļ		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	f		
	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 gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		7.7
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
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?	70		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		Λ_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
a	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b_		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
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 against			
	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 504(a)(20) qualified pages 14 househ increases increases.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	-	
а	Note. See the instructions for additional information the organization must report on Schedule O.	134		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
IJ	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	$\neg \uparrow$	
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Form 990 (2017) FOUNDATION, INC.

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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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		\mathbf{X}_{-}
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
	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	х	
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	х	
	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00		
3	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	tion 2.1 one to firm decision a requeste information about policies not required by the internal revenue code?		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	_
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		- 41
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	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	14		
.5	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a		X_
a h	Other officers or key employees of the organization	15b		X
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	IOD		
16~	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iva	taxable entity during the year?	160		х
L		16a		
O	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		ļ	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	406	Ì	
Sec	exempt status with respect to such arrangements? tion C. Disclosure	16b		
	List the states with which a copy of this Form 990 is required to be filed ►MA			
17 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) a	vailah	ام	
10		validu	16	
	for public inspection. Indicate how you made these available. Check all that apply			
40	Own website Another's website W Upon request Other (explain in Schedule O)	d		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	unan	Jial	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ANDRES BARRAZA - (617) 254-8904			
	2120 DORCHESTER AVENUE, DORCHESTER, MA 02124			_

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FOUNDATION, INC.

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

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

X Check this box if neither the organization (A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				i than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DEBRA L. SMITH DIRECTOR	0.25	x						0.	0.	0
(2) KATHARINE M. PELL CLERK	2.00			х				0.	0.	0
(3) JOHN PAOLELLA TREASURER	0.50			х				0.	0.	0
(4) BRADLEY RICHARDSON PRESIDENT	2.00			х				0.	0.	. 0
		-			- .					
										·
										·
										<u></u>

4 –	3	4	4	3	5	7	8	Page	8

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC. 0 Form 990 (2017) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (B) (C) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any ndividual trustee or director the organizations compensation hours for (W-2/1099-MISC) from the organization trustee related (W-2/1099-MISC) organization organizations and related (ey employee Institutional below organizations line) 0. 0. 0 1b Sub-total \triangleright 0. c Total from continuation sheets to Part VII, Section A 0. 0. 0. 0. d Total (add lines 1b and 1c) 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 No Yes Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on X line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual X Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person X Section B. Independent Contractors 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 (C) (A)

Name and business address	Description of services	Compensation
FINNERAN GLOBAL STRAGETY		100.000
	CONSULTING	180,000.
Total number of independent contractors (including but not limited		
\$100,000 of compensation from the organization	1	

04 - 3443578FOUNDATION, INC. Page 9 Form 990 (2017) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (C) Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue 1 a Federated campaigns 1a 1b Membership dues b Fundraising events 10 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 820,752. similar amounts not included above 1f 30,692 g Noncash contributions included in lines 1a-1f \$ 820,752 h Total. Add lines 1a-1f Business Code 636,275. 636,275 531120 2 a RENTAL INCOME 289,000. b CONSULTING 541900 289,000. f All other program service revenue 925,275. Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 14,900. 14,900. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory 762,678. b Less cost or other basis 728,799 and sales expenses 33,879. c Gain or (loss) 33,879. 33,879. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 а b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold b c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a d All other revenue

e Total, Add lines 11a-11d

Total revenue See instructions.

0.

0.

794,806.

974,054.

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Form 990 (2017) FOUNDATION, INC.

Part IX Statement of Functional Expenses

Sect	tion 501(c)(3) and 501(c)(4) organizations must comp		er organizations must co	mplete column (A)	
000	Check if Schedule O contains a response			impiete column (r y	X
	not include amounts reported on lines 6b, 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 domestic organizations				** .*
	and domestic governments. See Part IV, line 21	438,792.	438,792.		
2	Grants and other assistance to domestic				-
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
,	· · · · · · · · · · · · · · · · · · ·	211,205.			211,205.
7 8	Other salaries and wages Pension plan accruals and contributions (include	411,403.			411,403.
٥	section 401(k) and 403(b) employer contributions)	2,860.		}	2,860.
9	Other employee benefits	18,519.			18,519.
10	Payroll taxes	16,611.			16,611.
11	Fees for services (non-employees)	10,011.			10,011.
а	Management		_		
b	· , , · · · · · · · · · · · · · · · · ·	3,528.	-	3,528.	
c	Accounting .	36,339.		36,339.	
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 Sch 0.)	275,491.		275,491.	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties		·		
16	Occupancy	475,256.	475,256.		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	94,757.	04 757	·	
20	Interest Payments to affiliates	74,/5/•	94,757.		
21 22	Depreciation, depletion, and amortization	64,464.	64,464.		
23	Insurance	04,404.	04,404.		
23	Other expenses. Itemize expenses not covered				•
24	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 0.)				
а	OPTION COSTS	50,000.	50,000.		
b	EVENT EXPENSES	10,320.		10,320.	· · · · · · · · · · · · · · · · · · ·
c	OFFICE EXPENSES	8,554.		8,554.	
d	BANK FEES	5,332.		5,332.	
	All other expenses	5,767.		5,767.	
25	Total functional expenses Add lines 1 through 24e	1,717,795.	1,123,269.	345,331.	249,195.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined			ľ	
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				5 000 (0047)

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC.

Form 990 (2017)
Part X | Balance Sheet

Pa	rt,A	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
		1	(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	891,364.	_ 1_	135,666.
	2	Savings and temporary cash investments	122,311.	2	76,769.
	3	Pledges and grants receivable, net	186,500.	3	152,500.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
	ļ	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	·		
S	ļ	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
ĕ	8	Inventories for sale or use	<u> </u>	8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 5,034,934.	1		_
	ь	Less: accumulated depreciation 10b 805,933.	3,527,791.	10c	4,229,001.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	611,628.	12	741,457.
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	27,575.	15	67,099.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,367,169.	16	5,402,492.
	17	Accounts payable and accrued expenses	76,602.	17	95,337.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	<u> </u>	20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	. <u></u>	21	
es	22	Loans and other payables to current and former officers, directors, trustees,			,
ij		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties	3,162,926.	23	3,096,686.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	l	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	3,239,528.	26	3,192,023.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🐰 and			
ės		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	1,513,240.	_27	1,938,193.
Bal	28	Temporarily restricted net assets	608,896.	28	266,764.
Net Assets or Fund Balances	29	Permanently restricted net assets	5,505.	29	5,512.
Ţ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
ō	ĺ	and complete lines 30 through 34.			,
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et i	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	2,127,641.	_33	2,210,469.
	34	Total liabilities and net assets/fund balances	5,367,169.	34	5,402,492.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

FOUNDATION, INC. 04-3443578 Page 12 Form 990 (2017) Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12) 794,806. 1 717,795. Total expenses (must equal Part IX, column (A), line 25) 2 2 77.011. 3 3 Revenue less expenses Subtract line 2 from line 1 2,127,641 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 6 Investment expenses 7 7 8 Prior period adjustments 8 0. 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)) 10 2,210,469. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990 X Accrual ___ Cash __ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 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 Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? X 2b 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 X Separate basis ☐ Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? X 2c 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? X За b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Form 990 (2017)

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number Name of the organization CONSERVATORY LAB CHARTER SCHOOL 04-3443578 FOUNDATION. INC. Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X 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). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated, A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (III) Type of organization (v) Amount of monetary (i) Name of supported (n) EIN (vi) Amount of other in your governing document? (described on lines 1 10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 (f) Total (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support (b) 2014/ Calendar year (or fiscal year beginning in) (a) 2013 (c) 2015) (d) 2016 (e) 2017 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 13 First five years. If the Form 990 s 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 14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2016 Schedule A, Part II, line 14 % 15 16a 33 1/3% support test - 2017. 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 b 33 1/3% support test - 2016. 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 17a 10% -facts-and-circumstances test - 2017. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2016. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 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 Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC.

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Sec	ction A. Public Support	elow, please comp	olete Part II)		·····		
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and		(3)				
	membership fees received (Do not						
	include any "unusual grants")	601,428.	2245939.	384,583.	441,123.	820,752.	4493825.
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			16		ļ	
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf)				
£	The value of services or facilities				 -		
3	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	601,428.	2245939.	384,583.	441,123.	820,752.	4493825.
	a Amounts included on lines 1, 2, and	001,420.	_2243333.	304,303.	441,143.	020,132.	4455025.
, ,	3 received from disqualified persons	112,963.	269,850.	70,000.	43,074.	66,192.	562,079.
t	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			,		30,25	0.
c	Add lines 7a and 7b	112,963.	269,850.	70,000.	43,074.	66,192.	562,079.
_8	Public support. (Subtract line 7c from line 6)						3931746.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6	601,428.	2245939.	384,583.	441,123.	820,752.	4493825.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	11,654.	9,333.	9,400.	7,366.	14,900.	52,653.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	11,654.	9,333.	9,400.	7,366.	14,900.	52,653.
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 VI.)						
13	Total support (Add lines 9, 10c, 11, and 12)	613,082.	2255272.	393,983.	448,489.	835,652.	4546478.
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here						
Sec	ction C. Computation of Publ	ic Support Per	rcentage				
	Public support percentage for 2017 (I		•	olumn (f))		15	86.48 %
	Public support percentage from 2016					16	82.86 %
	ction D. Computation of Inves						1 16
	Investment income percentage for 20			e 13, column (f))		17	1.16 %
	Investment income percentage from 2					18	1.11 %
19a	33 1/3% support tests - 2017. If the	•		·			7 is not ► X
b	more than 33 1/3%, check this box at 33 1/3% support tests - 2016. If the	•	-			•	-
	line 18 is not more than 33 1/3%, che	-					▶□
20	Private foundation. If the organizatio		•				▶□.

Schedule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC.

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes." describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	
1		-
2		
3a	-	
3b		
3c		
4a		
_ 4b		
	_	
<u>4C</u>		,
5a		-
	-	
.		
	-	-
	-	
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_	-	·
-		
Ob		
	3a 3b 3c 4a 4b 4c 5a 6 7 8 9a 0a 0b	3a

Sche	dule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC.	<u>04-3443</u>	<u>57</u>	8 Pa	ige 5
Pa	rt.IV Supporting Organizations (continued)				
				Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			Ì	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)				
	below, the governing body of a supported organization?	1	1a		
b	A family member of a person described in (a) above?	1	1b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	1	1c_		
Sec	tion B. Type I Supporting Organizations				
				Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to				
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the				
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or				1
	controlled the organization's activities. If the organization had more than one supported organization,				
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		_	_ '	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year		1		
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	{			
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			-	l
	supervised, or controlled the supporting organization		2		<u>. </u>
<u>Sec</u>	tion C. Type II Supporting Organizations				
		_		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors				!
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
	or management of the supporting organization was vested in the same persons that controlled or managed	İ			
	the supported organization(s)		1		L
<u>Se</u> c	tion D. All Type III Supporting Organizations				
		_		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the				
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax				
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			-	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	ļ	1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			٠	
	the organization maintained a close and continuous working relationship with the supported organization(s)	<u> </u>	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a				
	significant voice in the organization's investment policies and in directing the use of the organization's				
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
	supported organizations played in this regard		3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee inst	ructions).			
а	The organization satisfied the Activities Test Complete line 2 below				
ь	The organization is the parent of each of its supported organizations. Complete line 3 below.	,			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity	y (see instruc	uons)		
2	Activities Test Answer (a) and (b) below.	_		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		1	1	
	those supported organizations and explain how these activities directly furthered their exempt purposes,				
	how the organization was responsive to those supported organizations, and how the organization determined			Ì	
L_	that these activities constituted substantially all of its activities.	-2	a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the				
	reasons for the organization's position that its supported organization(s) would have engaged in these		.		
_	activities but for the organization's involvement.	2	b		
3	Parent of Supported Organizations Answer (a) and (b) below.				
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		-	-	
	trustees of each of the supported organizations? Provide details in Part VI.	_3	a_		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		.	~ -	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3	b		

04-3443578 Page 6 Schedule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year). a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 035 6 6 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 Enter greater of line 2 or line 3 4 Income tax imposed in prior year 5 Distributable Amount, Subtract line 5 from line 4, unless subject to

🔟 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2017

emergency temporary reduction (see instructions)

instructions)

	t V Type III Non-Functionally Integrated 509			14-3443376 Page /
	ion D - Distributions	(u)(o) oupporting orgi	anizationo (continuos)	Current Year
<u>300.</u> 1	Amounts paid to supported organizations to accomplish exe	mot purposes	· · · · · · · · · · · · · · · · · · ·	- Guittoitt (Gui
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity	рапросост фаррания		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions.			
- <u>-</u> -	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in Part VI) See instructions	3		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
	From 2014			
ď	From 2015			
<u>е</u>	From 2016			,
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2017 distributable amount			
_ <u>i</u> _	Carryover from 2012 not applied (see instructions)			
_1	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2017 from Section D,			
	line 7 \$	· · · · · · · · · · · · · · · · · · ·		<u> </u>
<u>a</u>	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2017, if			
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2017 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			<u> </u>
	Part VI See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c			
8	Breakdown of line 7			
a	Excess from 2013			
	Excess from 2014			
c	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Schedule A	(Farm 990 or 990-EZ) 2017	FOUNDATION,	INC.		04-3443578 Page 8
Part VI	Supplemental Informa Part IV, Section A, lines 1, 2, line 1; Part IV, Section D, lines	ition. Provide the explai 3b, 3c, 4b, 4c, 5a, 6, 9a, s 2 and 3, Part IV. Sectio	nations required b 9b, 9c, 11a, 11b, n E, lines 1c, 2a, 2	by Part II, line 10, Part II, line 17 and 11c, Part IV, Section B, lin 2b, 3a, and 3b, Part V, line 1, P o complete this part for any ad	⁷ a or 17b, Part III, line 12, les 1 and 2, Part IV, Section C, art V, Section B, line 1e; Part V,
				•	
					ν
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SCHEDULE D

(Form, 990)

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

CONSERVATORY LAB CHARTER SCHOOL

Employer identification number 04-3443578

Schedule D (Form 990) 2017

FOUNDATION, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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? 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? Part II | Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 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 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenue included on Form 990, Part VIII, line 1

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

b Assets included in Form 990, Part X

	edule D (Form 990) 2017 FOUND rt III Organizations Maintaining C	ATION, INC		easures or Of	her Simi		43578	
3	Using the organization's acquisition, accessi				-		_	
·	(check all that apply):	ion, and other record	as, check any or the	Tollowing that are i	a sigrimoarit	436 OI 113	CONCOLION	itoms
а			Loan or exc	hange programs				
b	<u> </u>	•		mango programo				
c	Preservation for future generations	`	<i></i>					
4	Provide a description of the organization's c	ollections and explai	n how they further t	he organization's e	xempt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of					500 mm u.	. ,	
•	to be sold to raise funds rather than to be m						Yes	☐ No
Pa	rt IV Escrow and Custodial Arran				on Form 99	0, Part IV,		
	reported an amount on Form 990, Pa		-					
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contribution	ns or other assets r	ot included			
	on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table					
							Amount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or co	ustodial account lia	bility?		Yes	No No
	If "Yes," explain the arrangement in Part XIII							
Pa	rt V Endowment Funds. Complete	f the organization ar	swered "Yes" on Fo	orm 990, Part IV, Iir	e 10		,	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four y	ears back_
1a	Beginning of year balance	5,505,	5,498.	5,491		5,484.		5,477.
b	Contributions							
С	Net investment earnings, gains, and losses	7,	7.	7		7.		7.
d								
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance	5,512,	5,505,	5,498	.l	5,491,		5,484,
2	Provide the estimated percentage of the curi	rent year end baland	- ·	ı)) held as.				
a	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
С	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and 2c sho							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered fo	r the organi	zation	_	
	by							es No
	(i) unrelated organizations						3a(i)	<u> </u>
	(ii) related organizations						3a(ii)	<u> </u>
	If "Yes" on line 3a(ii), are the related organiza						3b	
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment tunas					
	Complete if the organization answered) Port IV Iron 11n S	oo Form 000 Dort	V line 10			
	Description of property						(-1) D==1:	-1
	Description of property	(a) Cost or o	1 , ,	1 , ,	Accumulate lepreciation	- 1	(d) Book v	alue
10	Land	240.0 (11469111	82		-spisolation		Q 2 1	,500.
	Buildings			4,797.	112,9	70	$\frac{621}{2,351}$	
C	Leasehold improvements			2,523.	672,5		<u> </u>	0.
d	Equipment			8,438.	$\frac{672,3}{5,2}$		23	,224.
	Other			7,676.	15,2			450.
	. Add lines 1a through 1e (Column (d) must ea	gual Form 990 Part			10,4		$\frac{1}{4},229$	

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Schedule D (Form 990) 2017

FOUNDA	MOIT	, INC
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Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) 5507.906 SHS CALVERT			
(B) EQUITY FUND	287,623.	End-of-Year Marke	t Value
(C) 2261.115 SHS CALVERT			
(D) SMALL CAP	61,661.	End-of-Year Marke	t Value
(E) 3928.479 SHS CALVERT			
(F) INTERNATIONAL RESPONSIBLE	90,355.	End-of-Year Marke	t Value
(G) 1711.896 SHS CALVERT			
(H) EMERGING MARKETS	27,288.	End-of-Year Marke	t Value
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	741,457.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on 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 e	nd-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"	on Form 990, Part IV, line	11d See Form 990, Part X, line 15	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			<u> </u>
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		>
Part X Other Liabilities.			
Complete if the organization answered "Yes"			25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			· - • •
(5)			_
(6)			,
(7)			
(8)			

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 X

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

(9)

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC. 04-3443578 Page 4 Schedule D (Form 990) 2017 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements 1,800,623. Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 5.817. Net unrealized gains (losses) on investments 2a Donated services and use of facilities 2b Recoveries of prior year grants 2c 2d d Other (Describe in Part XIII.) 5,817. Add lines 2a through 2d 2e 1,794,806. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) 4h Add lines 4a and 4b 4c 794 806. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1,717,795. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25. a Donated services and use of facilities 2<u>a</u> b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 3 1.717 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 Other (Describe in Part XIII) 4b c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part 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 V, line 4:

INCOME EARNED ON THE ENDOWMENT FUNDS IS TO BE USED FOR CONSERVATORY LAB
CHARTER SCHOOL'S VIOLIN PROGRAM

Part X, Line 2:

FIN 48: THE FOUNDATION HAS ADOPTED THE PROVISIONS OF FASB ASC 740, INCOME
TAXES, RELATIVE TO ACCOUNTING FOR UNCERTAINTIES IN TAX POSITIONS. UNDER
THESE PROVISIONS, THE FOUNDATION RECOGNIZES THE TAX BENEFIT OF TAX
POSITIONS TO THE EXTENT THAT THE BENEFIT WILL MORE LIKELY THAN NOT BE
REALIZED. THE DETERMINATION AS TO WHETHER THE TAX BENEFIT WILL MORE
LIKELY THAN NOT BE REALIZED IS BASED UPON THE TECHNICAL MERITS OF THE TAX
POSITION AS WELL AS CONSIDERATION OF THE AVAILABLE FACTS AND

Schedule D (Form 990) 2017		FOUN	<u>DATI</u>	<u>ON, IN</u>	<u>1C•</u>			()4-34 <i>4</i>	<u> 43578</u>	Page 5
Schedule D (Form 990) 2017 Part,XIII Supplementa	l Inform	ation (con	tinued)								
CIRCUMSTANCES.	AS OF	JUNE	30,	2018	, THE	FOUNDATION	DOES	NOT	HAVE	ANY	
UNCERTAIN TAX P	OSTTI	ONS.									
OHODERITATION TIME I	<u> </u>	2101					-			-	
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Schedule D (Form 990) FOUNDATION,
Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. 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
884.37 SHS CALVERT INTERNATIONAL		· ·
OPPORTUNITIES	16,166.	FMV
7312.792 SHS CALVERT GREEN BOND	108,741.	FMV
8189.225 SHS CALVERT SHORT DURATION	130,372.	FMV
1941.561 SHS CALVERT FLOATING RATE ADVANTAGE	19,251.	FMV
	-	·
		-
		
		
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732421 04 01-17		Sahadula D /Form 990

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

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

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

▶ Attach to Form 990.

OMB No 1545-0047	2017	Open to Public	Inspection

nternal Reve	nternal Revenue Service	► Go to www.irs.gov/Form990 for the latest information.	Inspection
Vame of t	Vame of the organization	CONSERVATORY LAB CHARTER SCHOOL	Employer identification number
		FOUNDATION, INC.	04-3443578
Part	General Inform	Part I General Information on Grants and Assistance	
-	ottoriocoro ott a	Done the exemption maintain exemple to a heatenfield the	

% ⊠ ☐ Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed criteria used to award the grants or assistance? Part II

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	So, un Part II can	be duplicated if addit	ional space is need	pel			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CONSERVATORY LAB CHARTER SCHOOL							TO PROVIDE ASSISTANCE TO
2120 DORCHESTER AVE							LEARNING THROUGH MUSIC
DORCHESTER, MA 02124	04-3414994		194,145,	0	ВООК		AND VIOLIN PROGRAMS
CENTER FOR ARTISTRY AND							
SCHOLARSHIP, INC 2120							TO PROVIDE ASSISTANCE TO
DORCHESTER AVE - DORCHESTER, MA							DEVELOP A CENTER TO
02124	47-2193670		244,647.	0	BOOK		IMPROVE THE OUALITY OF
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in th	le line 1 table				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

See Part IV for Column (h) descriptions

Schedule I (Form 990) (2017)

732101 11-01-17

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Schedule I (Form 990) (2017) Part III

Page 2

04-3443578

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance,
					ı
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	uired in Part I, lin	e 2, Part III, column	(b), and any other ac	iditional information	
Part II, line 1, Column (h):					
Name of Organization or Government:	••				
CENTER FOR ARTISTRY AND SCHOLARSHIP,	P, INC.				
(h) Purpose of Grant or Assistance:	::				
TO PROVIDE ASSISTANCE TO DEVELOP A		TO IMPROVE	CENTER TO IMPROVE THE QUALITY OF	IY OF	
EDUCATION LOCALLY AND NATIONALLY					

SCHEDULEK (Form 990)

Supplemental Information on Tax-Exempt Bonds

(i) Pooled financing Yes No **Employer identification number** × OMB No 1545-0047 Open to Public 2017 Inspection 04-3443578 (g) Defeased (h) On behalf No of issuer × Yes No × Yes H USED TO FINANCE (f) Description of purpose THE BONDS WERE 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. Go to www.irs.gov/Form990 for instructions and the latest information. (f) Continuations 3,300,000 (e) Issue price and 07/26/16 (d) Date issued for Columns (a) CONSERVATORY LAB CHARTER SCHOOL (c) CUSIP# None A DEVELOPMENT FINANCE AGEN04-3431814 See Part VI (b) Issuer EIN INC. FOUNDATION, (a) Issuer name MASSACHUSETTS Name of the organization **Bond Issues** Proceeds Department of the Treasury Internal Revenue Service Part II Part I O

		V	В		ပ		D	
-	1 Amount of bonds retired							
8	Amount of bonds legally defeased							
က	Total proceeds of issue	3,300,000.						
4	Gross proceeds in reserve funds							
သ	5 Capitalized interest from proceeds							
ဖ	Proceeds in refunding escrows							
7	Issuance costs from proceeds							
8	Credit enhancement from proceeds				:			
6	Working capital expenditures from proceeds							
우	Capital expenditures from proceeds	3,300,000						
=	Other spent proceeds							
4	Other unspent proceeds							
13	Year of substantial completion							
		Yes No	Yes	No	Yes	No	Yes	N _o
14	14 Were the bonds issued as part of a current refunding issue?	X				:		
5	15 Were the bonds issued as part of an advance refunding issue?	X			•			
9	Has the final allocation of proceeds been made?	×						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	×						

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10-18-17
732121

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

bond-financed property?

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

Part III Private Business Use

which owned property financed by tax-exempt bonds?

Schedule K (Form 990) 2017

ŝ

Yes

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Yes

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Yes

N٥

Yes

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Page 2

04-3443578

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FOUNDATION

Schedule K (Form 990) 2017

۵ Yes % % % % ŝ ပ % % % % ŝ B 8 Yes % % % % ŝ × × × × Yes counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property? b if "Yes" to line 3a, does the organization routinely engage bond counsel or other outside d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside governmental person other than a 501(c)(3) organization since the bonds were issued? Enter the percentage of financed property used in a private business use as a result of b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Has there been a sale or disposition of any of the bond-financed property to a non-Has the organization established written procedures to ensure that all nonqualified entities other than a section 501(c)(3) organization or a state or local government bonds of the issue are remediated in accordance with the requirements under counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by unrelated trade or business activity carried on by your organization, another 3a Are there any management or service contracts that may result in private Does the bond issue meet the private security or payment test? section 501(c)(3) organization, or a state or local government Regulations sections 1 141-12 and 1 145-2? business use of bond-financed property? Part III Private Business Use (Continued) 1.141-12 and 1 145-27 Total of lines 4 and 5 Part IV Arbitrage o S 9

%

%

	י		ם) י			
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	٥N	Yes	No	Yes	No	Yes	
Penalty in Leu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	×]				
b Exception to rebate?	×							
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?		X						
4a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue?		×						
b Name of provider								
								l

e Was the hedge terminated? 732122 10-18-17

d Was the hedge superintegrated?

Term of hedge

Schedule K (Form 990) 2017

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC.

Schedule K (Form 990) 2017

Page 3

04-3443578

ŝ ŝ ۵ Yes Yes ŝ ŝ O O Yes Yes ŝ ŝ 8 Yes Yes Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions THE PURCHASE OF A SCHOOL BUILDING 2 × ŝ × Issuer Name: MASSACHUSETTS DEVELOPMENT FINANCE AGENCY Yes Yes × d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Has the organization established written procedures to monitor the requirements of federal tax requirements are timely identified and corrected through the voluntary Has the organization established written procedures to ensure that violations of closing agreement program if self-remediation isn't available under applicable 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? 6 Were any gross proceeds invested beyond an available temporary period? Bond Issues: BONDS WERE USED TO FINANCE Part V Procedures To Undertake Corrective Action Description of Purpose: Schedule K, Part I, Part IV Arbitrage (Continued) b Name of provider section 148? c Term of GIC regulations? THE a) (**f**)

Schedule K (Form 990) 2017

732123 10-18-17

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information. CONSERVATORY LAB CHARTER SCHOOL

Open To Public Inspection Employer identification number

04-3443578 FOUNDATION, INC. Types of Property (d) (a) (b) (c) Number of Noncash contribution Check if Method of determining contributions or amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g Art · Works of art Art · Historical treasures Art - Fractional interests Books and publications Clothing and household goods 6 Cars and other vehicles Boats and planes 7 Intellectual property 8 30,692.FAIR MARKET VALUE Х Securities - Publicly traded 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 25 Other 26 Other 27 Other 28 Other -Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it

must hold for at least three years from the date of the initial contribution, and which isn't required to be used for 30a exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2017

Х

X

X

Schedule M	(Form 990) 2017	FOUNDATION,	INC.	<u>04-3443578</u>	Page 2
Part, II	Supplemental is reporting in Part this part for any add	Information. Provide to the column (b), the number of ditional information.	he information required by Part I, lind from the informations, the number of item of the information in the	nes 30b, 32b, and 33, and whether the organizans received, or a combination of both. Also com	ation iplete
<u>.</u>					
					
					
			· · ·		
					
					
	•				

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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. ► Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No 1545-0047

Inspection

Internal Revenue Service Name of the organization

CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC.

Employer identification number 04-3443578

Form 990, Part I, Line 1, Description of Organization Mission: EDUCATIONAL MODEL. Form 990, Part VI, Section A, line 7a: THE BOARD OF DIRECTORS OF A RELATED ENTITY (CONSERVATORY LAB CHARTER SCHOOL) ELECTS 50% OF THE BOARD OF THE FOUNDATION. Form 990, Part VI, Section A, line 8b: THERE ARE NO ADDITIONAL COMMITTEES OR SUBCOMMITTEES Form 990, Part VI, Section B, line 11b: THE FINANCIAL STATEMENTS AND TAX RETURN OF THE ORGANIZATION ARE REVIEWED WITH THE BOARD OF DIRECTORS BY THEIR INDEPENDENT CPA. IF THE BOARD REQUESTS THAT A CHANGE BE MADE TO THE FORM 990, THE ITEM IN QUESTION IS DISCUSSED BETWEEN THE BOARD AND THE CPA. IF IT IS DETERMINED APPROPRIATE THAT THE CHANGE BE MADE, THE BOARD VOTES TO ADOPT THE CHANGE AND THE CPA WILL MAKE THE CHANGE TO THE TAX RETURN. Form 990, Part VI, Section C, Line 19: ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC THROUGH WRITTEN REOUEST. Form 990, Part IX, Line 11g, Other Fees: CONSULTING: Program service expenses 0.

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization CONSERVATORY LAB CHARTER SCHOOL FOUNDATION, INC.	Employer identification number 04-3443578
Fundraising expenses	0.
Total expenses	275,491.
Total Other Fees on Form 990, Part IX, line 11g, Col A	275,491.
•	
1	

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships ► Go to www.irs.gov/Form990 for instructions and the latest information. ► Attach to Form 990. CONSERVATORY LAB CHARTER SCHOOL Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

2017

OMB No 1545-0047

Open to Public Inspection

Employer identification number 04-3443578

Part I in Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

INC

FOUNDATION,

Direct controlling entity End-of-year assets e Total income ਉ Legal domicile (state or foreign country) Primary activity <u>@</u> Name, address, and EIN (if applicable) of disregarded entity

Part II dentification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year

(a)	(q)	(0)	(9	(e)	£	(b)	(647)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public chanty	Bul	control	(c) Y(c)
of related organization		foreign country)	section	status (if section	entity	entity?	7
				501(c)(3))		Yes	No
CONSERVATORY LAB CHARTER SCHOOL - 04-3414994 CHARTER PUBLIC	HARTER PUBLIC SCHOOL FOR						
2120 DORCHESTER AVENUE	PRE-KINDERGARTEN THROUGH					_	
DORCHESTER MA 02124	8TH GRADE	Massachusetts	SECTION 115				×
				_			

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

Schedule R (Form 990) 2017

Schedule R (Form 990) 2017 FOUNDATION, INC.

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

Page 2

04-3443578

(j) (k) . General or Percentage managing ownership			!	
Perce				
(j) neral or anaging artner?	Yes No			
Pag Ge	<u>š</u>			
Code V-UBI amount in box m	K-1 (Form 1065			
ionate ns?	o N			
	Yes	-		
<u> </u>				
(g) Share of end-of-year assets				
tal			!	
(f) Share of total income				
Share				
der e	-			
(e) Predominant income (related, unrelated, excluded from tax under	-514)			
(e)	212 812			
edom relatec uded	ection			
P P	<i>σ</i>			
(d) Direct controlling entity				
(d) contro				
rect o				
(c) Legal domicile (state or foreign	Sountry			
,ity				
(b) Primary activity				
(I mary				
<u> </u>				
Zc				
and E				
(a) Name, address, and EIN of related organization				
(i addru ited o				
ame, of rela				
Z S				

Part IV 1 Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related or organizations treated as a corporation or trust during the tax year

		er.	ە. ا					1				1		
	Ξ	Section 512(b)(13) controlled entity?	Yes No			+	_	1		-	_			
	æ	ല വ	>						•					
	(6)	Share of end-of-year												
	(2)	Share of total income												
	(e)	ype of entity corp, S corp	or irrusiy											
	(p)	Direct controlling entity											•	
	<u> </u>	Legal domicile (state or foreign	country)											
וווו וווי ומע לכמו	(q)	Primary activity			•									
מייייייייייייייייייייייייייייייייייייי	(a)	Name, address, and EIN of related organization												

Schedule R (Form 990) 2017

732162 09-11-17

17 FOUNDATION, INC.

Schedule R (Form 990) 2017

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

Page 3

04-3443578

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	Ŷ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		×
b Gift, grant, or capital contribution to related organization(s)				4	×	
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				7	×	
				2 4	×	
f Dividends from related organization(s)				1		×
g Sale of assets to related organization(s)				19		×
				£		×
			•	÷		×
i Lease of facilities, equipment, or other assets to related organization(s)				F	×	
				,		
k Lease of facilities, equipment, or other assets from related organization(s)	•			¥		×
I Performance of services or membership or fundraising solicitations for related organization(s)	ınızatıon(s)		•	=	Ì	×
m Performance of services or membership or fundraising solicitations by related organization(s)	inization(s)			1m		X
n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoi			£		×
o Sharing of paid employees with related organization(s)				9		×
 Beimbursement baid to related organization(s) for expenses 				, <u>c</u>		×
				2 5		×
d neilliou seillein paid by leigied organization(s) for expenses			,	<u>.</u>	.4	إ
						,
	•	•	:	-		4 :
s Other transfer of cash or property from related organization(s)				15		4
2 If the answer to any of the above is "Yes," see the instructions for information on w	who must complete th	iis line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds	İ		
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	olved		
(1) CONSERVATORY LAB CHARTER SCHOOL	þ	636,275.COST	COST			
(2) CONSERVATORY LAB CHARTER SCHOOL	D	55,000.COST	COST	į		
(3) CONSERVATORY LAB CHARTER SCHOOL	মে	3,096,686	686.COST			
(4)						
(5)						
(9)						
732163 09-11-17	45		Schedule R (Form 990) 2017	Rorn	990) 2017

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Page 4

04-3443578

FOUNDATION, INC.

Schedule R (Form 990) 2017

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

that was not a related organization. See instructions regarding exclusion for certain investment partnerships	structions regarding exclu	ision for certain inve	estment partnerships			:				
(a)	(Q)	(2)	(p)		£	(6)	Ξ	ε	9	3
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income partners sec (related, unrelated, 501(c)(3)		Share of total	Share of	Dispropor- tonate	Dispropor Code V-UBI General or Percentage United amount in box 20 managing ownership	General or managing	Percentage
		country)	excluded from tax under vigs / sections 512-514) Yes No		income	assets	Yes No	of Schedule K-1 (Form 1065)	Yes No	
					-					
			*							
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