Return of Organization Exempt From Income Tax

Department of the Treasury

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

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

Open to Public Inspection

A	or the	2018 calendar year, or tax year beginning JUL 1, 2018 and er	ل nding	UN 30, 20	19	
В	Check it applicable	C Name of organization		D Employer ide	ntificatio	n number
	Addres change	CAPITAL PREPARATORY SCHOOLS, INC.				
	Name change	Doing business as		43	-4669	846
	return		loom/suite	E Telephone nur		
	Final return/ termin-	777 MAIN STREET		91	<u>7-838</u>	3-3684
	ated	City or town, state or province, country, and ZIP or foreign postal code	i	G Gross receipts S		3,238,912.
	return	BRIDGEPORI, CI 00008		H(a) Is this a grou		(v)
	tion pendin	F Name and address of principal officer DR. SIEFIEN FERRI	人	for subordin		Yes X No
_	T	TY	527	H(b) Are all subordina		i? Yes No (see instructions)
		empt status X 501(c)(3) 501(c)() (insert no) 4947(a)(1) op e: ► WWW.WEARECAPITALPREP.ORG	321	H(c) Group exem	•	
		organization X Corporation Trust Association Other	I Year			te of legal domicile C'
	art I	Summary	12 100	7. TOTTINGTION	<u></u>	to or logar dominant
	1	Briefly describe the organization's mission or most significant activities TO PRO	OVIDE	ALL STUDI	ENTS	ACCESS
ce		TO A HIGH QUALITY EDUCATION BY FACILITATIN				
Governance	2	Check this box If the organization discontinued its operations or disposed	d of more	than 25% of its ne	t assets	
ove	3	Number of voting members of the governing body (Part VI, line 1a)			3	
		Number of independent voting members of the governing body (Part VI, line 1b)			4	
ctivities &	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			5	11
vit.	6	Total number of volunteers (estimate if necessary)			6	4
Actu		Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
_	b	Net unrelated business taxable income from Form 990 (2) (1988)	-		7b	0.
	l _	la l	·	Prior Year	. 	Current Year
9	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) AUG 08 2020	ļ	1,327,82		1,776,443.
Revenue	9	1-1		978,88	0.	1,462,469.
Вè	10				0.	0.
	11 12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 90 180 and 19 Total revenue - add lines 8 through 11 (must equaf Partially column (A) line 12)	<u> </u>	2,306,70		3,238,912
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		225,00		147,518
	1	Benefits paid to or for members (Part IX, column (A), line 4)	-		0.1	0.
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		972,20	0.	1,642,536.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.
per	ь	Total fundraising expenses (Part IX, column (D), line 25) > 152,990	0.			
й	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		445,04	9.	593,539
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,642,24	9.	2,383,593.
		Revenue less expenses Subtract line 18 from line 12		664,46	0.	855,319.
ets or			Beg	inning of Current Ye		End of Year
Sets	20	Total assets (Part X, line 16)	<u> </u>	2,990,87		4,394,439.
ASS.		Total liabilities (Part X, line 26)	<u> </u>	1,030,08		1,578,335.
_		Net assets or fund balances Subtract line 21 from line 20	L	1,960,78	<u> </u>	2,816,104.
	art II	Signature Block				
Unc		Ities of perjury, I declare that I have examined this return, including accompanying schedules a			f my know	vlodge and belief, it is
P. Unc	, correc	t, and complete Decl han officer) is based on all information of whice	n preparer	7/14/2020		
	_ {	Signature of o		Data .	14/20	
Sig		DR. STEPHEN PERRY, CHIEF EXECUTIVE OFFI	CER	5/1	.4/20	
He	•	Type or print name and title	CLIC			
-		Print/Type preparer's name Predail, r's signature		ate Chec	k	PTIN
Pai	d	GARRETT M. HIGGINS Jaut m Hige-	_ ´	7/14/2020 _{self e}	employed F	200543209
	parer	Firm's name PKF O'CONNOR DAVIES, LLP		Firm's EIN		7-1728945
	Only	Firm's address 665 FIFTH AVENUE				
		NEW YORK, NY 10022		Phone no.	212-2	286-2600
1/12	u tha IE	25 discuss this return with the preparer shown above? (see instructions)				X Vac No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2018) CAPITAL PREPARATORY SCHOOLS, INC. 43-4669846 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
•	TO PROVIDE ALL STUDENTS ACCESS TO A HIGH QUALITY EDUCATION BY
	FACILITATING AND SUPPORTING THE CREATION, OPERATION, AND MANAGEMENT OF
	INNOVATIVE AND EFFECTIVE SCHOOL MODELS.
	INNOVATIVE AND EFFECTIVE SCHOOL MODELS.
_	
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 services? Yes X No
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 1,418,935. including grants of \$ 147,518.) (Revenue \$ 1,462,469.)
	THE ORGANIZATION HAS ENTERED INTO SERVICE AGREEMENTS TO PROVIDE HIGH
	QUALITY CHARTER SCHOOL MANAGEMENT TO TWO CHARTER SCHOOLS.
	
4b	(Code) (Expenses \$
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O)
-tu	
4-	(Expenses \$ including grents of \$) (Revenue \$) Total program service expenses ▶ 1,418,935.
<u>4e</u>	Total program service expenses ► 1,418,935. Form 990 (2018)
	Form 990 (2018)

Form 990 (2018) CAPITAL PREPARATORY SCHOOLS, INC. Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(s)(1) (other than a private foundation)? 1 If Yes, "Complete Schedule C, Part II Set organization region or decided in the organization region of the organization region of the organization region of the organization region of the organization		- Ti Onogamot or Hodamou concadios			
If "Yes," complete Schedule A complete Schedule B, Schedule of Contributors?				Yes	No
2 Is the organization required to complete Schedule of Contribution? 2 In the organization anglage in direct or indirect point of amongs and indirect or indirect point of the organization anglage in lobbing activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part If 3 Section 801(c)(3) organization. Did the organization engage in lobbing activities, or have a section 501(ii) electron in effect during the tax year? If "Yes," complete Schedule C, Part II is the organization as ection 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Neevine Procedure 98.199 If "Yes," complete Schedule C, Part II is the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the dark funds or accounts? If "Yes," complete Schedule D, Part I of the organization receive or hold a conservation easierent, including easierents to preserve open space, the environment. Instinct land areas, or historic astructure? If "Yes," complete Schedule D, Part II of the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV II of the organization ineport an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not lated in Part X, or provide circled counseling, debt management, credit repair, or debt negation services? If "Yes," complete Schedule D, Part IV II II the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasies endowments? If "Yes," complete Schedule D, Part VII II the organization report an amount for other assets in Part X, line 150 II "Yes," complete Schedule D, Part VII II the organization report an amount for envestments or organization part X is not 1910 II the organization report an amount for envestments or	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offace? If yes, "complete Schedule C, Part I Section 501(x)3 organizations. Did the organization engage in lobbying activities, or have a section 501(t)) election in effect during the tax year? If "Yes," complete Schedule C, Part II I Is the organization a section 501(k)(s), 501(c)(s), 601(c)(s), 601(c				X	
public office? // rys.; complete Schedule C, Part I Section 501(k3) organizations. Did the organization engage in lobbying activities, or have a section 501(k) election in effect during the tax year? // "Yes," complete Schedule C, Part II Is the organization a section 501(k)(4) 501(k)(5) or 501(k)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 95.197 // "yes," complete Schedule C, Part II 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the light to provide advised on the distribution or investment of amounts in such funds or accounts? // "rys." promplete Schedule D, Part II 7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the light to provide advised on the destination or investment of amounts in such funds or accounts for which donors have the light to provide advised on the destination or any similar funds. (Part III is 10 did to organization maintain collections of works of art, historical treasures, or other similar assets? // "rys.", complete Schedule D, Part IV is 10 did the organization maintain collections of works of art, historical treasures, or other similar assets? // "rys.", complete Schedule D, Part IV is 10 did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, inc P			_2_	Х	ļ
4 Section SO1(p(3)) organizations. Did the organization engage in lobbying activities, or have a section SO1(p) electron in effect during the tax year? If 'Yes,' complete Schedule C, Part III is the organization a section 501(c)(4), S01(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as delined in Revenue Procedure 98-197 If 'Yes,' complete Schedule C, Part III is the organization markina any donor advested funds or any similar funds or accounts? If 'Yes,' complete Schedule D, Part II is 0. Od the organization receive or hold a conservation assement, including assements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part III is 0. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III is 0. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part IV if the organization director to through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasisendowments? If 'Yes,' complete Schedule D, Part IV if the organization is an applicable or assert to any of the following questions is 'Yes,' then complete Schedule D, Part IV if the organization is an applicable or assert part of the organization and account of the securities in Part X, line 10? If 'Yes,' complete Schedule D, Part IV if the organization report an amount for investments of the securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IV if the organization report an amount for other assets in Part X, line 16? If 'Yes,' complete Schedule D, Part IV if the organization report an amount for other assets in Part X, line 16? If 'Yes,' complete Schedule D, Part IV if the organization report an amount for other habitities in Part X, line 16? If 'Yes,'	3		_		
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9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 12 Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 14 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 15 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VX 16 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 10 Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11 Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I In Did the organization organization asserted or consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X In Did the organization organization asserted organization asser	Ū	•	R	<u>'</u>	х
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12b 13 Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 14 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 15 India Did the organization maintain an office, employees, or agents outside of the United States? 16 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 17 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 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 18 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 12 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 Did the organization report more than \$5,000 of grants or other assistance to this return? 20 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ь	·			
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b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20c 20c 20c 20c 20c 20c 20c	20~	·		-	X
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					
· · · · · · · · · · · · · · · · · · ·			200		
		domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	х	

	rt IV Checklist of Required Schedules (continued)	9846	P	age 4
نت	continued (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		103	110
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	- -		
	Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1 1		
	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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
	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 transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
U	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			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes "			İ
	complete Schedule L, Part II	26		х
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		<u>X</u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director trustee, or key employee? If "Yes, " complete Schedule L, Part IV	28a		X_
	, , , , , , , , , , , , , , , , , , , ,	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			٠,,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	00		x
24	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	 3 ,		
Ű.	Schedule N, Part II	32		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		Х
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		<u>X</u>
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	1 1		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		Х	
Pai	Note. All Form 990 filers are required to complete Schedule Ort V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	
	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	4		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7		1
	(gambling) winnings to prize winners?	1c_		
832004	4 12-31-18	Form	990	(2018)

Fai	Statements Regarding Other IRS Filings and Tax Compliance (continued)									
	1 1		Yes	No						
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 11	- 1		}						
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			X						
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		Δ_						
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30								
-10	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Ì	x						
ь	If "Yes," enter the name of the foreign country	70								
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)									
5a	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									
ь	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?									
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									
	any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	Х						
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).	•								
	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						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	i								
	to file Form 8282?	7c	_	X						
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7e		Х						
_										
f g										
•										
8										
	sponsoring organization have excess business holdings at any time during the year?									
9										
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter		١.							
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII line 12 for public use of club facilities									
11	Section 501(c)(12) organizations. Enter	1	1							
а	Gross income from members or shareholders	1								
ь	Gross income from other sources (Do not net amounts due or paid to other sources against	ļ	ļi							
40.	amounts due or received from them)	1								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1								
	Is the organization licensed to issue qualified health plans in more than one state?	13a								
•	Note. See the instructions for additional information the organization must report on Schedule O	100								
ь	Enter the amount of reserves the organization is required to maintain by the states in which the									
-	organization is licensed to issue qualified health plans	1								
С	Enter the amount of reserves on hand	1								
	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								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		<u>x</u>						
	If "Yes," see instructions and file Form 4720, Schedule N									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
	If "Yes," complete Form 4720, Schedule O	L		<u> </u>						
		Form	990	(2018)						

CAPITAL PREPARATORY SCHOOLS, INC. 43-4669846 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 Section 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 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. 4 b Enter the number of voting members included in line 1a, above, who are independent 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? Х 2 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 Х Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Х 5 Did the organization have members or stockholders? Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this was done 12c Х 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15a Х b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright NY$ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request X Another's website Own website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records PAULA ALTIERI - 917-838-3684 777 MAIN STREET, BRIDGEPORT, CT 06608

832006 12-31-18

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

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

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

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

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

(A)	(B)	(C)						(D)	(E)	(F)			
Name and Title	Average	100	not c	Pos	ition	l than c	n.c	Reportable					
	hours per	sper box			rson ı	s both	an	compensation	compensation	amount of			
	week	offi	cer ar	d a d	recto	r/bus	tee)_	from	from related	other			
	(list any	ector	l					the	organizations	compensation			
	hours for	ğ	۵.		1	ie l		organization	(W 2/1099-MISC)	from the			
	related	stee	ruste			bens		(W·2/1099-MISC)	,	organization			
	organizations	ndividual trustee or director	institutional trustee	ļ	Кеу етрюуее	Highest compensated employee				and related			
	below	Jividu	慧	Officer	E A	thest ploye	Former			organizations			
(1) LISA BUFFINGTON	line)	ĕ	Ë	8	32	포함	Œ						
CHAIRPERSON	1.00	Х	İ	x	ĺ			0.	0.	0.			
(2) ROBERT TYNDALL	1.00	^	-	^	-	\vdash		· · ·	0.				
VICE PRESIDENT/TREASURER	1.00	X		х	Ì			0.	0.	0.			
(3) IRA RUBENSTAL	1.00	^	-	^	 	Н		U •	0.	0.			
SECRETARY	1.00	x		x	1			0.	0.	0.			
(4) BRENNAN BROWN	1.00	^	-	^	┢	-		· · ·	U •	0.			
BOARD MEMBER	1.00	X						0.	0.	0.			
(5) JOAN MASSEY	50.00	<u> </u>	<u> </u>		 	Н	-		<u> </u>				
PRESIDENT	30.00	1		х				164,750.	0.	21,554.			
(6) DR. STEPHEN PERRY	50.00	-			┢╌	\vdash		104,7500		21,334.			
CHIEF EXECUTIVE OFFICER	30.00			Х				164,750.	0.	206.			
(7) JILL CUTLER-HODGMAN	50.00	┢	┢		\vdash	Н		101,7301		2001			
CHIEF OF STAFF	- 30.00	1		x				164,750.	0.	46,998.			
(8) PAULA ALTIERI	50.00				1		_						
CHIEF OPERATING OFFICER				X				153,651.	0.	36,674.			
(9) TAMMY CASSILE, ASSISTANT SUPER-	50.00												
INTENDENT OF STUDENT SUPPORT SVCS.				X	ĺ			142,025.	0.	13,863.			
(10) KASHANI STOKLEY, DIRECTOR OF	50.00												
NETWORK OPERATIONS					l	x		120,547.	0.	16,361.			
									_				
		L											
]				1							
] '			1								
		<u> </u>	_	L	L	Ш							
					1								
	ļ. ——	L		ļ	L.	\square							
	L	نــــــــــــــــــــــــــــــــــــــ	L	نــــا	<u> </u>			L		- 000 (22.12)			

(A)

Name and title

(C)

Position

(D)

Reportable

(B)

Average

		hours per week					s both x/trus		compensation from	compensatio from related	- 1	an	nount other	of
		(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)	organization: (W-2/1099-MIS	s	fr org an	pensa om th anizat d relat	e ion ed
							}							
						_					_			
				_		_	 	-	<u> </u>		\dashv			
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		 	-	-		_	\vdash	-	ļ					
			<u> </u>	_	ļ		ļ _	L	ļ					
		<u> </u>							!	1	İ			
1b	Sub-total			L		·	<u> </u>		910,473.		0.	13	5,6	56.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A							910,473.		0.	13	5,6	<u>0.</u>
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re		000 of reportable			<u> </u>	
	compensation from the organization												Yes	6 No
3	Did the organization list any former officer,	director, or tru	stee	, ke	y en	olqn	yee.	or h	highest compensated er	nployee on	ſ			
	line 1a? If "Yes," complete Schedule J for s					4 . – –		41=			ļ	3		<u>X</u>
4	For any individual listed on line 1a, is the su and related organizations greater than \$150									ne organization		4	Χ.	
5	Did any person listed on line 1a receive or a	ccrue compen	satio	on fr	om	any	unre			lual for services	ſ			77
Sec	rendered to the organization? If "Yes," comtion B. Independent Contractors	plete Schedule	Jf	or su	ich i	oers	on					5		<u> </u>
1	Complete this table for your five highest co	· ·	-							•	ensat	ion fro	om	
	the organization Report compensation for (A)	the calendar ye	ear e	ndır	<u>ig</u> w	ith c	or wi	thin T	the organization's tax y (B)	ear		((2)	
												nsatio	n	
							—.	\dashv						

Form 990 (2018)

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
		Onedk ii Goriedale O cont	ama a response	or note to any m	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	b c d e f	All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f MANAGEMENT FEES	ve 1f 1,	Business Code			revenue	512 - 514
Progr	e f	All other program service reve	20116	<u> </u>				<u> </u>
		Total. Add lines 2a-2f		<u> </u>	1,462,469.			
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties		>				
	þ	Gross rents Less rental expenses Rental income or (loss)	(ı) Real	(ii) Personal				
:	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis	(ı) Securities	(ii) Other				
	d	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraisin	g events (not	<u> </u>			<u> </u>	
Other Revenue		including \$ contributions reported on line Part IV, line 18 Less direct expenses	of					
ō		Net income or (loss) from fund Gross income from gaming ac Part IV, line 19		>				
	С	Less direct expenses Net income or (loss) from gan	b ning activities					
	b	Gross sales of inventory, less and allowances Less cost of goods sold Net income or (loss) from sale	a b	<u> </u>				
		Miscellaneous Revenu		Business Code	}			
	11 a			<u> </u>	 	 		
	b			<u> </u>		 		
		All other revenue		L				
	е	Total. Add lines 11a-11d		>				
- (12	Total revenue. See instructions		•	$[3,238,9\overline{12}]$	1,462,469.	0.	0.

832009 12-31-18

Form 990 (2018) CAPITAL PREPA
Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	147 510	147 510		
	and domestic governments. See Part IV, line 21	147,518.	147,518.		
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,	936,905.	448,918.	406,561.	81,426
6	trustees, and key employees Compensation not included above, to disqualified	730,703.	440,910.	400, 301.	01,420
O	persons (as defined under section 4958(f)(1)) and		1		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	510,349.	244,534.	217,151.	48,664
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)	9,763.	4,678.	4,792.	293
9	Other employee benefits	71,722.	34,366.	35,205.	293 2,151 3,414
10	Payroll taxes	113,797.	54,526.	55,857.	3,414
11	Fees for services (non-employees)	.,			
	Management				
b	Legal	2,377.		2,377.	
С	Accounting	20,431.		20,431.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)	89,357.	61,541.	13,663.	14,153
12	Advertising and promotion	82,079.	73,871.	8,208.	
13	Office expenses	16,965.	8,127.	8,327.	511
14	Information technology	18,118.	8,681.	8,893.	544
15	Royalties				
16	Occupancy				
17	Travel	27,096.	12,983.	13,300.	813
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				_
21	Payments to affiliates	1 740	020	050	
22	Depreciation, depletion, and amortization	1,749. 18,268.	838. 8,753.	859. 8,967.	52 548
23	Insurance L	10,200.	0,/53.	0,90/	548
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PROFESSIONAL DEVELOPMEN	238,077.	237,887.	190.	
ь	SPONSORSHIP AND OTHER S	64,992.	64,992.		
C	FURNISHINGS	13,786.	6,605.	6,767.	414
d	REPAIRS AND MAINTENANCE	244.	117.	120.	7
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	2,383,593.	1,418,935.	811,668.	152,990
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined		\		
	educational campaign and fundraising solicitation		ļ		
	Check here I if following SOP 98-2 (ASC 958-720)				

Par	t X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
_				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		2,292,745.	1_	3,085,422
- 1	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	200,000
1	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and fo	rmer officers, directors,			
- 1		trustees, key employees, and highest compensa	ted employees Complete		, ,	
		Part II of Schedule L			5	
ļ	6	Loans and other receivables from other disqualif	ied persons (as defined under	,		
		section 4958(f)(1)), persons described in section				
ļ		employers and sponsoring organizations of sect	on 501(c)(9) voluntary			
2		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
₹	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		10,253.	9	3,333
	10a	Land, buildings, and equipment cost or other]] [
		basis Complete Part VI of Schedule D	10a 5,248. 10b 3,207.			
١	b	Less accumulated depreciation	10b 3,207.	3,790.	10c	2,041
- }	11	Investments - publicly traded securities		11		
-	12	Investments - other securities See Part IV, line 1		12		
	13	Investments - program-related See Part IV, line	520,665.	13	846,113	
	14	Intangible assets	162 400	14	055 530	
	15	Other assets See Part IV, line 11		163,420.	15	257,530
-	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	2,990,873.	16	4,394,439
	17	Accounts payable and accrued expenses		30,088.	17	78,335
	18	Grants payable	1 000 000	18	1 500 000	
	19	Deferred revenue	1,000,000.	19	1,500,000	
	20	Tax-exempt bond liabilities			20	
ı	21	Escrow or custodial account liability Complete F			21	
es	22	Loans and other payables to current and former				
		key employees, highest compensated employee	s, and disqualified persons			
Liabilities		Complete Part II of Schedule L			22	
-	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated	'		24	
	25	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on lines	17-24) Complete Part X of		0.5	:
	26	Schedule D Total liabilities. Add lines 17 through 25		1,030,088.	25 26	1,578,335
\dashv	20	Organizations that follow SFAS 117 (ASC 958	check here	1,030,000:	_20	1,370,333
_		complete lines 27 through 29, and lines 33 an				
Net Assets or Fund Balances	27	Unrestricted net assets		1,460,785.	27	2,816,104
	28	Temporarily restricted net assets		500,000.	28	0
<u> </u>	29	Permanently restricted net assets			29	-
		Organizations that do not follow SFAS 117 (A				
<u>-</u>		and complete lines 30 through 34.			,	
2	30	Capital stock or trust principal, or current funds			30	
2	31	Paid-in or capital surplus, or land, building, or eq	uipment fund		31	
3	32	Retained earnings, endowment, accumulated inc	•		32	
Se	33	Total net assets or fund balances		1,960,785.	33	2,816,104
	34	Total liabilities and net assets/fund balances		2,990,873.	34	4,394,439
					لـــــــ	Form 990 (20

	990 (2018) CAPITAL PREPARATORY SCHOOLS, INC.	43-4	1669846	Page 12
Pa	rt XI Reconciliation of Net Assets	•——		
	Check if Schedule O contains a response or note to any line in this Part XI			
		. }		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,912.
2	Total expenses (must equal Part IX, column (A) line 25)	2		5,593.
3	Revenue less expenses Subtract line 2 from line 1	3		319.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,960	785.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	2,816	104.
Pai	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			X
				Yes No
1	Accounting method used to prepare the Form 990 Cash Accrual Other		_	ļ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	1	
	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?		2b	X
	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		1 1	ĺ
	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,	Į (
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O		·
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audıt		
	Act and OMB Circular A-133?		3a	X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
_			Form	990 (2018)

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

2018

Open to Public Inspection

Name of	the organization							identification number			
5-41	CAPI	TAL PREPAR	ATORY SCHOOL:	S, INC	<u> </u>		4	3-4669846			
Part I	Reason for Public (onarity Status (All organizations must co	omplete th	is part) Se	e instructions					
The organ	ization is not a private found			•							
1 🖳	A church, convention of ch	urches, or association	on of churches described	lın sectio	n 170(b)(1)(A)(i).		KA			
2	A school described in sect	ion 170(b)(1)(A)(ıı). (Attach Schedule E (Forn	n 990 or 99	90·EZ))			() \			
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ıı).					
4 🔲	A medical research organiz	ation operated in coi	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(III). Enter	the hospital's name,			
	city, and state										
5 🔲	An organization operated for	or the benefit of a co	llege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in			
	section 170(b)(1)(A)(ıv). (C	Complete Part II)									
6 🔲	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 X	An organization that norma						e general (oublic described in			
	section 170(b)(1)(A)(vi). (C	•		ŭ							
8	A community trust describe		(1)(A)(vi), (Complete Par	t II)							
9	An agricultural research org				ed in conii	inction with a	land-grant	college			
	or university or a non land-g										
	university	,	,		, , , , ,		3				
10	An organization that norma	Ilv receives (1) more	than 33 1/3% of its supp	port from o	contributio	ns membersh	no fees, an	d gross receipts from			
	activities related to its exen							-			
	income and unrelated busin							-			
	See section 509(a)(2). (Con		(1000 000 tion of the axy inc	nii basiiles	soos acqui	rea by the org	anization t	inter durie oo, 1010			
11	An organization organized a	•	vely to test for public sa	fety See	section 50)9(a)(<u>4</u>)					
12	An organization organized a	•	•	•		, ,	roy out the	nurnoses of one or			
·	more publicly supported or		-	-			•	• •			
	lines 12a through 12d that	·						oneck the box in			
а 🗀	Type I. A supporting orga	•					-	awina			
ه	the supported organization		•	•	-			•			
	organization. You must d			majority C	i lile Gilec	iois or trustee	25 OI WIE 50	ipporting			
, _	n Ť					d araanizatio	a(a) by bay				
ь	J Type II. A supporting org				• •	•		· ·			
	control or management o			anie perso	ns mai co	ntroi or manaç	te me subt	Jortea			
	organization(s) You mus	•				and franchisani	l	ملدالم			
·	Type III functionally inte	-					iy integrate	a with,			
	its supported organization		•		-						
d [_	Type III non-functionally						_				
	that is not functionally int	· * .	= -	•		-	an attentiv	reness			
_	requirement (see instructi		•	-							
e	Check this box if the orga					Type I, Type I	I, Type III				
	functionally integrated, or	•	nally integrated supporti	ng organiz	ation						
	er the number of supported of	ŭ									
	vide the following information i) Name of supported	about the supporte	d organization(s) (iii) Type of organization	1 (iv) Is the oro:	nization listed	(v) Amount of	manataru	(vi) Amount of other			
'	organization	(1) [1]	(described on lines 1 10	in your govern		support (see in	•	support (see instructions)			
			above (see instructions))	Yes	No						
]		Ì					
				l I		}					
				<u> </u>							
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]							
				 							
Total				1		L ¯					

Schedule A (Form 990 or 990-EZ) 2018 CAPITAL PREPARATORY SCHOOLS, INC. 43-4669 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	576,500.	450,000.	1965486.	1327820.	1776443.	6096249.
2	Tax revenues levied for the organ-						
	ization'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	576,500.	450,000.	1965486.	1327820.	1776443.	6096249.
5	The portion of total contributions			,			
	by each person (other than a						,
	governmental unit or publicly						
	supported organization) included		ı				1
	on line 1 that exceeds 2% of the						
	amount shown on line 11,			:			1
	column (f)						4768450.
	Public support. Subtract line 5 from line 4						1327799.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	576,500.	450,000.	1965486.	1327820.	1776443.	6096249.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						u.
	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)			<u> </u>			
11	Total support. Add lines 7 through 10						6096249.
12	Gross receipts from related activities,	etc (see instruction	ens)			12 3	,219,309.
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	
	organization, check this box and stor			 _			 ▶□
	ction C. Computation of Publi						
14	Public support percentage for 2018 (I	ine 6, column (f) di	vided by line 11, co	olumn (f))		14	21.78 %
15	Public support percentage from 2017	Schedule A, Part	I, line 14			[15]	15.94 %
16a	33 1/3% support test - 2018. If the c	-		line 13 and line 1	14 is 33 1/3% or m	ore, check this box	k and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2017. If the o	=			line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual		•				▶∟
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac			-		rt VI how the organ	
	meets the "facts-and-circumstances"			*	•		$\triangleright X$
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets th				•		
	organization meets the "facts-and-circ		= -	=	•		▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	i, 16b, 17a, or 17b			
					Sche	dule A (Form 990	or 990-EZ) 2018

(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

qualify under the tests liste	d below, please comp	olete Part II)	 			
Section A. Public Support			γ - · · · - · · · ·		, 	/
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do no	ot		i	[[
include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that					I	/
are not an unrelated trade or bus-		1				
iness under section 513					1	/
4 Tax revenues levied for the organ-		Ţ				
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit	to	ļ	1	[/	
the organization without charge	-				/	
6 Total, Add lines 1 through 5					/	
7a Amounts included on lines 1, 2, at	nd				 / 	
3 received from disqualified perso		1	ļ	[
b Amounts included on times 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		<u> </u>			<u></u>	
c Add lines 7a and 7b		<u> </u>	<u> </u>			
8 Public support. (Subtract line 7c from line 6	1		L		<u> </u>	
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income					-	
(less section 511 taxes) from business	ses	/				
acquired after June 30, 1975]			
c Add lines 10a and 10b					[
11 Net income from unrelated busine activities not included in line 10b, whether or not the business is regularly carried on	ess					
12 Other income Do not include gair or loss from the sale of capital assets (Explain in Part VI)						
13 Total support. (Add lines 9, 10c, 11 and 15	2)					
14 First five years. If the Form 990 is	7	s first, second, thir	d, fourth, or fifth ta	ıx year as a sectio	n 501(c)(3) organiza	tion,
check this box and stop here						▶□
Section C. Computation of Pu	ıblic Support Per	rcentage				
15 Public support percentage for 201			column (f))		15	%
16 Public support percentage from 2		•	.,,		16	%
Section D. Computation of Inv					4,	
17 Investment income/percentage for			ne 13, column (fl)		17	%
18 Investment income percentage from	•				18	
19a 33 1/3% support tests - 2018. If			on line 14, and line	15 is more than 1		
more than 33 1/3%, check this bo						.∵
/	-	-	• •	•		-
b 33 1/3% support tests - 2017. If						. —
line 18 is not more than 33 1/3%,		•	· · · · · · · · · · · · · · · · · · ·		-	
20 Privaté foundation. If the organiz	ation did not check a	DOX OF line 14, 19	a, or 190, check th			000 571 0040
832023 10-1/-18				Sch	edule A (Form 990	or 990-EZ) 2018

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

All Commond								
 Sections A, D, a	and E If you	checked 12d	of Part I, c	omplete Se	ctions A ani	d <u>D</u> , and <u>c</u>	complete	Part V
u., u. , u. , u.		,	p.0.0		,		O a , .	50p.

	tion A. All Supporting Organizations			
			Yes	No
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	1		
2	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)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
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	•- •	a. 97.44.47	
	organization made the determination	3b		
С	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	Зс		
4a	Was any supported organization not organized in the United States ("foreign supported organization")?			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
ь	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	4b		
С	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	4c		<u> </u>
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	-		
L	was accomplished (such as by amendment to the organizing document)	<u>5</u> a		
ь	Type I or Type II only. Was any added or substituted supported organization part of a class already	5b		
_	designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	30		
U	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.	6	_	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
•	(as 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)	7		
8	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)	8		
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.	9a_		
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.	9b		
С	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.	9c_		L
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	10a		
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.)	10b		i

Part IV Supporting Organizations (continued) Ves No			466984	<u>б</u> р	age <u>5</u>
11 Is the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either allow or together with persons described in (b) and (c) below, the governing body of a supported organization? 5 A family impetited or a person advantaged organization? 5 A family impetited or a person advantaged organization in the property of the organization of the property of the organization of the control of the property of the organization of the control of the property of the organization of the control organization or	Par	rt IV Supporting Organizations _(continued)		·	
a 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? b A lamily member of a person described in (d) above? c A 36% controlled unity of a person described in (d) above? c A 36% controlled unity of a person described in (d) or (b) above? 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 organizations directions or frustees at all times during the tax year? If Yn, O escribe a Prart VI how the supported organizations directions or frustees at all times during the tax year and the powers to appoint and/or remove decross or intestices were elected and among the supported organization, describe how the powers to appoint and/or remove decross or intestices were elected and more than one supported organization, describe how the powers to appoint and/or remove decross or intestices were elected among the supported organization, describe how the powers to appoint and/or remove decross or intestices were elected among the supported organization or the transfer and supported organizations and what conditions or restrictions, if any, appeted to such powers during the tax year and the supported organization or the transfer and the supported organizations? If "Yes," explain in Part VI now more providing such benefit camed out the purposes of the supported organizations? If "Yes," explain in Part VI now control or installed the supported organizations or flue supported organizations? 1 Were a majority of the organizations directors or trustees during the tax year also a majority of the directors or trustees of each of the organizations directors or trustees during the tax year and the controlled organizations? 1 Were a majority of the organization is directors or trustees during the tax year and the controlled organizations? 1 Were a majority of the organization is directors or trustees of each of the orga			<u></u>	Yes	No
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b A family member of a person described in (g) above? A 38% controlled unity of a person described in (g) or (t) above? A 1995 controlled unity of a person described in (g) or (t) above? I to the directors, trustess, or membership of one or more supported organizations have the power to regularly appoint or elect at feast a majority of the organization of trustess at all times during the tax year? If No, "obscribe in Part VI how the supported organization or trustess at all times during the tax year? If No, "obscribe in Part VI how the supported organization or trustess at all times during the tax year? If No, "obscribe in Part VI how the supported organization or trustess at all times during the tax year? If No, "obscribe in Part VI how the supported organization or trustess and the supported organization, describe how the powers to appoint antifor remove, directors or trustess are all bacted among the supported organization, described his supported organization one the time the supported organization one the time supported organization one the time supported organization one the time supported organization one the time supported organization one the time supported organization one the supported organization one the time supported organization one the supported organization one the supported organization one the supported organization one the supported organization one the supported organization one the supported organization one the supported organization one the supported organizations? I Were a majority of the organizations directors or trustess during the tax year also a majority of the directors or trustess of each of the organizations directors or trustess during the tax year also a majority of the directors or trustess of each of the organizations or supported organizations(e)? If No." describe an internet organization organization provide to each of its supported organization (e)? I Were a majority of the organization organizations was vested in the same persons that controlled or managed in m	а				1
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a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations (s) to which the organization was responsive? If "Yes," then in Part VI identify 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 that these activities constituted substantially all of its activities 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 3 Parent of Supported Organizations Answer (a) and (b) below. a 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. 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. 3b	С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	nstructions,		т—
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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 that these activities constituted substantially all of its activities 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 involvement 2b 3 Parent of Supported Organizations Answer (a) and (b) below. a 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. 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. 3b	a				
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a 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. 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. 3b		·	2b	-	
trustees of each of the supported organizations? Provide details in Part VI. 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. 3b	3				
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. 3b	а			ŀ	i
of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			3a	-	├—
	b				-

	dule A (Form 990 or 990 EZ) 2018 CAPITAL PREPARATORY SCH			43-4669846 Page 6
Pa	Type in the transferring integrated eco(a)(o) capperti			-
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov 20, 1970 (explain in i	Part VI) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ctions A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3_		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			1
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		<u> </u>
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current 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)			,
а	Average monthly value of securities	1a		
ь	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)		•	
2		2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount		,	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	•	
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly integrate	ed Type III supporting ora	anization (see
	instructions)		,, ,, 5 5	•

Schedule A (Form 990 or 990-EZ) 2018

Sche	dule A (Form 990 or 990-EZ) 2018 CAPITAL PREPA TV Type III Non-Functionally Integrated 509			3-4669846 Page
<u> </u>		<u>ayay supporting orga</u>	nizations (continued)	Current V
	on D - Distributions	mpt purposes		Current Year
1	Amounts paid to supported organizations to accomplish exer Amounts paid to perform activity that directly furthers exemp			
2	organizations, in excess of income from activity	n purposes or supported		
	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		
_ <u>3</u> _4	Amounts paid to acquire exempt-use assets	es or supported organizations		
 -	Qualified set-aside amounts (prior IRS approval required)			
 _	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
Ü	(provide details in Part VI) See instructions	to organization is responsive		
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	on E - Distribution Allocations (see instructions)	(ı) Excess Distributions	(II) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
!_	Carryover from 2013 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from Section D,			
	line 7 \$		•	
a	Applied to underdistributions of prior years	,	···.	·
b	Applied to 2018 distributable amount		•	
<u> </u>	Remainder Subtract lines 4a and 4b from 4			ļ
5	Remaining underdistributions for years prior to 2018, if			1
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			 _
7	Excess distributions carryover to 2019. Add lines 3 _j			1
	and 4c			ļ <u></u>
8_	Breakdown of line 7			ļ
a	Excess from 2014			ļ
b	Excess from 2015	<u> </u>		
	Excess from 2016			
<u>d</u>	Excess from 2017			
	F (0040	1	1	

Schedule A (Form 990 or 990-EZ) 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST: CAPITAL PREPARATORY SCHOOLS, INC. PUBLIC SUPPORT PERCENTAGE FOR 2018 IS 21.78%, UP FROM 15.94% FOR 2017. CAPITAL PREPARATORY SCHOOLS, INC. ATTRACTS NEW AND ADDITIONAL PUBLIC SUPPORT ON A CONTINUOUS BASIS AND WE HAVE INDEED RECEIVED BROAD SUPPORT FROM AN ARRAY OF SOURCES. EVERY YEAR, THE ORGANIZATION IS INCREASING THE NUMBER OF CONTRIBUTIONS IT RECEIVES FROM NEW CONTRIBUTORS. OUR MISSION IS TO RAISE FUNDS AND PROVIDE ALL STUDENTS ACCESS TO A HIGH QUALITY EDUCATION BY FACILITATING AND SUPPORTING THE CREATION, OPERATION AND MANAGEMENT OF INNOVATIVE AND EFFECTIVE SCHOOL MODELS. CAPITAL PREPARATORY SCHOOLS, INC. WORKS WITH AND HAS ENTERED INTO MANAGEMENT AGREEMENTS WITH TWO HIGH QUALITY CHARTER SCHOOLS. AS MORE STUDENTS ENROLL IN THE CAPITAL PREPARATORY SCHOOLS, INC. NETWORK OF SCHOOLS, THE SCHOOL IS EXPECTING TO BROADEN ITS CONTRIBUTIONS AND ATTRACT NEW DONORS. THERE IS AN ADDITIONAL CAPITAL PREPARATORY SCHOOL OPEN IN 2020 THAT WILL DRIVE UP RECOGNITION AND PUBLICITY, AND WILL ALSO ATTRACT NEW POTENTIAL DONORS AND CONTRIBUTORS.

THE ORGANIZATION HAS BEEN IN EXISTENCE SINCE 2012 AND BEGAN WITH A LIMITED RANGE OF CONTRIBUTORS. THROUGHOUT THE YEARS, THE SCHOOLS HAVE ATTRACTED MORE ATTENTION AND INCREASED ATTENDANCE, WHICH HAS LED TO AN INCREASE IN CONTRIBUTIONS FROM NEW CONTRIBUTORS. CAPITAL PREPARATORY SCHOOLS, INC. IS ALSO BROADENING ITS BOARD OF DIRECTORS AND IS EXPECTING THE BROADENED SCOPE OF THE BOARD TO BRING IN NEW CONTRIBUTORS. DUE TO THE FACT THAT CAPITAL PREPARATORY SCHOOLS, INC. HAS NOT BEEN IN EXISTENCE FOR A LONG PERIOD OF TIME, THE SCHOOL'S RECOGNITION IS SLOWLY INCREASING AND WILL EVENTUALLY BE AT A POINT WHERE THE SUPPORTER AND ALUMNI BASE WILL BE LARGE ENOUGH TO HAVE A BROAD CONTRIBUTOR BASE. THE CURRENT AND POTENTIAL

43-4669846 Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

SUPPORTERS OF THE ORGANIZATION GIVE BECAUSE THEY CARE AND RECOGNIZE THE

IMPORTANCE OF THE ORGANIZATIONS AND THE SCHOOLS MISSION AND THEY RESPECT

THE QUALITY OF EDUCATION THE CAPITAL PREPARATORY SCHOOLS, INC. NETWORK

PROVIDES.

BECAUSE OUR MISSION IS TO INCREASE THE QUALITY OF EDUCATION OF

HISTORICALLY DISADVANTAGED KIDS AND THE NEED FOR HIGH QUALITY CHARTER

SCHOOLS IS INCREASING, IT IS NECESSARY TO SOLICIT SIZEABLE GRANTS WHERE

POSSIBLE, IN ADDITION TO THE SMALLER GIFTS WE RECEIVE FROM THE LOCAL

COMMUNITY. IN 2016, WE ALSO RECEIVED A LARGE DONATION FROM A DONOR OF

\$1,300,000 FOR THE FURTHERANCE OF OUR MISSION. THIS GIFT WAS HIGHLY

UNUSUAL IN TERMS OF THE AMOUNT AS ALL PRIOR YEARS, THE DONOR HAS DONATED

SIGNIFICANTLY LESS. WITHOUT THE UNUSUALLY HIGH DONATION IN 2016, THE

ORGANIZATION WOULD BE PASSING THE PUBLIC SUPPORT TEST.

CAPITAL PREPARATORY SCHOOLS, INC.'S BOARD OF DIRECTORS IS COMPRISED OF

INDIVIDUALS FROM THE LOCAL COMMUNITY WITH WIDELY VARYING BACKGROUNDS WHO

ARE KEENLY INTERESTED IN EDUCATION, IN SUPPORTING THE MISSION OF THE

ORGANIZATION, AND WHO CARE ABOUT ITS SUCCESS IN MEETING THE GOALS OF ITS

MISSION. THE SECTORS REPRESENTED BY THE BOARD INCLUDE BUSINESS,

EDUCATION, PHILANTHROPY AND ARTS. MANY OF THE MEMBERS OF THE BOARD ALSO

SERVE ON THE BOARDS OF HIGHLY REGARDED NON-PROFIT INSTITUTIONS.

CAPITAL PREPARATORY SCHOOLS, INC. IS GAINING IN VISIBILITY AND RECOGNITION

WITH NEW PUBLIC CONTRIBUTORS IN 2018. IN 2019, WE RECEIVED A LARGE

CONTRIBUTION AND SUPPORT FROM A WELL-KNOWN CELEBRITY, AND IN 2020 WE

LAUNCHED A NEW SCHOOL IN NEW YORK CITY. WE ARE LOOKING FORWARD TO REACHING
832028 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

SCHEDULE D

(Forth 990)

Department of the Treasury Internal Revenue Service

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.

2018
Open to Public
Inspection

Name of the organization Employer identification number CAPITAL PREPARATORY SCHOOLS, 43-4669846 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 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? Yes 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 Held at the End of the Tax Year day of the tax year a Total number of conservation easements <u>2a</u> Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2<u>c</u> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 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 Yes No 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 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) Yes 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 Part III 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 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

832051 10-29-18

		PREPARATO						43-46		Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, or	Other	Simila	r Assets	(continu	(ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	ollowing that	are a sig	gnificant ι	use of its c	ollection if	tems
	(check all that apply)									
а	Public exhibition	ď	· 🖳	Loan or exc	hange progra	ıms				
ь	Scholarly research	e	, [Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	ie organizatio	n's exen	npt purpo	se in Part	XIII	
5	During the year, did the organization solicit o	r receive donations of	of art, his	storical treas	sures, or othe	r sımılar	assets		_	_
	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered "	Yes" on	Form 990), Part IV, I	ine 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi	an or other intermed	lary for o	contributions	s or other ass	ets not i	ncluded	_	٦	
	on Form 990, Part X?							<u> </u>	Yes	U No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able				т		
							<u> </u>		Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e		·	
f	Ending balance	000 0-474	04.6				1f	1	1,,	<u> </u>
	Did the organization include an amount on Fe						ty7	<u> </u>	」 Yes	⊢ No
Par	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete									
	2 1 2 1 down on a 1 do 1 do 1 do 1 do 1 do 1 do 1 do 1	(a) Current year						veare back	(a) Four	roare back
4.	Regioning of year helance	(a) Current year	(0) F	Prior year	(c) Two year	SUACK	(a) mee	years back	(e) roui	ears back
	Beginning of year balance Contributions		ļ		 					
b	Net investment earnings, gains, and losses									
٦	Grants or scholarships				 					
d	Other expenditures for facilities		-							
е	· ·		ı			i				
f	and programs Administrative expenses		-							
	End of year balance		·		<u> </u>	-				
9 2	Provide the estimated percentage of the curr	rent year end balance	e (line 1c	column (a)) held as					
a	Board designated or quasi-endowment	ent year end balance	%	y, colamin (a)	y ricio as					
b	Permanent endowment	%								
	Temporarily restricted endowment	<u></u> %								
_	The percentages on lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse		ation tha	t are held ar	nd administer	ed for the	e organiz	ation		
	by	·							[·	res No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(II)	
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requir	ed on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the		wment f	unds						
Par	t VI Land, Buildings, and Equipm	ent.					-			
	Complete if the organization answere	d "Yes" on Form 990), Part IV	/, line 11a S	ee Form 990,	Part X,	line 10			
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) A	ccumulat	ed	(d) Book	value
		basis (investr	nent)	basis	(other)	der	preciation	1		
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment				5,248.		3,2	07.	2	,041.
е	Other]					
Total	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colun	nn (B), line 1	Oc.)				2	,041.

Schedule D (Form 990) 2018

1. (a) Description of liability (b) Book value

(1) Federal income taxes
(2)
(3)
(4)
(5)
(6)
(7)
(8)
(9)

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

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.

Schedule D (Form 990) 2018

2 Employer identification number 43-4669846 2018 Open to Public Inspection -OMB No 1545-0047 X 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 1 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 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Go to www.irs.gov/Form990 for the latest information. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. INC. CAPITAL PREPARATORY SCHOOLS, General Information on Grants and Assistance critena used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) 2 Desc Part

	it l				1-	0	10000
	(h) Purpose of grant or assistance	GENERAL OPERATING ASSISTANCE				•	
	(g) Description of noncash assistance					i	
	(f) Method of valuation (book, FMV, appraisal, other)					;	
þ	(e) Amount of non-cash assistance	0.				;	
onal space is need	(d) Amount of cash grant	147,518.			line 1 table		
be duplicated if additic	(c) IRC section (if applicable)	501(C)(3)			anizations listed in the	table	000 200
5,000 Part II can I	(b) EIN	47-3525777			nd government org	listed in the line 1	you the lacture
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government	CAPITAL PREP HARBOR SCHOOL 777 MAIN STREET BRIDGEPORT, CT 06604			2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3 Enter total number of other organizations listed in the line 1 table	1 HA For Danemork Reduction Act Notice see the Instructions for

43-4669846

Schedule | (Form 990) (2018) CAPITAL PREPARATORY SCHOOLS, INC.

| Part III | 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

(a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-recipients cash grant cash assistance			Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	LINE 2:	ORGANIZATION MADE A GRANT TO CAPITAL PREPARATORY HARBOR C	GRANT IS USED TO SUPPORT GENERAL OPERATING COSTS. CAPITAL	INC. (CPS) IS HIRED AS THE SCHOOL'S CMO AND THROUGH THE CPS	FUNDING AND EXPENDITURES ARE REVIEWED ON A MONTHLY BASIS,	FUNDING, AND MONTHLY FINANCIAL REPORTS ARE DEVELOPED, RI	REPORTED OUT TO THE LEADERSHIP TEAM AND THE BOARD OF TRUSTEES.	
(e) Method of valuation (book, FMV, appraisal, other)			idditional information		CHARTER SCHOOL.	PREPARATORY	IE CPS COO,	INCLUDING	REVIEWED AND		
(f) Description of noncash assistance											

Schedule I (Form 990) (2018)

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

CAPITAL PREPARATORY SCHOOLS, INC.

Employer identification number 43-4669846

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	}	ļ	
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	1.		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		,	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,]	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	<u> </u>	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
_	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to	1		1
	establish compensation of the CEO/Executive Director, but explain in Part III	1		
	Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			l
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	1	-	
7	organization or a related organization	l .	٠,	
а	Receive a severance payment or change-of-control payment?	4a	`	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		-	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		
-	contingent on the revenues of	1		
а	The organization?	5a	-	х
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	Ì)	
	contingent on the net earnings of	ŀ		l
а	The organization?	_6a		_X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	١.		_
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			-~~
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	Se	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	STEP	(a)-(i)(a)	reported as deferred on prior Form 990
(1) JOAN MASSEY	Ξ	164,750.	0.	0	6,590	14,964.	186,304.	0
PRESIDENT	(ii)	0	0	0	0	0	0	0
(2) DR. STEPHEN PERRY	Ξ	164,750.	0	0	0	206.	164,956.	0
CHIEF EXECUTIVE OFFICER	(E)	0	0	0	0	0	0	0
(3) JILL CUTLER-HODGMAN	Ξ	164,750.	0	0	6,590.	40,408.	211,748.	0
CHIEF OF STAFF	Ξ	• 0	0	0	0	0		0
(4) PAULA ALTIERI	Ξ	153,651.	0	0	0	36,674.	190,325.	0
CHIEF OPERATING OFFICER	: ᠍	0	0	0	0	0	Į.	0
(5) TAMMY CASSILE, ASSISTANT SUPER-	Ξ	142,025.	0	0	725.	13,138.	155,888.	0
INTENDENT OF STUDENT SUPPORT SVCS.	((1)	0	0	0	•0	0	0.	0
	(i)							
	Ξ							
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	(11)							
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832113 10-26-18

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

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

Name of the organization CAPITAL PREPARATORY SCHOOLS, INC.	Employer identification number 43-4669846
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	ION:
CREATION, OPERATION, AND MANAGEMENT OF INNOVATIVE AND EFFE	CTIVE SCHOOL
MODELS.	
FORM 990, PART VI, SECTION B, LINE 11B:	
FORM 990 IS REVIEWED BY MANAGEMENT AND THE BOARD OF DIRECT	ORS FOR APPROVAL.
IF CHANGES ARE REQUIRED, THE ORGANIZATION WILL THEN FORWAR	D TO THE
ACCOUNTING FIRM AND A FINAL VERSION WILL BE DISTRIBUTED TO	ALL BOARD
MEMBERS PRIOR TO THE IRS SUBMISSION.	······································
FORM 990, PART VI, SECTION B, LINE 12C:	
THE ORGANIZATION SHARES ITS CONFLICT OF INTEREST POLICY WI	TH BOARD MEMBERS,
OFFICERS AND KEY EMPLOYEES (IF ANY) ON AN ANNUAL BASIS. TH	E GENERAL
MUNICIPAL LAW DEFINES PROHIBITED CONFLICTS OF INTEREST FOR	ORGANIZATION
TRUSTEES, OFFICERS AND EMPLOYEES. UNDER THE GENERAL MUNICI	PAL LAW, NO
ORGANIZATION OFFICER OR EMPLOYEE MAY HAVE AN INTEREST, DIR	ECT OR INDIRECT,
IN ANY CONTRACT WITH THE ORGANIZATION, WHEN SUCH OFFICER,	TRUSTEE, OR
EMPLOYEE, INDIVIDUALLY OR AS A MEMBER OF THE BOARD, HAS TH	E POWER OR DUTY
TO (A) NEGOTIATE, PREPARE, AUTHORIZE OR APPROVE THE CONTRA	CT, OR AUTHORIZE
OR APPROVE PAYMENT UNDER THE CONTRACT; (B) AUDIT BILLS OR	CLAIMS UNDER THE
CONTRACT; OR (C) APPOINT AN OFFICER OR EMPLOYEE WHO HAS AN	Y OF THE POWERS
OR DUTIES SET FORTH ABOVE.	
ANY TRUSTEE, OFFICER OR EMPLOYEE WHO HAS, WILL HAVE, OR LA	TER ACQUIRES AN
INTEREST IN ANY ACTUAL OR PROPOSED CONTRACT WITH THE BOARD	MUST PUBLICLY
DISCLOSE THE NATURE AND EXTENT OF SUCH INTEREST IN WRITING LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Sched	TO THE DIRECTORS

832211 10-10-18

Name of the organization

CAPITAL PREPARATORY SCHOOLS, INC.

Employer identification number 43-4669846

AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED T RANSACTION OR ARRANGEMENT.

AN INTERESTED PERSON MAY MAKE A PRESENTAT ION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED T RANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS T RANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. ANY CONFLICT OF INTERESTS ARE

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

DOCUMENTED IN THE MINUTES OF THE GOVERNING BOARD.

THE ORGANIZATIONS BOARD OF DIRECTORS RETAINED A CONSULTANT TO PRESENT TO
THE BOARD OF DIRECTORS WITH COMPARABLE SALARIES OF SIMILAR ORGANIZATIONS

FOR A RANGE OF POSITIONS IN THE CHARTER MANAGEMENT ORGANIZATION, TO

832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization CAPITAL PREPARATORY SCHOOLS, INC.	Employer identification number 43-4669846	
DETERMINE AND APPROVE THE COMPENSATION OF THE ORGANIZATIONS' OFFICERS AND		
KEY EMPLOYEES (IF ANY). CSBM (CHARTER SCHOOL BUSINESS MANAGEMENT) PERFORMED		
A SALARY COMPARISON STUDY OF SCHOOL DISTRICTS AND CHARTER	ORGANIZATIONS TO	
DETERMINE COMPARABLE COMPENSATION LEVELS, INCLUDING ORGANIZATIONS SUCH AS		
ACHIEVEMENT FIRST, BRIDGEPORT PUBLIC SCHOOLS, NYC DOE AND STRATFOD PUBLIC		
SCHOOLS. THIS PROCESS LAST OCCURRED IN 2019 AND WAS DOCUMENTED IN THE		
MINUTES OF THE GOVERNING BOARD.		
FORM 990, PART VI, SECTION C, LINE 19:		
THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS		
REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE.	THE RETURN IS	
POSTED ON GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. IN ADDITION,		
THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ART	ICLES OF	
INCORPORATION AND BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN	REQUEST AT 777	
MAIN STREET, BRIDGEPORT CT 06608 OR BY CALLING THE ORGANIZATION DIRECTLY AT		
(917) 838-3684.		
FORM 990, PART XII, LINE 2C:		
THE ORGANIZATION HAS A FINANCE COMMITTEE THAT IS RESPONSIB	LE FOR	
OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT AU	DITOR.	