Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public.

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

2017
Open to Public Inspection

<u>A</u>	For th	e 2017 calendar year, or tax year beginning U//UL/L/, and ending U6/3U/	T.R.		
В	Check if a	pplicable: C Name of organization YOUTHBUILD DC PUBLIC CHARTER		D Employer	Identification number
Ш	Address o				
X	Name cha	nge Doing business as YOUTHBUILD PUBLIC CHARTER SCHOOL			818541
\equiv		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone	number 319-0141
	Initial retu Final retu			202	JIJ-OI4I
	terminated	i			2 000 000
П	Amended	return F Name and address of principal officer.		G Gross reco	eipts \$ 3,209,892
司	Annliantia		H(a) Is this a gro	up return for s	ubordinates? Yes X No
Ш	Аррисаци	- Doras Linear		•	日。
		3220 16TH STREET NW	H(b) Are all sub		ded:
		WASHINGTON DC 20010	If "No,"	attach a list.	(see instructions)
1	Tax-exen	npt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	_		
J	Website	▶ WWW.YOUTHBUILDPCS.ORG	H(c) Group exen	nption number	· >
<u>K</u>	Form of	organization: X Corporation Trust Association Other ▶ L	Year of formation: 2	004	M State of legal domicile: DC
P	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities:			
0	1.	SEE SCHEDULE O			
Š	'				
Governance	'				
9	9	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25%	of its not assets	· • • • • • • • • • • • • • • • • • • •	
	1	Number of voting members of the governing body (Part VI, line 1a)			9
مخ «۵	3	Number of independent veting members of the governing body (Part VI, line 1a)		4	9
Activities	4	Number of independent voting members of the governing body (Part VI, line 1b)			23
₹.		Total number of individuals employed in calendar year 2017 (Part V, line 2a)			
Ą	1	Total number of volunteers (estimate if necessary)			9
		Total unrelated business revenue from Part VIII, column (C), line 12		1 1	064
	b	Net unrelated business taxable income from Form 990-T, line 34		. 7b	964
		Contributions and marks (Dark VIII) line 4b)	Prior Yea	1,844	Current Year 744,409
e	8	Contributions and grants (Part VIII, line 1h)			2,464,232
Revenue	9	Program service revenue (Part VIII, line 2g)	2,285	~~~ `	
Ş.	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,128	-245
_	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2 051		2 202 206
		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,051	1,891	3,208,396
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)			0
		Benefits paid to or for members (Part IX, column (A), line 4)			0
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,331	1,468	1,430,675
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0
Expenses	b	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ► 6,561			100 miles 2
û	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,447	7,321	1,481,878
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,778	3,789	2,912,553
	1	Revenue less expenses. Subtract line 18 from line 12		3,102	295,843
5			Beginning of Curr	rent Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)	685	5,308	775,737
A	21	Total liabilities (Part X, line 26)	63	3,696	54,755
2	22	Net assets or fund balances. Subtract line 21 from line 20	621	L,612	720,982
F	art II	Signature Block			
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and statements	and to the best of	my knowled	lge and belief, it is
		ect, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has		•	
				5	114 19
Sig	าก	Signature of officer		Date	
He		SURAJ PATEL TREAS	TREE		
110	16	Type or print name and title	OICLIC		
		Print/Type preparer's name Preparer's signature	Date	I	X if PTIN
Pai	id	K 0 1 C04	1	Check	
	parer			19 self-emp	
	•	Fim's name KENDALL, PREBOLA AND JONES, LLC	Fi	m's EIN	46-2108854
US	e Only	PO BOX 259	l		014 600 1000
		Firm's address BEDFORD, PA 15522-0259	P	hone no.	814-623-1880
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Ves." complete Schedule D. Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<u> </u>		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		300000000000000000000000000000000000000	903(90)(90)
-	complete Schedule D. Dort VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total appets younded in Dart V. line 402 If IIVan II appendix Cabadula D. Dart VIII	11b		х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11.2		
	of its total accepts reported in Part V. line 162 /f "Vee " complete Schodule D. Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	120		
~	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	174		
~	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	-10		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		 -
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	- <u>'</u> '		
		18		x
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		
		19		x
	If "Yes," complete Schedule G, Part III	13		·

Part IV Checklist of Required Schedules (continued)

20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	Г <u></u> -	Yes	No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		X
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b	 	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			10
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		X
	Part IX column (A) line 22 If "Ves." complete Schodule I. Parts I and III			₹.
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		X
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes" complete Schedule I	22		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
	\$100,000 as of the 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		- 22
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
	to defeace any tax-exempt hands?	24c		
d	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	240		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes " complete Schedule I 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	200		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	. 10 - 44 (10 - 6 - 6 10 - 6	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, 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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? Note. All Form 990 filers are required to complete Schedule O.	38	X	

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part	t V	<u></u>			
		1	1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	. <u>1a</u>	112			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	. <u> 1b</u>	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
2a			1	<u>1c</u>		
Za			23			
b	Statements, filed for the calendar year ending with or within the year covered by this return	2a	1 23		x	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returner. Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	, , , , ,	******	2b	A	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•			x	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule of			3a 3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a				-	
Tu	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	•				
	account?			40		x
b	If "Voc." onter the name of the foreign pounts.			4a		4
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					
	(FBAR).	Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?				X
c	If "Voc" to line 52 or 5h did the examination file Form 9996 T2			-		
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 tay deductible as sharitable contributions?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribution					 -
	giffs were not tay deductible?			6b		1
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for contribution	noods				1
	and continue provided to the never?	-		7a	tycoda a solito	x
b	If "Voc." did the erganization notify the depar of the volue of the goods or conjugation provided?			71.		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa					
	required to file Form 8282?			7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ontract?		7e		X
f		10				X
g	If the organization received a contribution of qualified intellectual property, did the organization file For					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	ed by the				
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.			100		
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:					l
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	ı	ı			ļ.
а	Gross income from members or shareholders	. 11a				l
b	Gross income from other sources (Do not net amounts due or paid to other sources					ľ
	against amounts due or received from them.)		<u> </u>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	,	1	12a	SASTER/ALES	21/00/03/2019
b	, , , , , , , , , , , , , , , , , , , ,	. 12b	<u> </u>			l.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а				13a		37555.53
	Note. See the instructions for additional information the organization must report on Schedule O.					
b		1	I			
_	the organization is licensed to issue qualified health plans	1				
C 140	Enter the amount of reserves on hand	13c	1			₹
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule					X
D	in res, has it lieu a norm rzo to report these payments? If "Ivo," provide an explanation in Schedule	: 🗸		14b		1

Form 990 (2017) YOUTHBUILD DC PUBLIC CHARTER 20-1818541 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 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. Enter the number of voting members included in line 1a, above, who are independent 9 h 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? X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X 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 X 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? X 13 Did the organization have a written document retention and destruction policy? 14 X Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a 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 ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records:

3220 16TH STREET NW

DC 20010

CLAIRE LIBERT

202-319-0141

Form 990 (2017	YOUTHBUILD	DC	PUBLIC	CHARTER	20-1818541	Page 7
Part VII	Compensation of	Offic	ers, Directo	ors, Trustees	, Key Employees, Highest Compensat	ed Employees, and
	Independent Con	tracto	ors			
	Check if Schedule	O cor	ntains a resi	ponse or note	to any line in this Part VII	
Section A.	Officers, Directors, T	rustees	, Key Employ	ees, and Highe	st Compensated Employees	
1a Complete thi organization's ta		quired	to be listed. Re	eport compensation	on for the calendar year ending with or within the	
 List all of 	he organization's curre	nt office	ers, directors, t	rustees (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)
- 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.

compensated employees; and former such persons. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.												
(A) Name and Title	Title Average hours per week (list any hours for related organizations below dotted line) (B) Average hours per week (list any hours for related organizations below dotted line) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer (D) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer employee		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations							
(1) STEVE LANNING										<u></u>		
	2.00									_		
BOARD CHAIR	0.00	X		X				0	0	0		
(2) SURAJ PATEL	2.00											
TREASURER	0.00	x		x				0	0	o		
(3) ELIZABETH GRANT	0.00				ļ	\vdash		<u> </u>		<u> </u>		
(0,	2.00											
SECRETARY	0.00	x		x				l o	0	0		
(4) MARY BLATCH		1										
	2.00											
DIRECTOR	0.00	X						0	0	0		
(5) NOEL BRAVO												
***************************************	2.00											
DIRECTOR	0.00	X						0	0	0		
(6) MARK JORDAN												
D. T. D. T. C. T.	2.00							_				
OIRECTOR SANCHEZ	0.00	X				\vdash		0	0	0		
(/) HECTOR SANCHEZ	2.00											
DIRECTOR	0.00	x						o	0	0		
(8) NOLAN SMITH					-							
.,	2.00											
DIRECTOR	0.00	X						0	0	0		
(9) YOLANDA TORRES												
• • • • • • • • • • • • • • • • • • • •	2.00											
DIRECTOR	0.00	X						0	0	0		
(10) KIA HIGGINS - OUT GOING								v				
	40.00			77				00 011		4 600		
COO (11)	0.00	-		X	-	\vdash		80,311	0	4,689		
(11)												

Form 990 (2017)

DAA

rait vii Section A. Onicers	, Directors, Trus	1	5, 14	y C	nihic	yee	s, ar	id rignest Compensated	Employees (continued)	*
(A) Name and title	(B) Average hours per week (list any	Position (do not check more than one box, unless person is both a officer and a director/trustee						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
· · · · · · · · · · · · · · · · · · ·										
1b Sub-total							>	80,311		4,689
c Total from continuation sheet							•			4,009
d Total (add lines 1b and 1c) 2 Total number of individuals (incl	luding but not lim						L (ev	80,311	00.000 of	4,689
reportable compensation from t	the organization	>	0					who received more than \$10	70,000 01	
3 Did the organization list any for	mer officer, direc	tor, o	or tru	ıstee	, key	em,	ploye	ee, or highest compensated		Yes No
employee on line 1a? If "Yes," of For any individual listed on line organization and related organization	1a, is the sum of zations greater th	rep	ortab 3150,	le co	mpe	nsat Yes,"	ion a	plete Schedule J for such	n the	3 X
individual Did any person listed on line 1a for services rendered to the org	a receive or accru ganization? If "Yes	e co	mpe	nsati	on fr	om a	any (unrelated organization or ind	ividual	5 X
Section B. Independent Contractor 1 Complete this table for your five		sate	d inc	lener	nder	t con	tract	ors that received more than	\$100,000 of	
compensation from the organiza	ation. Report com	pens	sation	1 for	the	caler	dar	year ending with or within th	ne organization's tax year.	
TEN SQUARE, LLC	(A) business address				210	CC	ATATI	Description ECTICUT AVENUE N	(B) on of services	(C) Compensation
WASHINGTON	DC	2	000		0				w SULTING	552,502
									NAME OF THE OWNER OWNER OF THE OWNER OWNE	
Total number of independent correceived more than \$100,000 or	ontractors (including for compensation for formatter)	ng bi	ut no the c	t limi organ	ited izatio	to the	ose I	isted above) who	1	

Pa	rt V	III Staten Check	nent of Reve if Schedule (nue) contains a	response o	or note to any line	in this Part VIII		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इंद	1a	Federated car	npaigns	1a			7 10 11	16-17 M-18	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership d		1b				196 F. S.	
A, G	С	Fundraising ev	vents	1c					Garage St. St.
Sifts	d	Related organ	izations	1d					
s, imi	е	Government grants		1e	732,473				
ion	f	All other contribution	ns, gifts, grants,						
the		and similar amounts	not included above	1f	11,936				a de la companya de
a tr	g	Noncash contribution	ns included in lines 1a-	lf: \$					
	h	Total. Add line	es 1a-1f			744,409			
Service Revenue					Busn. Code				
3V GF	2a	PER PUP	IL FUNDING		900099	2,464,232	2,464,232		
<u>8</u>	b		****						
Vice Vice	С								
Se	d								
Program	е								
og.	f	All other progra	am service reven	ue					
<u>a</u>	g	Total. Add line	es 2a–2f			2,464,232			
	3		ome (including d						
		and other simi	lar amounts)			1,251			1,251
	4	Income from in	vestment of tax-	exempt bond p	oroceeds 🕨				
	5	Royalties		 	>				
			(i) Real	(ii	i) Personal				Seattle St.
	6a	Gross rents							
	b	Less: rental exps.							
	C	Rental inc. or (loss)							
	_d	Net rental inco	me or (loss)						
	ra	Gross amount from sales of assets	(i) Securities		(ii) Other				
		other than inventory							STATE OF THE STATE
	b	Less: cost or other				10 day 4			
		basis & sales exps.			1,496				
	C	Gain or (loss)			-1,496				
•	d	Net gain or (lo	ss)		>	-1,496	-1,496		
<u>o</u>	8a	Gross income from	om fundraising even	ts					
enne		(not including \$							
Reve		of contributions n	eported on line 1c).						
7.		See Part IV, line				- 10			
Other	b		penses						
٦	C	Net income or	(loss) from fundr	aising events					
	9a		om gaming activities						
		See Part IV, line	19	. a					
		Less: direct ex		. b					
			(loss) from gamin	ng act <u>ivities</u>					
	10a	Gross sales of	• •						
- 1			owances						
			oods sold	•					
	C		(loss) from sales	of inventory .					
		- Mis	cellaneous Revenue		Busn. Code				
	11a								
	b				ļ	<u> </u>			
	С				ļ				
	d		ue						2000-00-00-00-00-00-00-00-00-00-00-00-00
			es 11a-11d						
	12	Total revenue	 See instruction 	S		3,208,396	2,462,736	0	1,251

Part IX Statement of Functional Expenses

Form 990 (2017)

	Check if Schedule O contains a response				X
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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		i i		
5	Compensation of current officers, directors,				
	trustees, and key employees	83,459	58,422	20,864	4,17
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,104,348	1,062,649	41,699	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	14,594	13,911	657	2
9	Other employee benefits	121,056	115,396	5,453	20
10	Payroll taxes	107,218	101,297	5,564	35'
11	Fees for services (non-employees):				
а	Management				
	Legal	385		385	
C	Accounting	78,309	4,130	74,179	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	528,924	478,824	50,100	
12	Advertising and promotion	3,667	3,667		***************************************
13	Office expenses	58,633	54,621	3,820	192
14	Information technology	22,798	21,539	1,183	7
15	Royalties				
16	Occupancy	437,924	413,743	22,724	1,45
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				,
22	Depreciation, depletion, and amortization	11,921	11,263	618	4(
23	January -	10,252	9,718	534	-31
24	Other expenses. Itemize expenses not covered	=0/EUE	3,710	333	
	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	STUDENT STIPENDS	206,451	206,451		
b	PUPIL TRAVEL & MATERIALS	59,875	······································		
			59,875	1 400	
C	AUTHORIZER FEE	28,770	27,272	1,498	
d	STAFF DEVELOPMENT	10,819	10,819	10 510	
	All other expenses	23,150	9,407	13,710	3:
5	Total functional expenses, Add lines 1 through 24e	2,912,553	2,663,004	242,988	6,56
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs	•			
	from a combined educational campaign and		İ	·	
	fundraising solicitation. Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2017) YOUTHBUILD DC PUBLIC CHARTER 20-1818541 Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest bearing 1 Savings and temporary cash investments 369,241 512,027 2 2 127,677 350,468 Pledges and grants receivable, net 3 1,759 505 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use Я Prepaid expenses and deferred charges 17,280 18,465 9 10a Land, buildings, and equipment: cost or 203,325 other basis. Complete Part VI of Schedule D 10a 13,534 189,791 18,565 b Less: accumulated depreciation 10b 10c Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 Intangible assets 14 14 8,000 23,524 Other assets. See Part IV, line 11 15 15 685,308 775,737 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 58,358 48,445 17 Accounts payable and accrued expenses 17 18 Grants payable 18 5,338 1,760 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 4,550 63,696 54,755 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶

> 720,982 775,737

> > Form 990 (2017)

718,841

2,141

608,471

13,141

621,612

685,308

27

28

29

30

31

32

33

34

Net Assets or Fund Balances

27

30

31

32

33

complete lines 27 through 29, and lines 33 and 34.

Permanently restricted net assets

complete lines 30 through 34.

Unrestricted net assets

Temporarily restricted net assets

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Organizations that do not follow SFAS 117 (ASC 958), check here

Form 990 (2017)

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 **2017**

Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

Name of the organization

YOUTHBUILD DC PUBLIC CHARTER SCHOOL, INC

Employer Identification number 20-1818541

P	art	Reas	on for Public Charity	Status (All organizations	must c	omplete	this part.) See instruction	ns.					
The	orga			it is: (For lines 1 through 12, che				10.					
1	П			ociation of churches described in			(Δ)(i)						
2	X			A)(ii). (Attach Schedule E (Form			(· 1/(1)·						
3	П			e organization described in sect			n						
4	H							** #					
~	لــا			in conjunction with a hospital de	еѕспреа іг	section	170(b)(1)(A)(iii). Enter the hos	pital's name,					
_	П	city, and stat											
5	Ш			a college or university owned or	r operated	by a gov	remmental unit described in						
_			(b)(1)(A)(iv). (Complete Part	,									
6	Н			overnmental unit described in se									
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8													
9	ł l												
		or university university:	or a non-land grant college of	f agriculture (see instructions). Er	nter the na	ame, city,	and state of the college or						
10	П	An organizati	on that normally receives: (1)	more than 33 1/3% of its suppo	ort from co	ontribution	s. membership fees, and gross						
		receipts from	activities related to its exemp	ot functions-subject to certain ex	xceptions,	and (2) r	no more than 33 1/3% of its						
		support from	gross investment income and	d unrelated business taxable inco	ome (less	section 5	11 tax) from businesses						
	_	acquired by t	he organization after June 30	, 1975. See section 509(a)(2). ((Complete	Part III.)							
11	Ш	An organizati	on organized and operated ex	xclusively to test for public safety	. See se	ction 509	(a)(4).						
12	Ш	An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the	functions	of, or to carry out the purposes						
		of one or mo	re publicly supported organiza	ations described in section 509(a)(1) or s	ection 50	9(a)(2). See section 509(a)(3).						
		Check the bo	x in lines 12a through 12d tha	at describes the type of supporting	ng organiz	ation and	complete lines 12e, 12f, and 12	?g.					
	а	Type I. A	supporting organization oper	rated, supervised, or controlled b	y its supp	orted org	anization(s), typically by giving						
		the suppo	orted organization(s) the power	er to regularly appoint or elect a	majority o	f the direc	ctors or trustees of the						
				mplete Part IV, Sections A and									
	b	Type II.	A supporting organization sup	ervised or controlled in connection	on with its	supporte	ed organization(s), by having						
		control or	management of the supporti	ng organization vested in the sar	me perso	ns that co	ntrol or manage the supported						
			ion(s). You must complete										
	С	Type III its suppo	functionally integrated. A sorted organization(s) (see inst	upporting organization operated i ructions). You must complete P	in connect Part IV, Se	tion with, ections A	and functionally integrated with, , D, and E.						
	d	Type III	non-functionally integrated	. A supporting organization opera	ated in co	nnection	with its supported organization(s	·)					
		that is no	t functionally integrated. The	organization generally must satis	sfy a distri	ibution red	quirement and an attentiveness	,					
		requireme	ent (see instructions). You m	ust complete Part IV, Sections	A and D	, and Pa	rt V.						
	е	Check thi	is box if the organization recei	ived a written determination from	the IRS t	hat it is a	Type I, Type II, Type III						
		functional	ly integrated, or Type III non	-functionally integrated supporting	g organiza	ation.							
	f		nber of supported organizatio										
	g	Provide the fo	ollowing information about the	supported organization(s).									
(i) Nam	e of supported	(ii) EiN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of					
	org	panization		(described on lines 1-10		ur governing	support (see	other support (see					
				above (see instructions))		ment?	instructions)	instructions)					
					Yes	No							
(A)							·						
					ļ								
(B)] .								
								-					
(C)													
(D)					1	<u> </u>							
,-,			·										
(E)					 	 							
\ - /						1							
					5550000000000	200000000000000000000000000000000000000							
					1	1							

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					······································	
Caler	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	MINISTER AND ADDRESS OF THE PARTY OF THE PAR					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	4-1-1					
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
c	shown on line 11, column (f)	land the second	State of the state				
6 Sec	Public support. Subtract line 5 from line 4. tion B. Total Support	1		Date of the second			
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(a) 2015	(4) 2040	(1) 00/2 I	
7	Amounts from line 4	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or						
11	loss from the sale of capital assets (Explain in Part VI.)						
12		(see instructions)					
13	Gross receipts from related activities, etc. (First five years. If the Form 990 is for the	organization's first	cocond third fourth				
. •							. □
Sec	organization, check this box and stop here tion C. Computation of Public Su	pport Percent	age		***********		······
14	Public support percentage for 2017 (line 6,	column (f) divided t	v line 11 column	Đ)		14	%
15	Public support percentage from 2016 Sched	dule A. Part II line	14	·//		15	
16a	33 1/3% support test—2017. If the organiz	zation did not check	the box on line 13	and line 14 is 33	1/3% or more, chec	k this	
	box and stop here. The organization qualifi	ies as a publicly su	pported organizatio	n			▶□
b	33 1/3% support test—2016. If the organiz				s 33 1/3% or more	check	········ - L
	this box and stop here. The organization q	ualifies as a publich	v supported organiz	ation			▶ □
17a	10%-facts-and-circumstances test—201				or 16b. and line 14	is	· L
	10% or more, and if the organization meets						
	Part VI how the organization meets the "fac	cts-and-circumstance	es" test. The organ	ization qualifies as	a publicly supporte	d	
	organization						▶ □
b	10%-facts-and-circumstances test-201	6. If the organization	n did not check a b	ox on line 13, 16a,	16b, or 17a, and lir	ne	
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization med					у	
	supported organization			**************			▶ □
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		
	instructions			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		▶ 🔲
			··	···			

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	n the organization to	4		reterry produce o	ompioto i art ii	• ;	
	tion A. Public Support		1		•		
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Cas	line 6.)						
	tion B. Total Support	(1) 0040	1 "1.0044	/ 1 0045	10.0010		
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,				*******		
	and 12.)	<u> </u>	<u> </u>			·	
14	First five years. If the Form 990 is for the		second, third, fourth	h, or fifth tax year a	is a section 501(c)	(3)	. [7
C	organization, check this box and stop here		<u> </u>		************	******	<u></u>
	tion C. Computation of Public Su						
15	Public support percentage for 2017 (line 8,	column (t) divided	by line 13, column ((t))		15	%
16 Soc	Public support percentage from 2016 Sched					16	%%
	tion D. Computation of Investme			-1 (0)		1 45 1	
17 10	Investment income percentage for 2017 (lir		l line 17			امدا	<u>%</u>
18 100	Investment income percentage from 2016 5			4 and line 45 is us			%
19a	33 1/3% support tests—2017. If the organ			•	•		ьП
b	17 is not more than 33 1/3%, check this box 33 1/3% support tests—2016. If the organ	-	-				
-	line 18 is not more than 33 1/3%, check this			' - '		·	▶ □
20	Private foundation. If the organization did		-	•			▶ □

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2 3a		
3b 3c		
4a		
4b		
4c		
5a 5b		
5c		
6		
_ 7		
9a 9b		
9c		i.
10a		
10a		

Pa	rt IV Supporting Organizations (continued)			1 age 5
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а				
	below, the governing body of a supported organization?	11a		
b		11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u> </u>
Sect	ion B. Type I Supporting Organizations	1		1
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		enderfold of these
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		code y construction
Sect	ion C. Type II Supporting Organizations			<u> </u>
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		\$1000 Chell (000 Chell)
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	is).		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	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	550765		
	that these activities constituted substantially all of its activities.	2a	a Martin Maria North	ententano esperante
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.	2b		ris(deserver)
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part VI.	3a	Sagastrakan	25000000000000000000000000000000000000
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	- 1	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizatio	one	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust o			
instructions. All other Type III non-functionally integrated supporting organizations			
	T		(B) Current Year
Section A - Adjusted Net Income		(A) Prior Year	(optional)
1 Net short-term capital gain	1 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			
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		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c	****	
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	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	***************************************	
Section 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-functionally integra	ated Type III sur	porting organization (see	

Par	V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organizat	ions (continued)	raye /
Secti	on D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of	f supported		
	organizations, in excess of income from activity	·		
3	Administrative expenses paid to accomplish exempt purposes of support	ed organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
0	Distributions to attentive supported organizations to which the organizatio (provide details in Part VI). See instructions.	on is responsive		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	**************************************		
	Ento o amount divided by sine o amount	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2017:			
a b	From 2013			
	From 2014			
	From 2015			
	From 2016			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			100
	Excess from 2015			
	Excess from 2016			

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.)
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Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

YOUTHBUILD DC PUBLIC CHARTER

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2017

Employer identification number

SCHOOL, INC 20-1818541 Organization type (check one): Filers of: Section: X 501(c)(Form 990 or 990-EZ 3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule K For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III, For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

DAA

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

YOUTHBUILD DC PUBLIC CHARTER

Employer identification number 20-1818541

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	US DEPARTMENT OF LABOR 200 CONSTITUTION AVENUE, NW WASHINGTON DC 20210	\$ 89,682	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2	YOUTHBUILD USA 58 DAY STREET SOMERVILLE MA 02144	\$ 69,901	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)				
3	OFFICE OF STATE SUPERINTENDENT OF EDUCATION 810 1ST STREET, NE, 9TH FLOOR WASHINGTON DC 20002	\$ 572,890	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	· · · · · · · · · · · · · · · · · · ·	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				

SCHEDULE D (Form 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.

OMB No. 1545-0047

2017

Open to Public

Inspection

Name of the organization Employer identification number YOUTHBUILD DC PUBLIC CHARTER SCHOOL, INC 20-1818541 Part I 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) 2 Aggregate value of grants from (during year) Aggregate value at end of year _____ Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990. Part X

2.000.000.000	rt III Organizations Maintaining C				asures o		Simil		ets (conti	nued	Page Z
3	Using the organization's acquisition, accession, a collection items (check all that apply):								CLS (COTTO	1000)	
а	Public exhibition	d 🗌	Loan or exc	change progr	ams						
b	Scholarly research	е 🗌	Other								
C	Preservation for future generations										
4	Provide a description of the organization's collect	tions and explain	how they fur	ther the orga	nization's e	xempt purp	oose in F	Part			
	XIII.										
5	During the year, did the organization solicit or re-			•					 1	,	
300	assets to be sold to raise funds rather than to be		art of the org	anization's co	ollection?			*****	<u></u>	Yes	No
Pa	rt IV Escrow and Custodial Arrar Complete if the organization a 990, Part X, line 21.	•	on Form	990, Part	IV, line 9), or repo	orted a	n amou	ınt on For	m	
1a	Is the organization an agent, trustee, custodian of	or other intermedia	ary for contrib	butions or oth	ner assets r	ot					
	included on Form 990, Part X?								🔲	Yes	No
b	If "Yes," explain the arrangement in Part XIII and	complete the folk	owing table:								
									Amo	ınt	
С	Beginning balance			· · · · · · · · · · · · · · · · · · ·				1c			
	Additions during the year							1d	RILLUM TO THE RESERVE		
е	Distributions during the year										
f	Ending balance							1f			
	Did the organization include an amount on Form									Yes	No
	If "Yes," explain the arrangement in Part XIII. Che	eck here if the exp	olanation has	been provid	ed on Part	XIII					
Pa	rt V Endowment Funds.			000 0	D / C 4	•					
	Complete if the organization a		1								
4-	Pasienius of constant	(a) Current year	(b) Pric	or year	(c) Two ye	ars back	(d) In	ree years ba	ack (e) h	our year	's back
	Beginning of year balance		-		***************************************						
	Contributions	***************************************	ļ								
	Net investment earnings, gains, and losses	·····									
	Grants or scholarships		ļ								
е	Other expenditures for facilities and										
	programs		ļ								
1	Administrative expenses										
g	End of year balance		<u> </u>				L				
2	Provide the estimated percentage of the current		(line 1g, colu	umn (a)) held	as:						
a	Board designated or quasi-endowment ▶	%									
Q -	Permanent endowment \> %	0/									
С	Temporarily restricted endowment ▶										
2-	The percentages on lines 2a, 2b, and 2c should	•									
3a	Are there endowment funds not in the possession	n of the organizati	ion that are r	neid and adm	inistered to	r the				Γ.,	Т
	organization by:									Yes	s No
	(i) unrelated organizations								3a(i		_
	(ii) related organizations If "Yes" on line 3a(ii), are the related organization								3a(i		
4									<u>3b</u>		
D ₂	Describe in Part XIII the intended uses of the orget VI Land. Buildings, and Equipment VI Land. Buildings.		vment tunas.								
га	rt VI Land, Buildings, and Equipr Complete if the organization a		on Form	000 Dart	1\/ lino 1	10 500	Earm (000 D-	ort V line	40	
	Description of property	(a) Cost or other		(b) Cost or oth						IU. ok value	
	possipaori or property	(investment)	· •	(b) Cost or our (other)			Accumulated epreciation	"	(a) 80	⊿n value	
12	Land	((00.01)		u.					

	Buildings Leasehold improvements										
		**************************************		20	3,325		189	701		13	,534
	Equipment Other				J, J2J		-03	, , , , ,			,
	. Add lines 1a through 1e. (Column (d) must equa	I Form 990. Part	X. column (B	1). line 10c)		L		•		13	,534
			,	,, , 							

Part VII	Investments—Other Securities.	5 000 D 1 N/ E	144 0 5 000 5 4 7 10
	Complete if the organization answered "Yes" on		
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial	derivatives	-	
(2) Closely-he	ld equity interests		
(3) Other			
(4)		i	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶	•	
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Yes" on	Form 990 Part IV line	11c See Form 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(1, 233) [23]	(2) 2001. 10125	Cost or end-of-year market value
(4)			
(1)			
(2)			
(3)			
_(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	11d. See Form 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)		***************************************	
(6)		***************************************	
(7)			
(8)		· · · · · · · · · · · · · · · · · · ·	
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X	Other Liabilities.	************	<u> </u>
FaitA		Farm 000 Deut IV line	14a az 146 Caa Farra 000 Dart V
	Complete if the organization answered "Yes" on	roim 990, Pait IV, line	The or Tit. See Form 990, Part X,
	line 25.		
1.	(a) Description of liability	(b) Book value	
***************************************	income taxes	202	
	RRED RENT ABATEMENT	4,098	
(3) DISTE	RICT OF COLUMBIA TAXES	250	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
***************************************	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶	4,550	

CHE	die D (Foliti 990) 2017 TOOTIBOTID DC FORTIC CHARTER		20-101034	L	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statement	s With R	evenue per Retu	ırn.	
···	Complete if the organization answered "Yes" on Form 990, Part	IV, line 1	2a.		
1	Total revenue, gains, and other support per audited financial statements			1	3,213,770
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	5,374		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	5,374
3	Subtract line 2e from line 1			3	3,208,396
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а		4a			
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,208,396
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemen			eturn.	
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 1	2a		
1	Total expenses and losses per audited financial statements	· · · · · · · · · · · · · · · ·		1	2,917,927
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	,			
а	***************************************	2a	5,374		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	· · · · · · · · · · · · · · · · · · ·	2d			
е	Add lines 2a through 2d			2e	5,374
3	Subtract line 2e from line 1			3	2,912,553
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а		4a			
b		4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		<u></u>	5	2,912,553

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line

PART X - FIN 48 FOOTNOTE

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN THE CHARTER SCHOOL'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE YOUTHBUILD DC PUBLIC CHARTER SCHOOL PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED JUNE 30, 2018 AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY AS OF JUNE 30, 2018, THE STATUTE OF EFFECT ON ITS TAX-EXEMPT STATUS. LIMITATIONS FOR TAX YEARS 2014 THROUGH 2016 REMAINS OPEN WITH THE U.S. FEDERAL JURISDICTION OR THE VARIOUS STATES AND LOCAL JURISDICTIONS IN WHICH

^{2;} Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

YOUTHBUILD DC PUBLIC CHARTER Name of the organization

SCHOOL, INC Employer identification number 20-1818541

Pa	iri i			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	x	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II THE SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS OPERATING UNDER A	3	x	
	CONTRACT WITH THE D.C. GOVERNMENT. REVENUE PROCEDURE 75-50 DOES NOT APPLY TO CHARTER SCHOOLS.			4
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	x	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	x	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
а		5a		x
а	Students' rights or privileges?	- Ja		
b	Admissions policies?	5b		x
С	Employment of faculty or administrative staff?	5c		x
d	Scholarships or other financial assistance?	5d		x
e	Educational policies?	5e		x
f	Use of facilities?	5f		X
g	Athletic programs?	5g		х
h	Other extracurricular activities?	5h		х
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	311		
	······			
٥-	Date the amountable washing and formal and an artistance from a parameter of the control of the		v	SERVICE.
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	37
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	¥	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047
2017

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

Open to Public Inspection

Name of the organization

YOUTHBUILD DC PUBLIC CHARTER SCHOOL, INC

Employer identification number 20–1818541

YOUTHBUILD PCS OPERATES AS PART OF THE DISTRICT OF COLUMBIA'S PUBLIC SCHOOL SYSTEM, FOCUSING EXCLUSIVELY ON DISCONNECTED YOUTH - YOUNG MEN AND WOMEN BETWEEN THE AGES OF 16-24 WHO ARE NEITHER EMPLOYED NOR ENROLLED IN AN THROUGH ITS PROGRAMS, YOUTHBUILD PCS SEEKS TO ACADEMIC INSTITUTION. TRANSFORM THE LIVES OF DISCONNECTED YOUTH BY OFFERING A PROGRAM, IN ENGLISH AND SPANISH, THAT COMBINES RIGOROUS ACADEMIC INSTRUCTION WITH VOCATIONAL TRAINING, LIFE AND EMPLOYABILITY SKILLS-BUILDING, AND COMMUNITY SERVICE. ONE OF FEW ALTERNATIVE SCHOOLS IN THE DISTRICT, YOUTHBUILD PCS' PROGRAM IS DESIGNED TO PROVIDE STUDENTS WITH OPPORTUNITIES TO SUCCEED, INCLUDING ACCESS TO POST-SECONDARY EDUCATION AND EMPLOYMENT. STUDENTS PARTICIPATE IN A COMPREHENSIVE ACADEMIC PROGRAM IN A NON-TRADITIONAL LEARNING ENVIRONMENT WHILE CONTRIBUTING TO THEIR COMMUNITY THROUGH DEVELOPMENT OF HOUSING FOR LOW-INCOME RESIDENTS OF THE DISTRICT OF COLUMBIA. SMALL BY DESIGN, YOUTHBUILD PCS' NURTURING LEARNING COMMUNITY UTILIZES INNOVATIVE, EVIDENCE-BASED STRATEGIES WITH DEMONSTRATED EFFECTIVENESS IN INCREASING NUMERACY AND LITERACY RATES AMONG ITS TARGET DEMOGRAPHIC. FORM 990 - ORGANIZATION'S MISSION THE VISION OF THE SCHOOL IS TO TRANSFORM THE LIVES OF DISCONNECTED YOUTH IN THE DISTRICT OF COLUMBIA BY OFFERING A PROGRAM, IN ENGLISH AND SPANISH THAT COMBINES RIGOROUS ACADEMIC INSTRUCTION WITH VOCATIONAL TRAINING, LIFE AND

EMPLOYABILITY SKILLS-BUILDING, AND COMMUNITY SERVICE.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

Employer identification number

YOUTHBUILD DC PUBLIC CHARTER

20-1818541

THE WORKFORCE TRAINING PROGRAM IS COMPRISED OF VOCATIONAL EDUCATION CLASSES
AND ON-SITE TRAINING. TOGETHER, THE TWO COMPONENTS PROVIDE OUR STUDENTS
WITH THE OPPORTUNITY TO DEVELOP EMPLOYABILITY SKILLS AND EARN INDUSTRYRECOGNIZED CERTIFICATIONS.

THE TRANSITION SERVICES PROGRAM WORKS TO ENSURE THAT STUDENTS ARE
SUCCESSFULLY PREPARED TO ENTER A CAREER THAT WILL PROVIDE A LIVING WAGE.
STUDENTS PARTICIPATE IN CAREER DEVELOPMENT OPPORTUNITIES INCLUDING JOB
FAIRS, JOB SHADOWING, INTERNSHIPS AND COLLEGE TOURS.

OUR SUPPORT SERVICES PROGRAM HAS A SINGULAR FOCUS TO ASSIST STUDENTS WITH OVERCOMING CHALLENGES, BARRIERS AND OBSTACLES THAT IMPEDE THEIR ABILITY TO BE SUCCESSFUL IN SCHOOL AND, ULTIMATELY, IN LIFE. SPECIFIC SERVICES PROVIDED INCLUDE SUBSTANCE ABUSE COUNSELING, INDIVIDUAL/GROUP COUNSELING, ASSISTANCE WITH OBTAINING HOUSING, DAYCARE, AND MEDICAL INSURANCE.

RESPECT, COMMUNITY, RESPONSIBILITY, DIGNITY

YOUTHBUILD DC PCS HELPS YOUNG PEOPLE WITH CHALLENGING LIFE CIRCUMSTANCES TO DEVELOP RESPECT FOR THEMSELVES AND OTHERS, FIND A SENSE OF BELONGING AND RESPONSIBILITY, AND LEAD PRODUCTIVE LIVES WITH DIGNITY. THE EXPERIENCE AT YOUTHBUILD PCS REFLECTS REAL LIFE AND PROMOTES A SENSE OF PERSONAL RESPONSIBILITY THROUGH A CONSISTENTLY ENFORCED CODE OF CONDUCT THAT FOSTERS INDIVIDUAL ACCOUNTABILITY AND POSITIVE GROUP NORMS. YOUTHBUILD DC PCS STUDENTS ALSO RECEIVE A STIPEND TO HELP MEET FAMILY COMMITMENTS, DEFRAY TRANSPORTATION COSTS, AND TO INCENTIVIZE COMPLETION OF THE PROGRAM.

PAGE 1 OF 3

YOUTHBUILD DC PUBLIC CHARTER

20-1818541

A WIN-WIN SOLUTION

STATISTICS SHOW THAT STUDENTS WHO DROP OUT OF HIGH SCHOOL ARE MORE LIKELY
TO LIVE IN POVERTY AND SUFFER FROM UNEMPLOYMENT, POOR HEALTH, SUBSTANCE
ABUSE, AND VIOLENCE. SUCH STUDENTS NEED AND DESERVE A SECOND CHANCE TO
ESTABLISH STABLE, PRODUCTIVE ADULT LIVES. WHILE YOUTHBUILD PCS ENCOURAGES
STUDENTS TO PURSUE HIGHER EDUCATIONAL GOALS, WE RECOGNIZE THAT SOME MAY
CHOOSE TO ENTER THE WORKFORCE UPON GRADUATION. YOUTHBUILD PCS ENSURES THAT
OUR STUDENTS HAVE THE SKILLS AND CREDENTIALS TO DO SO.

LOCALLY GROUNDED PART OF A NATION-WIDE MOVEMENT

THE YOUTHBUILD MODEL HAS PROVEN TO BE AN EFFECTIVE CHANGE AGENT IN THE LIVES OF DISCONNECTED YOUTH. YOUTHBUILD DC PCS IS PART OF A 260+-MEMBER NATIONAL NETWORK USING AN EFFECTIVE, TESTED MODEL DEVELOPED IN 1978.

THROUGH YOUTHBUILD, MORE THAN 130,000 YOUTH NATIONWIDE HAVE TRANSFORMED

THEIR LIVES THROUGH EDUCATION, REBUILT THEIR COMMUNITIES, AND CREATED MORE THAN 28,000 UNITS OF AFFORDABLE HOUSING SINCE 1994.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE DIRECTOR OF OPERATIONS REVIEWS THE 990 TAX RETURN UPON RECEIPT FROM

THE PREPARER. ONCE THE 990 IS APPROVED INTERNALLY, THE 990 IS FORWARDED TO

THE BOARD TREASURER FOR REVIEW. ONE ACCEPTABLE, THE BOARD TREASURER SIGNS

THE RETURN AND A FULL COPY OF THE RETURN IS PROVIDED TO THE MEMBERS OF THE

BOARD.

PAGE 2 OF 3