# \*\* PUBLIC DISCLOSURE COPY \*\*

(Rev. January 2020) 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.

Α	For th	e 2019 calendar year, or tax year beginning $$ JUL $1,$ $2019$ $$ and en	ding J	UN 30, 2020	
В	Check if applicab	C Name of organization		D Employer identific	cation number
•		WASHINGTON YO YING PUBLIC CHARTER			
	Addre				
	Name	Doing business as		20-44640	54
F	Initial return Final	,	om/suite	E Telephone numbe	
	return termir	n-		202-635-	
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	11,770,101.
H	return ∏Appli	· · · · · · · · · · · · · · · · · · ·		H(a) Is this a group re	
	⊥ltiön pendi	SAME AS C ABOVE		for subordinates	
_	T-1/ -1/	empt status: X 501(c)(3) 501(c) ( ) ( insert no.) 4947(a)(1) or [	527	H(b) Are all subordinates in	
		te: WWW.WASHINGTONYUYING.ORG	527	1	list. (see instructions)
		forganization: X Corporation Trust Association Other	I Voor	H(c) Group exemption	n number ►  ✓ State of legal domicile: DC
	art I		<b>L</b> Year (	or formation: 2000 N	A State of legal domicile; DC
	1	Briefly describe the organization's mission or most significant activities: TO OPE	RATE	A PUBLIC C	HARTER
Governance	Ι'	SCHOOL IN A CHINESE/ENGLISH DUAL LANGUAGE	TMME	RSTON ENVIR	ONMENT.
nar	2	Check this box if the organization discontinued its operations or disposed			
Ver		Number of voting members of the governing body (Part VI, line 1a)			12
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)			12
დ თ	1 -	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			230
iţi					86
Activities	72	Total number of volunteers (estimate if necessary)			0.
Ă		Net unrelated business taxable income from Form 990-T, line 39			0.
_	B	Thet differenced business taxable income from 1 offi 990-1, life 39		Prior Year	Current Year
-	8	Contributions and grants (Part VIII, line 1h)		658,769.	395,118.
Revenue	9	(5 . ) (7 . ) (8 . )		11,034,576.	11,250,044.
Vel		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		76,389.	94,418.
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		15,817.	-3,529.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,785,551.	
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,966,293.	7,685,974.
Expenses	15	Professional fundraising fees (Part IX, column (A), line 11e)		17,644.	0.
oen	l loa	Total fundraising expenses (Part IX, column (D), line 25) 170, 273	3	17,011.	<u> </u>
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<del>-</del> -	3,306,580.	3,119,238.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,290,517.	10,805,212.
		Revenue less expenses. Subtract line 18 from line 12		1,495,034.	
or es		Trevenue less expenses. Oubtract line 10 from line 12	Be	ginning of Current Year	End of Year
Net Assets or Find Balances	20	Total assets (Part X, line 16)		26,551,440.	27,079,882.
ASS	21			12,160,160.	11,703,520.
Net	22	Total liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 21 from line 20		14,391,280.	15,376,362.
	art II				23/3/0/0021
		alties of perjury, I declare that I have examined this return, including accompanying schedules ar	nd stateme	ents, and to the best of m	v knowledge and belief, it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which			,
Sig	ın	Signature of officer		Date	
He		MAQUITA ALEXANDER, EXECUTIVE DIRECTOR			
		Type or print name and title			
_		Print/Type preparer's name Prepa	D D	Date Check	PTIN
Pai	d	MEENA BISHNOI  Prepa  Meena Bishnoi		4/22/21 offers L if self-employ	P01480769
Pre	parer	Firm's name JONES MARESCA & MCQUADE PA	<u> </u>	Firm's EIN	52-1853933
Use	Only		TE 8		
	-	WASHINGTON, DC 20036			2-296-3306
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Pai	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	TO INSPIRE AND PREPARE YOUNG PEOPLE TO CREATE A BETTER WORLD BY	
	CHALLENGING THEM TO REACH THEIR FULL POTENTIAL IN A NURTURING	
	CHINESE/ENGLISH EDUCATIONAL ENVIRONMENT.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	10
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes	10
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
_	revenue, if any, for each program service reported.  (Code: ) (Expenses \$ 8,767,484 • including grants of \$ ) (Revenue \$ 11,250,044 • )	
<del>4</del> a	(Code: ) (Expenses \$ 8,767,484 including grants of \$ ) (Revenue \$ 11,250,044 WASHINGTON YU YING IS ON THE LEADING EDGE OF ELEMENTARY EDUCATION BY	<u>•</u> )
	COMBINING A CHINESE LANGUAGE IMMERSION PROGRAM WITH THE	_
	STATE-OF-THE-ART INTERNATIONAL BACCALAUREATE CURRICULUM FRAMEWORK.	
	TRANSLATED, YU YING MEANS "NURTURING EXCELLENCE." DURING THE YEAR ENDER	<u> </u>
	JUNE 30, 2020, WASHINGTON YU YING EDUCATED 569 STUDENTS IN GRADES	_
	PRE-K3 THROUGH 5TH. WASHINGTON YU YING HAD A SUCCESSFUL ENROLLMENT	_
	PROCESS IN SPRING 2020. DEMAND FOR THIS INNOVATIVE PROGRAM RESULTED IN	
	MORE THAN 1,700 APPLICATIONS FOR ABOUT 65 SPOTS FOR NEW FAMILIES FOR	_
	THE 2020-21 SCHOOL YEAR. WASHINGTON YU YING WELCOMED 577 STUDENTS FOR	_
	THE UPCOMING SCHOOL YEAR. IN RESPONSE TO THE COVID-19 PANDEMIC, YU-YING	<del>_</del>
	MOVED FROM IN-PERSON LEARNING TO 100% VIRTUAL LEARNING FOR ALL STUDENTS	
	FROM MID-MARCH THROUGH THE END OF THE SCHOOL YEAR. ADDITIONALLY, DURING	
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	
		<u> </u>
_		
4c	(Code:) (Expenses \$	_ )
		_
		_
		_
		_
		_
4d	Other program services (Describe on Schedule O.)	_
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ▶ 8,767,484.	
	Form <b>990</b> (20	19

# 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?	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			3,7
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		- V
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Α.
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
0	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		22
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		x
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	0		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			<del></del>
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	. 14		- <u>-</u> -
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			77
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	۱ ۵ ا		Х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		$\Gamma \nabla$

# WASHINGTON YU YING PUBLIC CHARTER

Form 990 (2019)

SCHOOL

Part IV	Checklist	of Required	Schedules (continued)

	<del></del>		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		77	
~ 4	Schedule J	23	X	_
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	x	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		Х
	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
	s Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) 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):			
•	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV	28a	X	
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//f			
	"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		
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		х
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		x	
25	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a	$\vdash$	
	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?	00.0		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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?			
P	Note: All Form 990 filers are required to complete Schedule O  art V Statements Regarding Other IRS Filings and Tax Compliance	38	X	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 49	_		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
	(garnoming) withinings to prize withinins:	10		

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# Form 990 (2019) SCHOOL Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	-	37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
0-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		Α.
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
<del>-1</del> a	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
h	If "Yes," enter the name of the foreign country	70		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a				
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? 7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			l
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			.,,
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	_	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	8		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	0.0		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans 13b	$\dashv$		
C 1/1-2	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
14a h	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 on Schedule O	14a		<del> </del>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-10		
.0	excess parachute payment(s) during the year?	15		х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
			200	

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion 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
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	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?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3	s only	) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website  X  Another's website  X  Upon request  Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finaı	ncial	
_	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	CHERI HARRINGTON - 202-635-1950			
	220 TAYLOR ST. NE, WASHINGTON, DC 20017			

932006 01-20-20

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

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

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

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

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

See instructions for the order in which to list the persons above.

(A)	(B)	l	AI 112C		C)	про	nou	(D)	(E)	(F)
Name and title	Average	(do	not c		ition more		one	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week (list any	-					Ĺ	from the	from related organizations	other compensation
	hours for	direc				pe		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC)	,	organization
	organizations	al trus	onal tr		loyee	comp				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) VINCENT BAXTER	3.00	흐	Ë	5	<u>\$</u>	主旨	요			
CHAIR	1.00	Х		х				0.	0.	0.
(2) KELLY YEE	3.00	22		22				0.	0.	<u> </u>
VICE CHAIR	3.00	х		х				0.	0.	0.
(3) SARABETH BERMAN	2.00									
SECRETARY UNTIL JUNE 2020		x		х				0.	0.	0.
(4) TZU-I (AMY) LEE	3.00	<del></del>								
TREASURER		Х		х				0.	0.	0.
(5) LEMAR WHITE, TRUSTEE	2.00									
THEN SECRETARY AS OF JUNE 2020		Х		Х				0.	0.	0.
(6) DARREN RILEY	2.00									
TRUSTEE		Х						0.	0.	0.
(7) JOSE SOUSA	2.00									
TRUSTEE		Х						0.	0.	0.
(8) MICHELLE STENZ	2.00									
TRUSTEE		Х						0.	0.	0.
(9) WENDY RUETA	2.00									
TRUSTEE	0 00	Х	_			_	_	0.	0.	0.
(10) ABI LEVINE	2.00	,,							0	0
TRUSTEE	2 00	Х				_	_	0.	0.	0.
(11) JEVON WALTON	2.00	Х						0.	0.	0.
TRUSTEE (12) LIZA DOUGLAS	2.00	Δ	$\vdash$		$\vdash$	$\vdash$		0.	0.	0.
TRUSTEE	4.00	X						0.	0.	0.
(13) ROBERT ANDERSON	2.00	^	$\vdash$		$\vdash$	$\vdash$	$\vdash$	0.	0.	<u></u>
TRUSTEE	2.00	Х						0.	0.	0.
(14) MAOUITA ALEXANDER	40.00		$\vdash$		$\vdash$	$\vdash$	$\vdash$	0.	•	
EXECUTIVE DIRECTOR	0.50			х				139,222.	0.	13,885.
(15) CHERI HARRINGTON	40.00	$\vdash$	$\vdash$	Ë		$\vdash$	$\vdash$			
COO	1.00	1		х				113,983.	0.	3,490.
(16) AMY QUINN, DIRECTOR OF TEACHING	36.00					$\Box$		,		-
AND LEARNING	0.50	L				Х	L	102,339.	0.	9,846.
										000

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Form 990 (2019)

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
	Name and title	Average	(do		Pos		n e than	nne	Reportable	Reportable	,	Es	timate	ed
		hours per	box	, unle	ss pe	rson	is bot	n an	compensation	compensation	on	an	nount	of
		week	$\vdash$	cer ar	ia a a	irecto	or/trus	tee)	from	from related			other	
		(list any hours for	Individual trustee or director						the	organization			pensa	
		related	or di	ee			sated		organization	(W-2/1099-MIS	5C)		om the	
		organizations	ustee	trust		9	nedu		(W-2/1099-MISC)			_	anizati d relati	
		below	ual tr	ional		ploye	t con						anizatio	
		line)	divid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ai iiZati	0113
			=	=	0	호	工品	4			$\rightarrow$			
			1											
			_				_				-			
											-+			
			ł											
							┡				-			
1b	Subtotal							<u> </u>	355,544.		0.	2	7,2	21.
	Total from continuation sheets to Part V								0.		0.			0.
	Total (add lines 1b and 1c)								355,544.		0.	2	7,2	21.
2	Total number of individuals (including but r	ot limited to th	nose	liste	ed a	bov	e) wł	no r	eceived more than \$100	,000 of reportab	le			
	compensation from the organization												1	3
													Yes	No
3	Did the organization list any former officer,			кеу е	emp	loye	e, o	hiç	ghest compensated emp	oloyee on				
	line 1a? If "Yes," complete Schedule J for s											3		_X
4	For any individual listed on line 1a, is the su	-		-					•	-				
	and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sch	edule	J i	for such individual		L	4	Х	
5	Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	from	any	y unr	elat	ted organization or indiv	idual for services	,			
	rendered to the organization? If "Yes," com	plete Schedul	e J t	or s	uch	pers	son .				<u></u>	5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	•	-								npensa	ation 1	rom	
	the organization. Report compensation for	tne calendar y	ear	endi	ng v	vith	or w	itnii T		year. I				
	<b>(A)</b> Name and business	address							<b>(B)</b> Description of s	ervices	Cc	)) ompe	<b>))</b> nsatio	n
BO1	LANA CAPITOL ENTERPRIS			/1 /	5/1	5		$\dashv$	JANITORIAL A			-inpe	041101	
וטם	DUMU CULTION BRITERLY D	D, INC	• ,	7 (	J ± .	,			hvarioutvn v	עויד				

(A) Name and business address	(B) Description of services	(C) Compensation
BOLANA CAPITOL ENTERPRISES, INC., 4645	JANITORIAL AND	
NANNIE HELEN BURROUGHS AVE. N.E., STE.	LANDSCAPING SERVICES	194,065.
REVOLUTION FOODS, INC.		
P.O. BOX 742759, LOS ANGELES, CA 90074	FOOD SERVICE	154,222.
EDOPS, 1611 CONNECTICUT AVE., NW, STE.		
200, WASHINGTON, DC 20009	FINANCIAL SERVICES	112,232.
DC PUBLIC CHARTER SCHOOL BOARD, 3333 14TH		
ST. N.W., #210, WASHINGTON, DC 20010	AUTHORIZER SERVICES	106,327.
2 Total number of independent contractors (including but not limited to those list	ed above) who received more than	

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\$100,000 of compensation from the organization

20-4464054 Page 9 Form 990 (2019) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Revenuè éxcluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues ..... 1b 60,957. c Fundraising events ..... 1c d Related organizations ..... 1d 263,520, e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 70,641 1f 31,680. g Noncash contributions included in lines 1a-1f 1g |\$ 395,118 h Total. Add lines 1a-1f **Business Code** 2 a PER PUPIL APPROPRIATIONS Program Service Revenue 900099 8,644,347. 8,644,347 1,897,615 1,897,615 b PER PUPIL FACILITY ALLOWANCE 900099 PROGRAM SERVICE FEES 611710 707,662 707,662 CHINESE CLASSES 900099 420 420 f All other program service revenue g Total. Add lines 2a-2f 11,250,044 Investment income (including dividends, interest, and 94,418 other similar amounts) 94,418 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 7a b Less: cost or other basis Other Revenue 7b and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not 60,957. of including \$ contributions reported on line 1c). See 30,441 Part IV, line 18 **b** Less: direct expenses \_\_\_\_\_ 34,050 -3,609, c Net income or (loss) from fundraising events -3,609 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold ..... c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a LIBRARY FEES 900099 75. 75 b MISCELLANEOUS 900099 5 5.

12 932009 01-20-20

С

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90,889.

80

11,736,051.

d All other revenue

e Total. Add lines 11a-11d

Total revenue. See instructions

11,250,044

## Part IX | Statement of Functional Expenses

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

_	Check if Schedule O contains a respon	(A)	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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				
5	Compensation of current officers, directors,	2/2 /50	207 020	50 006	E E24
_	trustees, and key employees	343,458.	287,038.	50,896.	5,524
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	6,056,301.	5,061,419.	897,470.	97,412
7	Other salaries and wages	0,030,301.	J,001,41J.	031,410•	31,414
8	Pension plan accruals and contributions (include	93,479.	78,123.	13,852.	1 504
0	section 401(k) and 403(b) employer contributions)	687,727.	574,753.	101,912.	1,504 11,062
9	Other employee benefits	505,009.	422,050.	74,836.	8,123
10	Payroll taxes Fees for services (nonemployees):	505,009.	±22,030•	7 = , 0 3 0 •	0,123
11	` ' ' '				
	Management	18,910.	11,023.	7,887.	
b	<u> </u>	172,075.	11,025.	172,075.	
c	•	172,075		172,075	
	Lobbying Professional fundraising services. See Part IV, line 17				
		11,715.		11,715.	
f	Investment management fees	11,713.		11,713.	
g	column (A) amount, list line 11g expenses on Sch 0.)	240,863.		224,449.	16,414
12	Advertising and promotion	210,0031		221/1130	10,111
13	Office expenses	144,723.	120,949.	21,446.	2,328
14	Information technology		220/3230	22/2200	2,020
15	Royalties				
16		552,087.	461,394.	81,812.	8,881
17	Occupancy Travel	33270070	101/071	02/0220	0,002
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	456,531.	381,536.	67,652.	7,343
21	Payments to affiliates	===,===	,		. , 5 2 5
22	Depreciation, depletion, and amortization	462,698.	386,898.	68,354.	7,446
23		74,103.	61,930.	10,981.	1,192
23 24	Other expenses. Itemize expenses not covered	- = , = 0 0	,	==,,,,,,,,	= / = - =
- '	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	DIRECT STUDENT EXPENSE	719,093.	719,093.		
b	OTHER STAFF-RELATED EXP	110,772.	92,575.	16,415.	1,782
c	PROFESSIONAL DEVELOPMEN	78,479.	65,587.	11,630.	1,262
d	DUES, FEES, AND FINES	62,993.	36,760.	26,233.	, . – .
	All other expenses	14,196.	6,356.	7,840.	
25	Total functional expenses. Add lines 1 through 24e	10,805,212.	8,767,484.	1,867,455.	170,273
26	<b>Joint costs.</b> Complete this line only if the organization			. ,	, -
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
				I	

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Form 990 (2019)
Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			7,695,270.	1	8,402,634.
	2	Savings and temporary cash investments			8,675.	2	
	3	Pledges and grants receivable, net		137,449.	3	68,965.	
	4	Accounts receivable, net	46,831.	4	45,515.		
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	e pers	ons		5	
	6	Loans and other receivables from other disqualif	ied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described	l in se	ction 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			50,394.	9	77,910.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	18,450,141.			
	b	Less: accumulated depreciation	10b	3,825,916.	14,955,381.	10c	14,624,225.
	11	Investments - publicly traded securities			3,647,080.	11	3,853,528.
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line 1	l1			13	
	14	Intangible assets		1000	14		
	15	Other assets. See Part IV, line 11			10,360.	15	7,105.
	16	Total assets. Add lines 1 through 15 (must equa			26,551,440.	16	27,079,882.
	17	Accounts payable and accrued expenses	651,358.	17	592,383		
	18	Grants payable	E0 E2E	18	42 000		
	19	Deferred revenue			72,737.	19	13,777.
	20	Tax-exempt bond liabilities			11,334,083.	20	10,893,738.
	21	Escrow or custodial account liability. Complete F				21	
Liabilities	22	Loans and other payables to any current or form					
Ħ		trustee, key employee, creator or founder, subst					
-iak		controlled entity or family member of any of thes				22	
_	23	Secured mortgages and notes payable to unrela		_		23	
	24	Unsecured notes and loans payable to unrelated		_		24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24	). Complete Part X	101,982.		203,622.
		of Schedule D			12,160,160.		11,703,520.
	26	Total liabilities. Add lines 17 through 25			12,100,100.	26	11,703,320.
es		Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33.	ck ner	e P A			
anc anc	07	• • • • • • •			14,195,121.	27	15,338,385.
3ali	27	Net assets with depar restrictions			196,159.	28	37,977.
Jd.	28	Net assets with donor restrictions  Organizations that do not follow FASB ASC 98			150,155.	20	31,311
표		and complete lines 29 through 33.	56, CII	eck fiere			
ō	20					29	
ets	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq				30	
Ass	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances					14,391,280.	32	15,376,362.
Z	32	Total liabilities and not assets/fund balances			26,551,440.	33	27,079,882.
	33	Total liabilities and net assets/fund balances			20,331,330.	აა	50rm <b>990</b> (2010

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,73		
2	Total expenses (must equal Part IX, column (A), line 25)			0,80		
3	Revenue less expenses. Subtract line 2 from line 1	3		930,839		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	4,39		
5	Net unrealized gains (losses) on investments	5		5	4,2	40.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				3.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	1	5,37	6,3	62.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	<b>b</b> Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,					
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,					
	review, or compilation of its financial statements and selection of an independent accountant?				X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit					
	Act and OMB Circular A-133?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	ıdit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u>	3b		

Form **990** (2019)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

WASHINGTON YU YING PUBLIC CHARTER Name of the organization **Employer identification number** SCHOOL 20-4464054 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

# 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.)

Calendar year (or fiscal year beginning in) ▶  1 Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  3 The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf  5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6 Public support. Subtract line 5 from line 4.  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶  7 Amounts from line 4  8 Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the asset (Explain in Part VI).  11 Total support. Add lines 7 through 10  23 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)					
membership fees received. (Do not include any "unusual grants.")  2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  3 The value of services or facilities furnished by a governmental unit to the organization without charge  4 Total. Add lines 1 through 3  5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6 Public support. Subteact line 5 from line 4  Section B. Total Support  Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total or securities loans, rents, royalties, and income from sinterest, dividends, payments received on securities loans, rents, royalties, and income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)					
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assets (Explain in Part VI.)  11 Total support. Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  12					
11 Total support. Add lines 7 through 10       12         12 Gross receipts from related activities, etc. (see instructions)       12					
12 Gross receipts from related activities, etc. (see instructions)	_				
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)					
	_				
organization, check this box and stop here					
Section C. Computation of Public Support Percentage					
Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	%				
15 Public support percentage from 2018 Schedule A, Part II, line 14	%				
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and					
stop here. The organization qualifies as a publicly supported organization					
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box	$\neg$				
and stop here. The organization qualifies as a publicly supported organization					
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,					
and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization	$\neg$				
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization					
<b>b 10%</b> -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or					
more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the	$\neg$				
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	$\dashv$				
8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2019					

# 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.)

qualify under the tests listed	below, please com	plete Part II.)				
Section A. Public Support	1300:=	#1.00:5	( ) 00:-	1,000:0	/ 3 00 : 5	(n = · ·
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and						
membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
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>;</b>					
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(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>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses	3					
acquired after June 30, 1975						
c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
<b>14</b> First five years. If the Form 990 is form	or the organization	's first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organiz	zation,
check this box and stop here						<b>&gt;</b> L_
Section C. Computation of Pub						
<b>15</b> Public support percentage for 2019			column (f))			
16 Public support percentage from 201					16	(
Section D. Computation of Inve					1 1	
17 Investment income percentage for 2						(
18 Investment income percentage from						(
19a 33 1/3% support tests - 2019. If th	-					17 is not
more than 33 1/3%, check this box b 33 1/3% support tests - 2018. If the	e organization did ı	not check a box or	n line 14 or line 19	a, and line 16 is m	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, ch	neck this box and <b>s</b> t	<b>top here.</b> The orga	anization qualifies	as a publicly supp	oorted organization	▶ <u></u>
20 Private foundation If the organizat	ion did not check a	hoy on line 14 10	a or 19h check t	his hoy and see in	netructions	

# Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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		
3с		
4a		
4b		
4c		
5a		
ъa		
5b		
5c		
6		
7		
8		
9a		
9b		
ฮม		
9с		
10a		
10b		

Sche	edule A (Form 990 or 990-EZ) 2019 SCHOOL 20 - 4	40405	<b>4</b> Pa	age <b>5</b>
Pa	rt IV   Supporting Organizations <sub>(continued)</sub>			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44		
	below, the governing body of a supported organization?	11a	_	
	A family member of a person described in (a) above?	11b		
	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>
Sec	ction B. Type i Supporting Organizations		Vaa	No
4	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	INO
1	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 <b>Part VI</b> 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		
2		-		
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		
Sec	etion C. Type II Supporting Organizations		l	<u> </u>
000	nion of Type in cupper and organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		1.00	110
-	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		
Sec	tion D. All Type III Supporting Organizations			
	,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	ıs).		
a	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 in	nstructions		·
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 <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	01-		
0	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а		20		
h	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b> Did the organization everying a substantial degree of direction over the policies, programs, and activities of each	3a		
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 <b>Part VI</b> the role played by the organization in this regard	3h		

032025 00-25-10

20-4464054 Page 6 Schedule A (Form 990 or 990-EZ) 2019 SCHOOL

Ра	rt V   Type III Non-Functionally Integrated 509(a)(3) Supporting	ıg Orga	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. A				
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.		
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7		7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	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			
Sect	tion 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	$\top$			
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting org	anization (see	

Schedule A (Form 990 or 990-EZ) 2019

instructions).

Pai	rt V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Orga	anizations (continued)	
Secti	ion D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes		
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	IS	
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.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive	e	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
<u>i</u>	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
6	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2020. Add lines 3			
7	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

### WASHINGTON YU YING PUBLIC CHARTER

Schedule A	(Form 990 or 990-EZ) 2019 SCHOOL	20-4464054 Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, lir Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for a (See instructions.)	line 17a or 17b; Part III, line 12; n B, lines 1 and 2; Part IV, Section C, ne 1; Part V, Section B, line 1e; Part V,

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **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

2019

Name of the organization

WASHINGTON YU YING PUBLIC CHARTER

SCHOOL

Organization type (check one):

Employer identification number

20-4464054

Filers of:	Section:					
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)( $3$ ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> 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					
, ,	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
X 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						
sections 509(a)(1) any one contributo	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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.					
year, total contribu	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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

 $\ \, \text{LHA} \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization
WASHINGTON YU YING PUBLIC CHARTER
SCHOOL

Employer identification number

20-4464054

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	\$ 5,344.	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	
2		\$ 264,072.	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	
3	Humo, dudiess, und 2n + 4	\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No. 4	Name, address, and ZIP + 4	\$ 5,000.	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	
5	Touring additional 1 1	\$10,000.	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	
6	Touring down odd; diffd Edi   1	\$5,141.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	

Name of organization
WASHINGTON YU YING PUBLIC CHARTER
SCHOOL

Employer identification number

20-4464054

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer identification number** WASHINGTON YU YING PUBLIC CHARTER 20-4464054 SCHOOL Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **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 Open to Public Inspection

Name of the organization

WASHINGTON YU YING PUBLIC CHARTER SCHOOL

**Employer identification number** 20-4464054

Schedule D (Form 990) 2019

Pai	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds			
	are the organization's property, subject to the organization's	-				
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor of					
Pai						
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).				
	Preservation of land for public use (for example, recrea		historically important land area			
	Protection of natural habitat	Preservation of a	certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form o	f a conservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b						
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structur	re			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re-					
	year ▶					
4	Number of states where property subject to conservation ea	sement is located				
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements in	t holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,					
	<b></b>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservati	on easements during the year			
	<b>&gt;</b> \$					
8	Does each conservation easement reported on line 2(d) above					
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservati	on 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.					
Pai	t III Organizations Maintaining Collections o	-	her Similar Assets.			
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under FASB ASC 95					
	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 final					
b	If the organization elected, as permitted under FASB ASC 95	•				
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	erance of public service,			
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1		<u>-</u>			
	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial	gain, provide			
	the following amounts required to be reported under FASB A	_				
а	Revenue included on Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·			
h	Assets included in Form 990, Part X		\$			

932051 10-02-19

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Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assetscontinued collection terms (check all that apply):		t III Organizations Maintaining C	collections of A	rt His	torical Tr	reasures	or Other	Similar A	sets/co	ntini		ge <b>z</b>
a Public exhibition   d   Loan or exchange program   a   Public exhibition   d   Cither   b   Scholarly research   e   Other   b   Proservation for future generations   d   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintand as part of the organization solloction?   Ves   No   Part W   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 1.  1b   If "Yes," explain the arrangement in Part XIII and complete the following table:   Amount   c Beginning balance   In   Description of Part V   c Boltzhutionion during the year   Id   d Adolftone during the year   Id   Distributionion of the year   Id   Distributionion of the year   Id   Distributionion of year balance   Id   Distributionion of year balance   Id   Distributionion of year balance   Id										TUITE	icu)	
a Public exhibition d	3											
b Scholarly research ce	_	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	٠		1 aan ar ay	banga progr	am					
C Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Feart VI Excorw and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If "Yes," explain the arrangement in Part XIII and complete the following table:  Amount 1c d.												
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If "Yes," explain the arrangement in Part XIII and complete the following table:  1c			е		Other					—		
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sed to traise funds rather than to be maintained as part of the organization's collection?    Part IV   Escrow and Custodial Arrangements. Complete if the organization an enswered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9. or reported an amount on Form 990, Part IV, line 9. or reported an amount on Form 990, Part XP.    I Is the organization an agent, flustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XP.   If "Yes," explain the arrangement in Part XIII and complete the following table:    Beginning balance		_										
to be sold to raise funds rather than to be maintained as part of the organization's collection?									Part XIII.			
Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Ves	5											
reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	D											No
on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance g Distributions during the year g Distributions during the parameter in Part XIII. Check here if the explanation has been provided on Part XIII.  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  G Distributions during the year g Distribution provers back (e) Four years b	Pai											
on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance g Distributions during the year g Distributions during the parameter in Part XIII. Check here if the explanation has been provided on Part XIII.  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  G Distributions during the year g Distribution provers back (e) Four years b	1a	Is the organization an agent, trustee, custodi	ian or other intermed	liary for	contribution	ns or other as	ssets not in	ncluded				
b If "Yes," explain the arrangement in Part XIII and complete the following table:    C   Beginning balance									Yes	;		No
c Beginning balance d Additions during the year e Distributions during the year 1 te	b											
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability    Part V   Endowment Funds. Complete if the explanation has been provided on Part XIII.	-	ree, explain the arrangement in rail and							Amo	unt		
d Additions during the year  e Distributions during the year  f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Part V Endowment Funds. Complete if the organization as been provided on Part XIII  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  [a) Current year  [b) Prior year  [c) Two years back  [d) Three years back  [e) Four years back  [e) Four years back  [f) Four years back  [g) Four years  [g) Fo	•	Reginning halance						10	71110	unt		
e Distributions during the year f fending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No In Part XIII. Check here if the explanation has been provided on Part XIII.  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (for interpretable) and programs (for												
f Ending balance												
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?										—		
Describe in Part XIII. Check here if the explanation has been provided on Part XIII.   Describe in Part XIII. Check here if the explanation has been provided on Part XIII.   Describe in Part XIII. the intended uses of the organization's endowment funds.										—		
Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Call Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back		_					-	/'?	∟ Yes	i	$\vdash$	No
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back												
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	Par	t v Endowment runds. Complete i							. 1 -			
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment  9 Permanent endowment  9 The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related progranizations (iii) Related organizations (ives in line 3a(ii), are the related organization is listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (investment) (b) Cost or other depreciation (c) Accumulated depreciation 1a Land 3,070,000 5 Buildings 14,402,109 3,032,482 11,369,627 c Leasehold improvements d Equipment 978,032 793,434 184,598 6 Other			(a) Current year	(b) F	Prior year	(c) Two yea	rs back (d	<b>I)</b> Three years b	ack (e) F	our y	ears b	ack
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	1a	Beginning of year balance										
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	b	Contributions										
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (al) held as: a Board designated or quasi-endowment	С	Net investment earnings, gains, and losses										
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (al) held as: a Board designated or quasi-endowment	d	Grants or scholarships										
and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶												
f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶		and programs										
g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶	f											
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶												
a Board designated or quasi-endowment	_		rent vear end haland	e (line 1	La column (	a)) held as:						
b Permanent endowment ▶		· · · · · · · · · · · · · · · · · · ·	rent year end balane	-	rg, coluini (	ajj ricia as.						
c Term endowment ▶			04	_′0								
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations  (ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  1a Land  3,070,000.  b Buildings  14,402,109.  3,032,482.  11,369,627.  c Leasehold improvements  d Equipment  978,032.  793,434.  184,598.												
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation  1a Land 3,070,000  b Buildings 14,402,109 3,032,482 11,369,627  c Leasehold improvements d Equipment 978,032 793,434 184,598 e Other	С		, ,									
Vest   No	_	, ,										
(ii) Unrelated organizations (iii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  basis (other)  1a Land  3,070,000  b Buildings  14,402,109  3,032,482  11,369,627  c Leasehold improvements  d Equipment  978,032  793,434  184,598  e Other	За		ession of the organiza	ation th	at are held a	and administe	ered for the	organization		_	. 1	
(ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  1a Land  3,070,000  b Buildings  14,402,109  3,032,482  11,369,627  c Leasehold improvements  d Equipment  978,032  793,434  184,598  e Other		•							_	-	res	No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  1a Land  3,070,000.  b Buildings  14,402,109. 3,032,482. 11,369,627.  c Leasehold improvements  d Equipment  978,032. 793,434. 184,598.  e Other										`	-	
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  1a Land  3,070,000.  Buildings  14,402,109.  C Leasehold improvements  d Equipment  978,032.  793,434.  184,598.  e Other										ii)	$\rightarrow$	
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  1a Land  3,070,000.  Buildings  14,402,109.  C Leasehold improvements  d Equipment  978,032.  793,434.  184,598.	b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	red on S	Schedule R?	·			31	<u>ر</u>		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  1a Land  3,070,000.  Buildings  14,402,109.  C Leasehold improvements  d Equipment  Other  978,032.  793,434.  184,598.	_4_			wment	funds.							
Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation   (d) Book value	Par	t VI Land, Buildings, and Equipm	nent.									
tall Land         basis (investment)         basis (other)         depreciation           b Buildings         14,402,109.         3,070,000.           c Leasehold improvements         14,402,109.         3,032,482.         11,369,627.           c Lequipment         978,032.         793,434.         184,598.           e Other         14,402,109.         14,402,109.         14,402,109.		Complete if the organization answere	d "Yes" on Form 990	), Part I	V, line 11a. S	See Form 990	0, Part X, lii	ne 10.				
1a Land       3,070,000.       3,070,000.         b Buildings       14,402,109.       3,032,482.       11,369,627.         c Leasehold improvements       978,032.       793,434.       184,598.         e Other       14,402,109.		Description of property	١ , ,						(d) B	ook	value	
b Buildings       14,402,109.       3,032,482.       11,369,627.         c Leasehold improvements       978,032.       793,434.       184,598.         e Other       14,402,109.       14,402,		Land	`	nont)		. ,	uepri	COIALIOIT	3 0	70	0.0	10
c Leasehold improvements       978,032.       793,434.       184,598.         e Other       100,000.							2 0	22 //02	11 2	70	, 00	7
d Equipment 978,032. 793,434. 184,598.					14,40	, 1∪y•	۵,∪.	J4,404.	тт,5	09	,02	1 •
e Other					0.5	70 020		02 424	4	0.4	F ^	
	d	Equipment			97	ΰ,∪3Ζ.	/ :	93,434.	1	ŏ 4	,59	٥.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ► 14,624,225.									4.			_
	Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colui	mn (B), line	10c.)		<b></b>	14,6	24	,22	5.

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 SCHOOL		20	-4464054 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	5 000 B . IV.		
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	(h) Dook volue
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X Other Liabilities.	; 15.)	······	
Complete if the organization answered "Yes"	on Form 000 Part IV line	110 or 11f Soo Form 900 Part V line 26	5
(a) Description of liability	off Form 990, Fart IV, line	The or Th. See Form 990, Part A, line 25	(b) Book value
			(b) Book value
(1) Federal income taxes (2) CAPITAL LEASE OBLIGATION			40,845
(3) INTEREST RATE SWAP			162,777
			102,111
<u>(4)</u>			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9) Tabel (Column (b) must equal Form 900, Port V, eq. (P) line	) OF )		203,622
Total. (Column (b) must equal Form 990, Part X, col. (B) line	;∠J.)		1 403,044

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

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

X

Schedule D (Form 990) 2019

Part XI Reconciliation of Revenue per Audited	Financial Statements	With Revenue per	Retur	n.
Complete if the organization answered "Yes" on For	· · · · · · · · · · · · · · · · · · ·			111 000 000
1 Total revenue, gains, and other support per audited financi			1	11,902,220
2 Amounts included on line 1 but not on Form 990, Part VIII,	ı	I 54 040		
a Net unrealized gains (losses) on investments		116 000	-	
b Donated services and use of facilities		-	-	
c Recoveries of prior year grants		C 0 4 4	-	
d Other (Describe in Part XIII.)			_	177,884
e Add lines 2a through 2d			2e	11,724,336
<ul><li>3 Subtract line 2e from line 1</li><li>4 Amounts included on Form 990, Part VIII, line 12, but not of</li></ul>			3	11,724,550
<ul> <li>Amounts included on Form 990, Part VIII, line 12, but not of</li> <li>Investment expenses not included on Form 990, Part VIII, line</li> </ul>		a   11,715		
			4	
b Other (Describe in Part XIII.) c Add lines 4a and 4b		-	4c	11,715
<ul><li>c Add lines 4a and 4b</li><li>5 Total revenue. Add lines 3 and 4c. (This must equal Form 9</li></ul>			5	11,736,051
Part XII   Reconciliation of Expenses per Audited				
Complete if the organization answered "Yes" on Fo				
Total expenses and losses per audited financial statements			1	10,917,141
2 Amounts included on line 1 but not on Form 990, Part IX, li			-	
a Donated services and use of facilities	ı	a   116,800		
<b>b</b> Prior year adjustments		<del>-  </del>		
c Other losses		-		
d Other (Describe in Part XIII.)	·····	C 0 4 4		
e Add lines 2a through 2d			2e	123,644
3 Subtract line 2e from line 1			3	10,793,497
4 Amounts included on Form 990, Part IX, line 25, but not on				
a Investment expenses not included on Form 990, Part VIII, I	1	a   11,715		
b Other (Describe in Part XIII.)	The state of the s		Ť	
		-	4c	11,715
c Add lines 4a and 4b  5 Total expenses. Add lines 3 and 4c. (This must equal Form				10,805,212
Part XIII Supplemental Information.	000, r are i, iii ic ro.j			1 -0 / 0 0 0 /
Provide the descriptions required for Part II, lines 3, 5, and 9; Par	t III_lines 1a and 4: Part IV_lir	nes 1h and 2h: Part V line	4· Par	t X line 2: Part XI
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this			, T, T al	th, iiio 2, i aithi,
intel 24 and 15, and 1 are an, intel 24 and 15.7 less complete and	part to provide any additions	a in orritation.		
PART X, LINE 2:				
WASHINGTON YU YING BELIEVES THAT	IT HAS APPROPR	LIATE SUPPORT	FOR	ANY TAX
DOGETHEONG HAVEN AND AG GUGU DO		, imageday in m	3 3 Z T	OGTETONG
POSITIONS TAKEN, AND AS SUCH, DO	ES NOT HAVE ANY	UNCERTAIN TA	AX P	OSITIONS
THAT ARE MATERIAL TO THE FINANCI.	ат спапритатис с	ם דווסה הגווה מי	TT 75 T 7	re an eeeeco
THAT ARE MATERIAL TO THE FINANCI.	AL STATEMENTS C	OK THAT WOULD	пач	E AN EFFECT
ON ITS TAX-EXEMPT STATUS. THERE	ADE NO TINDECOCK	ודיקבר האי פבאו	PPTT	IC OD
ON 115 TAX-EXEMPT STATUS. THERE	ARE NO UNKECOGN	ITAED IAA BENI	CPII	D OK
LIABILITIES THAT NEED TO BE RECO	RDED			
HINDIDITIES THAT NEED TO BE RECO	KDHD•			
PART XI, LINE 2D - OTHER ADJUSTM	ENTS:			
,				
FUNDRAISING EXPENSES				6,844
PART XII, LINE 2D - OTHER ADJUST	MENTS:			
		<u> </u>		
FUNDRAISING EXPENSES				6,844

# WASHINGTON YU YING PUBLIC CHARTER

Schedule D (Form 990) 2019 SCHOOL	20-4464054 Page 5
Schedule D (Form 990) 2019 SCHOOL  Part XIII   Supplemental Information (continued)	<u> </u>
- Cappionena momana (commos)	

#### **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

Open to Public Inspection

Name of the organization WASHINGTON YU YING PUBLIC CHARTER SCHOOL

Employer identification number 20-4464054

Pa	rt I			
			YES	NO
1	Does the examination have a regially pendiceriminatory policy toward students by statement in its charter, bylance		1.20	1.4
•	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?	4	x	
		1		
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			2
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2		4
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.			١,
	If you need more space, use Part II THE SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS OPERATING UNDER	3		2
	A CONTRACT WITH THE DC GOVERNMENT REVENUE PROCEDURE 75-50			
	DOES NOT APPLY TO PUBLIC CHARTER SCHOOLS.			
ŀ	Does the organization maintain the following?		77	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	<u> </u>
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	<u> </u>	2
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	X	L
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
-	If you arewored "No" to any of the above please explain. If you need more space, use Part II			
-	If you answered "No" to any of the above, please explain. If you need more space, use Part II.  REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.			
	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER			
5	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER SCHOOLS.  Does the organization discriminate by race in any way with respect to:	5a		2
i a	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a 5b		2
a b	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges?  Admissions policies?			2
a b c	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff?	5b		
a b c d	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?	5b 5c 5d		2
a b c d e	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	5b 5c		2
a b c d e f	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities?	5b 5c 5d 5e 5f		2
a b c d e f g	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g		2 2 2
5 a b c d e f	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER  SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities?	5b 5c 5d 5e 5f		
a b c d e f g h	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g	X	
a b c d e f g h	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	X	2 2 2
a b c d e f g h	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	X	
a b c d e f g h	REVENUE PROCEDURE 75 - 50 DOES NOT APPLY TO PUBLIC CHARTER SCHOOLS.  Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.  Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h	X	

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

Schedule E (Form 990 or 990-EZ) 2019

Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.  Also provide any other additional information.
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:
THE SCHOOL RECEIVES GOVERNMENT FINANCIAL ASSISTANCE FROM THE DISTRICT OF
COLUMBIA, DEPARTMENT OF EDUCATION FOR THE TITLE II, FEDERAL DEPARTMENT OF
AGRICULTURE SCHOOL LUNCH PROGRAM, IDEA GRANTS AND FEDERAL CONGRESSIONAL
APPROPRIATIONS.
LINE 7 - EXPLANATION OF RACIAL NONDISCRIMINATION COMPLIANCE:
THE SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS OPERATING UNDER A CONTRACT
WITH THE DC GOVERNMENT REVENUE PROCEDURE 75-50 DOES NOT APPLY TO PUBLIC
CHARTER SCHOOLS.

#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization WASHING SCHOOL	TON YU YING PUBLIC	CH	ART	ER		Employer ide 20 – 4464	ntification number 054
Part I Fundraising Activities required to complete this par	Complete if the organization answe	ered "Y	'es" oı	n Form 990, Part IV,	line 1	7. Form 990-E2	I filers are not
Indicate whether the organization rais     X Mail solicitations     X Internet and email solicitations     Phone solicitations     X In-person solicitations     X In-person solicitations	sed funds through any of the following and solicitates and solicitates and solicitates are solicitated as a solicitate and solicitates are solicitated as a solicitated and solicitated as a solicitated and solicitated as a solicitated as	tion of tion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have con contribu	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total  3 List all states in which the organization or licensing.	on is registered or licensed to solicit o		outions	S or has been notified	d it is	exempt from re	<u> </u> egistration
DC							

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

Schedule G (Form 990 or 990-EZ) 2019

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b, List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro			<u> </u>	ts greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			GALA/AUCTION			col. <b>(c)</b> )
<u>e</u>			(event type)	(event type)	(total number)	
Revenue						
Zev	1	Gross receipts	91,398.			91,398.
_			60 055			60 055
	2	Less: Contributions	60,957.			60,957.
			20 441			20 441
	3	Gross income (line 1 minus line 2)	30,441.			30,441.
	١.					
	4	Cash prizes				
	_ ا	Namanah minan	31,631.			31,631.
S	5	Noncash prizes	31,031.			31,031.
Direct Expenses	ء ا	Rent/facility costs				
xbe	ľ	nemiziacility costs				
H H	7	Food and beverages				
ji ec	l '	1 000 and beverages				
	8	Entertainment	300.			300.
	9	Other direct expenses	2,119.			2,119.
	10				•	34,050.
		Net income summary. Subtract line 10 from li	( )			-3,609.
Pa	rt l					
		\$15,000 on Form 990-EZ, line 6a.				
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) birigo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Seve						
<u> </u>	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses						
χ	3	Noncash prizes				
ct E						
Dire	4	Rent/facility costs				
	l _	011 15 1				
	5	Other direct expenses	V 0/	W 0/	W 0/	
	٦	Valuntaar lahar	Yes%	Yes %	Yes %	
	ľ	Volunteer labor	∟∟ No	L NO	L NO	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	l	bireet expense summary. Add lines 2 timough	10 II1 COIGITII1 (a)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		•	
	_	The second community is a second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community in the second community in the second community is a second community i				
9	En	ter the state(s) in which the organization condu	ucts gaming activities:			
		the organization licensed to conduct gaming a	_	states?		Yes No
		No," explain:				
		· · · · ·				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or to	erminated during the tax	year?	Yes No
b	lf "	Yes," explain:				
b	If "	Yes," explain:				

932082 09-11-19 Schedule G (Form 990 or 990-EZ) 2019

#### WASHINGTON YU YING PUBLIC CHARTER

Sch	edule G (Form 990 or 990-EZ) 2019 SCHOOL	20-44	64	054	Page 3
11	Does the organization conduct gaming activities with nonmembers?			Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?	[	,	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:				
	The organization's facility		13a		%
	An outside facility	····	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record	· · · · · · · · · · · · · · · · · · ·			
•					
	Name				
	Address >				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[	,	Yes	□ No
h	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	nt			
~	of gaming revenue retained by the third party > \$				
	: If "Yes," enter name and address of the third party:				
	in Tes, entername and address of the tilld party.				
	Name				
	Name				
	Address >				
	Address				
16	Gaming manager information:				
10	Carning manager information.				
	Name				
	- Name -				
	Gaming manager compensation ▶ \$				
	daming manager compensation				
	Description of carvices provided				
	Description of services provided				
	Director/off and Director Director of the description of the descripti				
	Director/officer Employee Independent contractor				
47	Manual above all ability all and a				
	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	Г	┤,		<b></b>
	retain the state gaming license?	L		Yes	└── No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	n the			
D-	organization's own exempt activities during the tax year > \$				
Ра	<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Part	III, lir	ies 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				

# WASHINGTON YU YING PUBLIC CHARTER

Schedule G	i (Form 990 or 990-EZ)	SCHOOL		20-4464054	Page 4
Part IV	i (Form 990 or 990-EZ) Supplemental Infor	mation (continued)			
1 art IV	Supplemental inte	Traction (continued)			
•					
_					

### **SCHEDULE J** (Form 990)

**Compensation Information** 

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

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

► Attach to Form 990.

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

► Go to www.irs.gov/Form990 for instructions and the latest information. WASHINGTON YU YING PUBLIC CHARTER SCHOOL

Employer identification number 20-4464054

OMB No. 1545-0047

Pa	art i   Questions Regarding Compensation			
	•		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	··		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?			Х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	.		
	The totally of lines the percent and provide the applicable amounts to each term in a arm.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	·· —		Х
-	If "Yes" on line 5a or 5b, describe in Part III.	5.5		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
·	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?			X
J	If "Yes" on line 6a or 6b, describe in Part III.	05		
7				
•	not described on lines 5 and 6? If "Yes," describe in Part III	7	х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		Ė	
9	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			Ë
9	ii 100 on iino o, ala tho organization albo follow the febattable probathiption procedure described in			

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

Schedule J (Form 990) 2019

Regulations section 53.4958-6(c)?

## WASHINGTON YU YING PUBLIC CHARTER

Schedule J (Form 990) 2019

SCHOOL

20-4464054

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

Page 2

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

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

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	ple	(E) Total of columns	<u>L</u>
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benetits	(a)-(i)(a)	In column (B) reported as deferred on prior Form 990
(1) MAQUITA ALEXANDER	Ξ	130,495.	0	8,727.	4,364.	9,521.	153,107.	0
EXECUTIVE DIRECTOR	<b>E</b>		0	0	0	• 0	0	0
	Ξ							
	<u>ii</u>							
	Ξ							
	⊞							
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	(ii)							
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00000				37			Schedu	Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

20-4464054

Page 3

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Part III Supplemental Information

PART I, LINE 7:	
BONUSES ARE BASED ON PERFORMANCE.	
Schedule J (Form 990) 2019	2019

SCHEDULEK

Schedule K (Form 990) 2019 Yes No Employer identification number (i) Pooled financing × Open to Public Inspection OMB No. 1545-0047 ŝ 2019 (g) Defeased (h) On behalf 20-4464054 ž × Δ of issuer Yes Yes ŝ × Yes 2 (f) Description of purpose O Yes REFINANCE Supplemental Information on Tax-Exempt Bonds

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

Shoto www.irs.gov/Form990 for instructions and the latest information. 2 13515000.TO B Yes (e) Issue price 14,642 3,714,920 9,785,438 13,515,000 × ŝ 2015 10/01/14 ⋖ (d) Date issued Yes × × × WASHINGTON YU YING PUBLIC CHARTER (c) CUSIP# NONE Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, Does the organization maintain adequate books and records to support the For Paperwork Reduction Act Notice, see the Instructions for Form 990. Were the bonds issued as part of a refunding issue of taxable bonds (or, if 53-6001131 (b) Issuer EIN ► Attach to Form 990. issued prior to 2018, an advance refunding issue)? if issued prior to 2018, a current refunding issue)? Has the final allocation of proceeds been made? Working capital expenditures from proceeds COLUMBIA Capital expenditures from proceeds SCHOOL Credit enhancement from proceeds Amount of bonds legally defeased Capitalized interest from proceeds Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion final allocation of proceeds? (a) Issuer name Amount of bonds retired Other unspent proceeds Total proceeds of issue Other spent proceeds ОF Name of the organization **Bond Issues** Proceeds Department of the Treasury Internal Revenue Service A DISTRICT (Form 990) Partl Part II ¥ 9 Ŋ Q 4 ω 6 우 B O ო 42 13 15 16 ₽ 4 4

# WASHINGTON YU YING PUBLIC CHARTER SCHOOL

Page 2

20-4464054

Schedule K (Form 990) 2019

ŝ Ω Yes ဍ O Yes ŝ Yes 2 ⋈ × × Yes counsel to review any management or service contracts relating to the financed property? b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside c Are there any research agreements that may result in private business use of Are there any lease arrangements that may result in private business use of Are there any management or service contracts that may result in private Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? business use of bond-financed property? Part III Private Business Use bond-financed property? 3a ผ

unrelated trade or business activity carried on by your organization, another					
section 501(c)(3) organization, or a state or local government	%	%	%		%
6 Total of lines 4 and 5	%	%	%		%
7 Does the bond issue meet the private security or payment test?	×				
8a Has there been a sale or disposition of any of the bond-financed property to a non-					
governmental person other than a 501(c)(3) organization since the bonds were issued?	X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed					
of	%	%	%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections					
1.141-12 and 1.145-2?					
9 Has the organization established written procedures to ensure that all nonqualified					
bonds of the issue are remediated in accordance with the requirements under					
Regulations sections 1.141-12 and 1.145-2?	X				
Part IV Arbitrage					
	A	В	0	Q	

%

%

%

%

×

d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

bond-financed property?

counsel to review any research agreements relating to the financed property?

Enter the percentage of financed property used in a private business use by

entities other than a section 501(c)(3) organization or a state or local government ...... Enter the percentage of financed property used in a private business use as a result of

2

4

		F	1		3	3	,		1
	1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	oN	Yes	No	Yes	oN	Yes	Ň
	Penalty in Lieu of Arbitrage Rebate?		X						
	2 If "No" to line 1, did the following apply?								
ı	a Rebate not due yet?		X						
l	<b>b</b> Exception to rebate?		X						
	c No rebate due?	X							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
١	performed								

Schedule K (Form 990) 2019

Page 3

20-4464054 Schedule K (Form 990) 2019

Part IV Arbitrage (continued)	-							
	Α <sup>1</sup>	_	B		O		۵	
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		×						
<b>b</b> Name of provider								
<b>c</b> Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		×						
7 Has the organization established written procedures to monitor the requirements of section 148?	×							
Part V Procedures To Undertake Corrective Action								
	<b>A</b>		B		0		٥	
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?		×						
Supplemental Information. Provide additional information for I	s on Schedule	K. See instr	uctions					
M 990, SCHEDULE K, PART IV, LINE 2C:								
BATE LIABILITY IS DUE BASE		COMPUTATION	щ	MED				
OBER 1ST, 2019. THE NEXT	CALCULATION		OF THE					
BONDS IS OCTOBER 1ST, 2024.								
07 07 07 07 07 07 07						450	Adula K (Ear	m 000) 2010

### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

### **Transactions With Interested Persons**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open To Public Inspection

WASHINGTON YU YING PUBLIC CHARTER Employer identification number Name of the organization SCHOOL 20-4464054 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (b) Relationship (d) Loan to or (i) Written (a) Name of (c) Purpose (e) Original (f) Balance due (g) In by board or from the interested person with organization of loan principal amount default? agreement? committee? organization? To From Yes No Yes No Yes No Total **\$** Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (e) Purpose of (c) Amount of (d) Type of (b) Relationship between assistance assistance assistance interested person and the organization

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

Schedule L (Form 990 or 990-EZ) 2019

	ered "Yes" on Form 990, Part IV, line 28a, 28		(d) December 1	(e) Sha	rina of
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz reven	ation's ues?
MAQUITA ALEXANDER	EXECUTIVE DIRECTOR	23 637	MAQUITA ALE	Yes	No X
MAQUITA ALEXANDER	EXECUTIVE DIRECTOR	43,037	MAQUITA ALE		Δ
Part V Supplemental Information Provide additional information for r	• esponses to questions on Schedule L (see i	instructions).			
SCH L, PART IV, BUSINESS	TRANSACTIONS INVOLVI	NG TNTERES	TED PERSONS:		
(A) NAME OF PERSON: MAQU	UITA ALEXANDER				
(D) DESCRIPTION OF TRANS	ACTION: MAQUITA ALEXA	NDER'S MOTE	HER IS AN		
EMPLOYEE OF WYY.					
mindered of wire					

### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047 19

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information. WASHINGTON YU YING PUBLIC CHARTER

Open to Public Inspection

Employer identification number

	SCHOOL					20-44	64	054	
Par	t I Types of Property				•				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	no	(d) Method of dete oncash contribution		0	s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods	X		31,631.	FMV				
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts			4.0					
25	Other ( FEDERAL COMMO )	X	1	49.					
26	Other ()								
27	Other ()								
28	Other ( )								
29	Number of Forms 8283 received by the organiz			II					
	for which the organization completed Form 828	83, Part IV,	Donee Acknowled	gement 29			- 1	1	
				=				Yes	No
30a	During the year, did the organization receive by	-			-				
	must hold for at least three years from the date								X
	exempt purposes for the entire holding period?	′				·····	30a		
	If "Yes," describe the arrangement in Part II.	ooliov the et	aguiraa tha wayia	of any popularity and and and	ıtion - O		24		y
31	Does the organization have a gift acceptance p		•	•			31	$\dashv$	X
32a	Does the organization hire or use third parties of					,	200		Х
L	contributions?						32a		Λ
	If "Yes," describe in Part II.	(-) -	rotupo ef musur - :-	u for which column (a) is also	ماده عا				
33	If the organization didn't report an amount in c	olurrin (C) fo	r a type of propert	y for which column (a) is che	скеа,				
П Ц Л	describe in Part II.  For Paperwork Reduction Act Notice, see	the lectric	tions for Earm 00	0		Schedule M (	Eorn	, 000	2010
LHA	I OI Papel WOLK NEUUCIIOH ACLINOLICE, SEE	mie monuc	LIUIIS IUI FUIIII 99	v.		Juliedule IVI (	I OI II	1 22U)	<b>2013</b>

932141 09-27-19

is reporting in Part I, column (b), the number of contributions, the number of items received, or this part for any additional information.	r a combination of both. Also complete
SCHEDULE M, PART I, COLUMN (B):	
THE SCHOOL REPORTS NUMBER OF CONTRIBUTIONS.	
932142 09-27-19	Schedule M (Form 990) 2019

### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

OMB No. 1545-0047

Name of the organization

WASHINGTON YU YING PUBLIC CHARTER SCHOOL

**Employer identification number** 20-4464054

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

SUMMER BREAK, YU-YING OFFERED A 3-WEEK VIRTUAL INTERSESSION TO MOST OF ITS STUDENTS, ESPECIALLY THOSE WHO BENEFITED FROM ADDITIONAL ACADEMIC SUPPORT.

FORM 990, PART VI, SECTION A, LINE 8B:

WASHINGTON YU YING PUBLIC CHARTER SCHOOL DOES NOT HAVE A COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

THE FINANCE COMMITTEE REVIEWS THE FORM 990 AND THEN FORWARDS TO THE BOARD TRUSTEES FOR REVIEW AND APPROVAL PRIOR TO FILING.

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

NEW TRUSTEES HAVE TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE UPON JOINING THE BOARD. IN ADDITION, ALL TRUSTEES, THE COO, AND THE EXECUTIVE DIRECTOR ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY. THE COMPLETED QUESTIONNAIRES ARE THEN REVIEWED BY THE SECRETARY AND THE EXECUTIVE DIRECTOR TO DETERMINE IF ANY FURTHER ACTION IS NEEDED. WHEN ACTUAL OR APPARENT CONFLICTS OF INTEREST EXIST, SUCH PERSON WILL BE ASKED TO RECUSE HIM/HERSELF FROM PARTICIPATING IN THE DISCUSSION AND DECISION OF THE TRANSACTION.

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

THE BOARD OF TRUSTEES EVALUATE THE EXECUTIVE DIRECTOR'S PERFORMANCE

ANNUALLY AND SET THE SALARY INCREASE. ACCORDINGLY, COMPARABLE SALARY DATA

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

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization WASHINGTON YU YING PUBLIC CHARTER SCHOOL	Employer identification number 20-4464054
FOR A SIMILAR POSITION IN THE DISTRICT OF COLUMBIA IS CON	SIDERED IN THE
COMPENSATION ARRANGEMENT DECISION. THE BOARD CHAIR THEN D	ISCUSSES THE
PERFORMANCE EVALUATION AND COMPENSATION ARRANGEMENT DECIS	ION WITH THE
EXECUTIVE DIRECTOR. THE LAST COMPENSATION REVIEW FOR THE	EXECUTIVE DIRECTOR
WAS DONE IN JULY 2020 AND THE CHIEF OPERATING OFFICER'S L	AST COMPENSATION
REVIEW WAS CONDUCTED IN FEBRUARY 2020. THE EXECUTIVE DIRE	CTOR USED A
COMPENSATION SURVEY (FROM EDFUEL) TO HELP SET THE COO SAL	ARY.
FORM 990, PART VI, SECTION C, LINE 19:	
THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND	FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST, THE	FORM 990 IS
AVAILABLE ON THE WEBSITE GUIDESTAR.ORG AND DCPCSB.ORG.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
ROUNDING ADJUSTMENT	3.
FORM 990, PART XII, LINE AFTER 2C:	
THIS PROCEDURE HAS NOT CHANGED FROM THE PRIOR YEAR.	

**SCHEDULE R** (Form 990)

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

Employer identification number  $20-4464054\,$ 

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

WASHINGTON YU YING PUBLIC CHARTER

SCHOOL

Name of the organization Department of the Treasury Internal Revenue Service

Part I

Go to www.irs.gov/Form990 for instructions and the latest information. Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

(g) Section 512(b)(13) ٥ × controlled entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Direct controlling CHARTER SCHOOL WASHINGTON YU entity YING PUBLIC End-of-year assets **e** status (if section Public charity 501(c)(3)) Total income Exempt Code চ section ਉ DISTRICT OF COLUMBIA PENDING Legal domicile (state or Legal domicile (state or foreign country) foreign country) DEVELOPING/SELLING CHINESE EDUCATION MATERIALS AND Primary activity Primary activity 9 SERVICES. THE YU YING CENTER FOR GLOBAL CITIZENSHIP Name, address, and EIN (if applicable) 30-1107277, 220 TAYLOR STREET NE, Name, address, and EIN of related organization of disregarded entity 20017 WASHINGTON, DC Part II

Schedule R (Form 990) 2019

## WASHINGTON YU YING PUBLIC CHARTER

SCHOOL

Schedule R (Form 990) 2019

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

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20-4464054

(j) (k) General or Percentage managing ownership			re related	(i) Section 512(b)(13) controlled entity?			Schedule R (Form 990) 2019
			one or mo	(h) Percentage ownership			B (Form
(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			, because it had o	(g) Share of Per end-of-year ow assets			Schedule
rrionate ions?			V, line 34	tal			$\frac{1}{1}$
(g) (h. Share of Bispropt assets Yes			ırm 990, Part I	(f) Share of total income			
			d "Yes" on Fo	(e) Type of entity (C corp, S corp, or trust)			
(f) Share of total income			answered	lling Ty			-
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			he organizatior:	(d) Direct controlling entity			
Predomi (related excluded f section			mplete if	(c) Legal domicile (state or foreign country)			49
(d) Direct controlling entity			<b>oration or Trust.</b> Coyear.	(b) Primary activity			
Legal domicile (state or foreign country)			is a Corpo	Prim			
(b) Primary activity			ganizations Taxable a	· <u>Z</u> c			-
(a) Name, address, and EIN of related organization			Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	(a) Name, address, and EIN of related organization			932162 09-10-19

Schedule R (Form 990) 2019 SCHOOL

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				_	Yes	ŝ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	lated organizations listed	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			<b>1</b> a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		×
S				2		×
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan guarantees by related organization(s)				1e		×
f Dividends from related organization(s)				#		×
g Sale of assets to related organization(s)				1g		×
h Purchase of assets from related organization(s)				4		×
i Exchange of assets with related organization(s)				÷		×
_				į.		×
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)				<b>*</b>		×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			<b>1</b>		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			1n	×	
o Sharing of paid employees with related organization(s)				10		×
<b>p</b> Reimbursement paid to related organization(s) for expenses				10		×
				- pt		×
						Þ
r Other transfer of cash or property to related organization(s)				<b>=</b>	+	ا ۵
s Other transfer of cash or property from related organization(s)				1s	$\dashv$	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete th	iis line, including covered	relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	( <b>d)</b> Method of determining amount involved	volved		
(1)						
(2)						
(3)						
(4)						
(5)						
(9)						
932163 09-10-19	20		Schedule R (Form 990) 2019	R (Form	990) 2	2019

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SCHOOL Schedule R (Form 990) 2019 Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<u>8</u> <u>a</u>			 		19
(k) ercenta, wnersh					90) 20
No Per?					orm 9
General or managing partner?					R (F
Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? (Form 1065) Yes No					Schedule R (Form 990) 2019
(h) Disproportionate allocations? Yes No					
Diss tit alloo					
(g) Share of end-of-year assets					
Share of total income					
(e) Are all partners sec. 501(c)(3) Ves No					
ider State					
Predominant income (related, unrelated, excluded from tax under sections 512-514)					
cile aign e					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(b) mary a					
Prir					
<del>                                     </del>	<del>                                     </del>	<del></del>		<del>, , ,   , , , ,  </del>	
(a) Name, address, and EIN of entity					
kame,					
				$  \   \   \   \   \   \   \   \  $	

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