			** PUBLIC DISCLOSURE COPY *	*						
	Ω	00	Return of Organization Exempt From	Income Tax	OMB No. 1545-0047					
Forr	n <b>Y</b>	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (		2018					
Depa	rtment o	of the Treasury	Do not enter social security numbers on this form as it may	ay be made public.	Open to Public					
		nue Service	Go to www.irs.gov/Form990 for instructions and the lat		Inspection					
<u>A</u> F	A For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending JUN 30, 2019									
B c a	heck if			D Employer identificat	tion number					
	 ⊣Addre	EAST	HARLEM SCHOLARS ACADEMY CHARTER							
	13450									
	chang] Initial		usiness as	uite E Telephone number	15450					
	_return ]Final	1573	and street (or P.O. box if mail is not delivered to street address) Room/st MADISON AVENUE		48-2518					
L	⊥return termir ated		own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	23,095,454.					
	Amen return	ded NTETAT	YORK, NY 10029	H(a) Is this a group retu						
	Applic tion		nd address of principal officer: JEFFREY GINSBURG	for subordinates?						
L	pendi		AS C ABOVE	H(b) Are all subordinates inclu						
IT	ax-ex	empt status:		527 If "No," attach a lis						
			EASTHARLEMSCHOLARS.ORG	H(c) Group exemption r						
κF	orm of	f organization:	X Corporation	'ear of formation: 2010 M S						
Pa	nrt I	Summary								
	1	Briefly describ	e the organization's mission or most significant activities: EAST HAR	LEM SCHOLARS AC	ADEMY					
Governance			SCHOOL PROVIDES A HIGH-PERFORMING, ST							
rna	2	Check this bo	$\mathbf{x} \mathrel{\blacktriangleright}$ if the organization discontinued its operations or disposed of m	ore than 25% of its net asset	S.					
ove	3	Number of vo	ing members of the governing body (Part VI, line 1a)		9					
Ğ	4	Number of inc	ependent voting members of the governing body (Part VI, line 1b)		9					
es 8	5	Total number	of individuals employed in calendar year 2018 (Part V, line 2a)		243					
vitio	6	Total number	of volunteers (estimate if necessary)		9					
Activities &	7 a	Total unrelate	d business revenue from Part VIII, column (C), line 12		0.					
_	b	Net unrelated	business taxable income from Form 990-T, line 38		0.					
				Prior Year	Current Year					
e			and grants (Part VIII, line 1h)	4,224,354.	3,137,974.					
ent			ce revenue (Part VIII, line 2g)	16,146,001.	19,947,334.					
Revenue			come (Part VIII, column (A), lines 3, 4, and 7d)	58.	<u>439.</u> 9,707.					
_			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,370,413.	23,095,454.					
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	20,370,413.	23,095,454.					
			nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.					
			to or for members (Part IX, column (A), line 4)	12,285,967.	14,445,847.					
ses				0.	<u> </u>					
en;			undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) ► 740,428.	0.						
Expenses			es (Part IX, column (A), lines 11a-11d, 11f-24e)	7,540,328.	8,555,254.					
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)	19,826,295.	23,001,101.					
			expenses. Subtract line 18 from line 12	544,118.	94,353.					
es l				Beginning of Current Year	End of Year					
Net Assets or Fund Balances	20	Total assets (F	Part X, line 16)	3,112,099.	3,401,086.					
Ass	21		(Part X, line 26)	2,236,025.	2,430,659.					
Net	22		fund balances. Subtract line 21 from line 20	876,074.	970,427.					
	rt II	Signature								
Unde	er pena	alties of perjury,	I declare that I have examined this return, including accompanying schedules and stat	tements, and to the best of my kr	nowledge and belief, it is					
			Declaration of preparer (other than officer) is based on all information of which prep		· · ·					

Sign	Signature of officer	Date
Here	JEFFREY GINSBURG, EXECUTIVE DIRECTOR	
	Type or print name and title	
	Print/Type preparer's name Preparer's signature	Date Check PTIN
Paid	GARRETT M. HIGGINS GARRETT M. HIGGINS	07/15/20 self-employed P00543209
Preparer	Firm's name FKF O'CONNOR DAVIES, LLP	Firm's EIN ► 27-1728945
Use Only	Firm's address 🖕 665 FIFTH AVENUE	
	NEW YORK, NY 10022	Phone no. $212 - 286 - 2600$
May the I	RS discuss this return with the preparer shown above? (see instructions)	X Yes No
832001 12-3	1-18 LHA For Panerwork Reduction Act Notice see the separate instructions	Form <b>990</b> (2018)

 12-31-18
 LHA For Paperwork Reduction Act Notice, see the separate instructions.
 Form 990 (2018)

 SEE
 SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION
 Form 990 (2018)

orm	a a a	M SCHOLARS ACADEMY		13450 Page
		Accomplishments		5
	Check if Schedule O contains a respons	e or note to any line in this Part III		X
1	Briefly describe the organization's mission:			
	EAST HARLEM SCHOLARS AC.	ADEMIES ARE PUBLIC	CHARTER SCHOOLS THAT	PREPARE
	STUDENTS WITH THE SKILL	S, STRENGTH OF CHA	RACTER, AND EMOTIONAL	
	WELL-BEING TO EXCEL ACA	DEMICALLY, LEAD IN	I THEIR COMMUNITIES, A	ND
	REALIZE THEIR BEST POSS	IBLE SELVES. SCHOL	ARS ACADEMIES ARE FOU	NDED BY
2	Did the organization undertake any significant	program services during the year w	which were not listed on the	
				Yes X No
	• • • • • • • • • • • • • • • • • • • •			
Part III Statement of Program Service Accomplishments         IX           Creater Statewide contains a regometer on the bar up then in the Bart III         IX           Party describe the organization amission:         IX           BAST HARLEM SCHOLARS ACADEMIES ARE PUBLIC CHARTER SCHOOLS THAT PREPARE STUDENTS WITH THE SKILLS, STRENOTH OP CHARACTER, AND EMOTIONAL WELL-DEIN TO EXCEL ACADEMICALLY, LEAD IN THEIR COMMUNITIES, AND REALIZE THEIR BEST POSSIBLE SELVES. SCHOLARS ACADEMIES ARE FOUNDED BY           2         Dot the organization indexed any significant program services during the year which were not listed on the prior form 900 or 000627         IV res. (X) No           11 'Yes, 'Canobia the organization cases conducting, or mate significant dranges in how it conducts, any program services?         IVes (X) No           12 'Ot the organization cases conducting, or mate significant dranges in how it conducts, any program services?         IVes (X) No           14 'Yes, 'Canobia the organization cases, and sequence origined to report of grants and allocations to others, the total sequences, and reverse, at ansaured to approximation's program service sconducting, or mate significant dranges in how it conducts?         IVes (X) No           4 'Yes, 'Canobia the organization cases, and reverse and allocation to others, the total seconders are organized or products?         IVes (X) No           11 'Yes, 'Canobia the organization cases conducting, and reverse and allocations to others, the total seconders are organized organized organized and allocations to total seconds. The SKILLS, SKILLS and SKILLS CONCLES NEWSE ONLY SECOLS AND ANTI-RATERY SECONDS AND AND REALIZE THATELES CON				
	-		o largest program services, as measured b	v oxpopsos
			grants and anocations to others, the total	expenses, and
			) (~ . <b>1</b>	0 017 331
				<u> </u>
		•		
		-	· · · · ·	
		•		FOUNDED
			-	
		SS, SELF-ADVOCACY,	COMMITMEN TO EQUITY,	AND
	INTELLECTUAL CURIOSITY.			
	WHEN CHILDREN ENGAGE IN	HIGHER-ORDER, CRI	TICAL THINKING. TO TH	RIVE IN
4b	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	
4c	(Code:) (Expenses \$	including grants of \$	) (Revenue \$	
		2		
		U.)		
		,		,
	(Expenses \$ includ		) (Revenue \$	)
	(Expenses \$ includ		) (Revenue \$	)
4e	(Expenses \$ includ Total program service expenses ►	20,263,144.		) Form <b>990</b> (2018
le	(Expenses \$ includ	20,263,144.		) Form <b>990</b> (201

SCHOOL

Part IV Checklist of Required Schedules

Form 990 (2018)

			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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			x
	endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		
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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		110	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	<u>11a</u>	- 23	
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
~	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
۵	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			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	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,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	000	X
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	<u>990 (2018)</u> SCHOOL 27-4713	<u>3450</u>	P	age <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			
			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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes." <i>complete</i>			
		23	х	
04-	Schedule J	23	Δ	<u> </u>
24a	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			77
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	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, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."	1		
	complete Schedule L. Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20				
-	instructions for applicable filing thresholds, conditions, and exceptions):	00-		х
	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
01	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?	- 57		<u> </u>
30	• · · · · ·	38	х	
Par	Note. All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	30	Δ	L
	Check if Schedule O contains a response or note to any line in this Part V			
			X	
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 16	-		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	0000	<u> </u>
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SCHOOL

Form 990 (2018)

Par	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 2a 243											
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X									
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			x								
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b										
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a											
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X								
b	<b>b</b> If "Yes," enter the name of the foreign country:											
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).											
5a												
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X								
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit											
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		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								
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b										
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required											
	to file Form 8282?	7c		X								
d												
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 7h										
-	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?											
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the											
_	sponsoring organization have excess business holdings at any time during the year?	8										
9	Sponsoring organizations maintaining donor advised funds.											
a	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:											
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-										
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-										
11	Section 501(c)(12) organizations. Enter:											
	Gross income from members or shareholders	-										
α	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)											
10-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a										
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1										
	Is the organization licensed to issue qualified health plans in more than one state?	13a										
u	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	100										
h	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											
c	Enter the amount of reserves on hand											
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X								
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or											
	excess parachute payment(s) during the year?	15		x								
	If "Yes," see instructions and file Form 4720, Schedule N.											
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x								
	If "Yes," complete Form 4720, Schedule O.											

Form **990** (2018)

832005 12-31-18

Form	<u>990 (</u> 2018) SCHOOL 27-471			age 6									
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	a "No"	respon	se									
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		•										
	Check if Schedule O contains a response or note to any line in this Part VI			X									
Sec	tion A. Governing Body and Management												
			Yes	No									
1a	Enter the number of voting members of the governing body at the end of the tax year	9											
	If there are material differences in voting rights among members of the governing body, or if the governing												
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.												
b		9											
2													
	officer, director, trustee, or key employee?												
3													
-	of officers, directors, or trustees, or key employees to a management company or other person?												
4													
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X 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	Х										
b	Each committee with authority to act on behalf of the governing body?	8b	Х										
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 in 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	1	X									
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,												
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10	)										
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?	12	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	120											
13	Did the organization have a written whistleblower policy?	13	Х										
14	Did the organization have a written document retention and destruction policy?	14	Х										
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	X										
b	Other officers or key employees of the organization	15k	X										
	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	ı	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)	8)s only	) availa	ble									
	for public inspection. Indicate how you made these available. Check all that apply.												
	Own website Another's website X Upon request Other <i>(explain in Schedule O)</i>												
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	nd finar	cial										
	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												
	KAREN HARRIS - 212-831-0650												
	2050 SECOND AVENUE, NEW YORK, NY 10029		000										
832006	5 12-31-18	For	m <b>990</b>	(2018									
	6												

EAST	HARLEM	SCHOLARS	ACADEMY	CHARTER
SCHOO	DL			

Form 990 (2018)

Part VII	Compensation of Officers,	Directors, Trustees	, Key Employees,	Highest Compensated	
	Employees, and Independe	ent 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 (Ď), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	l ge		((	C)			(D)	(E)	(F)
Name and Title	Average (do not check more than one							Reportable	Reportable	Estimated
	hours per					than o s both		compensation	compensation	amount of
	week	offi	cer ar	ıd a d	irecto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	r dire				ted		organization	(W-2/1099-MISC)	from the
	related	stee c	ruste			oensa		(W-2/1099-MISC)		organization
	organizations	al tru	onal t		ploye	e com				and related
	below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JOAN SOLOTAR	2.00	-	<u> </u>	0	×	Ξē	Ē			
CHAIR	12.00	х		x				0.	Ο.	0.
(2) DAVID WILDERMUTH	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(3) IRIS CHEN	1.00									
SECRETARY		Х		Х				0.	0.	0.
(4) BRIAN GAVIN	1.00									
TREASURER	2.00	Х		Х				0.	0.	0.
(5) HOPE KNIGHT	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(6) SASKIA LEVY THOMPSON	1.00									-
BOARD MEMBER	1.00	Х						0.	0.	0.
(7) LILI LYNTON	1.00								•	•
BOARD MEMBER	1.00	Х	<u> </u>					0.	0.	0.
(8) CARLOS MORALES	1.00								0	0
BOARD MEMBER	1 00	Х						0.	0.	0.
(9) MARILYN SIMONS	1.00								0	•
BOARD MEMBER		Х						0.	0.	0.
(10) JEFFREY GINSBURG	20.00			x				0.		
FORMER CHAIRMAN/EXECUTIVE DIRECTOR				A				0.	250,787.	30,454.
(11) CHEYENNE BATISTA SAO-ROQUE SUPERINTENDENT	40.00			x				112 447	0.	8,354.
(12) SARAH CANEY	40.00		-	^				112,447.	0.	0,334.
DEPUTY SUPERINTENDENT	40.00			x				141,960.	0.	6,596.
(13) DESREE CABRALL-NJENGA	40.00			<u> </u>				141,900.	0.	0,390.
PRINCIPAL, SCHOLARS ELEMENTARY						x		129,101.	0.	24,966.
(14) MAUREEN YUSUF-MORALES	40.00							125,101.		21,500.
PRINCIPAL, SCHOLARS MIDDLE						x		128,829.	0.	16,293.
(15) NICHOLAS WEST	40.00									
PRINCIPAL		1				x		108,434.	0.	21,291.
(16) ELAH LAZIN, NETWORK	40.00									
DIR., CURRICULUM & INSTRUCTION						x		100,514.	0.	16,498.

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Form 990 (2018)

### 21510715 756359 1527770.000

	RLEM SCHO	DLA	RS	A	CA	DE	M	Y CHARTER	27-4	7131	50	П	age <b>8</b>
Form 990 (2018) SCHOOL Part VII Section A. Officers, Directors, Tru	istees. Kev Emi	nlov	<b>665</b>	and	1 Hi	ahes	t C	compensated Employee		/134	50	F	aye •
(A) Name and title	(B) Average hours per week	(B) (C) Average hours per (do not check more than one box, unless person is both an						(D) Reportable compensation from	(Continued) (E) Reportable compensatio from related	ion an		(F) imate ount other	
	(list any hours for related organizations below line)	In dividual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	comp fro orga	ensa om th nizat relat	e ion ed
 1b Sub-total								721,285.	250,78	37	124	. 1	52
c Total from continuation sheets to Part	/II, Section A							0.	250,78	0.	124		0.
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but compensation from the organization</li> </ul>	not limited to th						o re				121	·, -	<u>52.</u> 6
										Г		Yes	No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for				-	•			•		[	3		Х
4 For any individual listed on line 1a, is the	sum of reportab	le co	mpe	ensa	tion	and	otl	her compensation from the	ne organization		-	v	
<ul><li>and related organizations greater than \$1</li><li>5 Did any person listed on line 1a receive or</li></ul>										·····  -	4	X	
rendered to the organization? <i>If "Yes," co</i>											5		Х
Section B. Independent Contractors 1 Complete this table for your five highest of	omponented inc		ndo	at or	ontre	otor	~ +	hat received more than ¢	100.000 of com	onocti	on from	~	
<ol> <li>Complete this table for your five highest of the organization. Report compensation for</li> </ol>	-								· · · ·	Jensali			
(A) Name and busines	s address							(B) Description of s	ervices	Cc	(C) mpen		n
BUTTER BEANS, INC. 41-43 39TH STREET, QUEEN	S. NY 11	10	4					MEAL PROVIDE	3		677	. 8	05.
OMNY MAINTENANCE OF NEW	YORK, 48	09		4T	H								
STREET, LONG ISLAND CITY SECURITY USA, INC.	, NY 111	01						MAINTENANCE :	SERVICES		349	, 9	94.
336 W 37TH ST # 450, NEW	YORK, N	Y	10	01	8			SECURITY SERV	VICE		187	,6	73.
MINDSHIFT TECHNOLOGIES 711 3RD AVE SUITE 205, N	EW YORK,	N	Y	10	01	7		IT SERVICE			135	, 3	57.
SCHOOL PROFESSIONALS 622 3RD AVE FLOOR 39, NE								TEMP AGENCY ;	SERVICE		129		
2 Total number of independent contractors \$100,000 of compensation from the organ	(including but n					-							
·											~	00	

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Form **990** (2018)

			2018) SCHOOI					27-4713	450 Page 9
Pa	rt V	/	Statement of Revenu	le					
			Check if Schedule O conta	ins a response	or note to any line				
						<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
ស ស	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
n G			Fundraising events						
ar A			Related organizations		685,338.				
s, G			Government grants (contributio		2,379,348.				
i Si		f	All other contributions, gifts, grants	s, and					
but			similar amounts not included above	e 1f	73,288.				
dti		g	Noncash contributions included in lines 1a	a-1f:\$					
a C		h	Total. Add lines 1a-1f		🕨	3,137,974.			
					Business Code				
e	2	а	PER PUPIL REVENUE		611710	18,506,090.	18,506,090.		
ervi			FACILITIES REVENUE		611710	1,416,644.	1,416,644.		
Program Service Revenue		С	RENTAL INCOME FROM AFFII	LIATE	532000	24,600.	24,600.		
ran Sev		d							
rog		е							
Δ.			All other program service reven			10 047 224			
			Total. Add lines 2a-2f			19,947,334.			
	3		Investment income (including d			439.			439.
	4		other similar amounts) Income from investment of tax-						
	5		Royalties	•					
	Ŭ			(i) Real	(ii) Personal				
	6	а	Gross rents	() 1104					
	-		Less: rental expenses						
			Rental income or (loss)						
					►				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory						
		b	Less: cost or other basis						
			and sales expenses						
		с	Gain or (loss)						
		d	Net gain or (loss)		►				
Other Revenue	8	а	Gross income from fundraising including \$						
eve			contributions reported on line 1	c). See					
er F			Part IV, line 18		a				
Ę			Less: direct expenses						
Ŭ			Net income or (loss) from fundr		····· •				
	9	а	Gross income from gaming act						
			Part IV, line 19						
			Less: direct expenses						
	40		Net income or (loss) from gamir						
	10	а	Gross sales of inventory, less re						
		h	and allowances Less: cost of goods sold						
			Net income or (loss) from sales						
		<u> </u>	Miscellaneous Revenue		Business Code				
	11	а	OTHER REVENUE/REFUND		900099	9,707.			9,707.
		b	· ·			, ,			, ,
		c							
			All other revenue						
			Total. Add lines 11a-11d			9,707.			
	12		Total revenue. See instructions			23,095,454.	19,947,334.	0.	10,146.
83200	9 12	-31-	18						Form <b>990</b> (2018)

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Form 990 (2018)

SCHOOL

	Part IX Statement of Functional Expenses					
Secti	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 respor	ise or note to any line in				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> 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,					
	trustees, and key employees	342,866.	326,831.	16,035.		
6	Compensation not included above, to disqualified					
	persons (as defined under section $4958(f)(1)$ ) and					
	persons described in section 4958(c)(3)(B)	11 010 000	11 000 000			
7	Other salaries and wages	11,918,293.	11,360,883.	557,410.		
8	Pension plan accruals and contributions (include	100 010	100 505			
	section 401(k) and 403(b) employer contributions)	136,617.	130,527.	6,090.		
9	Other employee benefits	926,669.		42,763.		
10	Payroll taxes	1,121,402.	1,069,647.	51,755.		
11	Fees for services (non-employees):	1 627 000				
а	Management	1,637,000.		982,200.	654,800.	
b	Legal	5,988.		5,988.		
	Accounting	70,225.		70,225.		
d	Lobbying					
e	Professional fundraising services. See Part IV, line 17					
f	Investment management fees					
g	Other. (If line 11g amount exceeds 10% of line 25,	542,968.	343,906.	121,820.	77,242.	
10	column (A) amount, list line 11g expenses on Sch 0.)	183,483.	183,483.	121,020.	//,444	
12	Advertising and promotion	747,513.	745,238.	2,275.		
13 14	Office expenses	338,559.	325,724.	12,835.		
14 15	Information technology Royalties		525,724.	12,033.		
16	Occupancy	1,637,267.	1,572,334.	64,933.		
17	Travel	35,303.	35,303.			
18	Payments of travel or entertainment expenses	,				
10	for any federal, state, or local public officials					
19	Conferences, conventions, and meetings	1,964.	1,964.			
20	Interest	·	,			
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	330,843.	315,918.	14,925.		
23	Insurance	110,400.	105,571.	4,829.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)					
а	UBI TAX PAYMENT	32,370.	28,579.	3,791.		
b	STUDENT MEALS	814,781.	814,781.			
с	REPAIR AND MAINTENANCE	789,903.	757,700.	32,203.		
d	STUDENT PROGRAMS	559,174.	559,174.			
е	All other expenses	717,513.	701,675.	7,452.	8,386.	
25	Total functional expenses. Add lines 1 through 24e	23,001,101.	20,263,144.	1,997,529.	740,428.	
26	$\ensuremath{\textbf{Joint costs}}$ . Complete this line only if the organization					
	reported in column (B) joint costs from a combined					
	advestignal expression and fundraising coligitation					

10

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Check here

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educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

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Form 990 (2018)

EAST	HARLEM	SCHOLARS	ACADEMY	CHARTER
SCHOO	JL			

art X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	1,050,059.	1	1,567,992
2	Savings and temporary cash investments	150,058.	2	150,206
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,016,633.	4	1,025,605
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	173,172.	9	
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 1,908,269.			
b	Less: accumulated depreciation 10b 1,250,986.	722,177.	10c	657,28
11	Investments - publicly traded securities		11	-
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,112,099.	16	3,401,08
17	Accounts payable and accrued expenses	1,039,402.	17	1,392,53
18	Grants payable		18	
19	Deferred revenue	6,537.	19	23,51
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	1,190,086.	25	1,014,61
26	Total liabilities. Add lines 17 through 25	2,236,025.	26	2,430,65
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	• •		
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	876,074.	27	970,42
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
27 28 29 30 31 32 33	Total net assets or fund balances	876,074.	33	970,42
34	Total liabilities and net assets/fund balances	3,112,099.	34	3,401,08
		·		Form <b>990</b> (2

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Form 990 (2018)

EAST	HARLEM	SCHOLARS	ACADEMY	CHARTER
SCHOO	יזכ			

	990 (2018) SCHOOL	27-4	713450	Pag	<sub>je</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	23,095		
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,001		
3	Revenue less expenses. Subtract line 2 from line 1	3		, 35	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	876	,07	74.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	970	,42	27.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>2</b> a	_	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	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		<b>3</b> a	x	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form **990** (2018)

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SCHEDULE A	D	alia Cha	rity Status on	d Dub	lia Cu	innort		OMB No. 1545-0047
(Form 990 or 990-EZ)			rity Status and ization is a section 501					2018
	Comple		47(a)(1) nonexempt chai					2010
Department of the Treasury Internal Revenue Service	► Go t		Attach to Form 990 or Form 990-EZ. o www.irs.gov/Form990 for instructions and the latest information.					Open to Public Inspection
Name of the organizati			HOLARS ACADEM				Employer	identification number
Ū.	SCHOOL							7-4713450
Part I Reason	for Public Char	ity Status (/	All organizations must co	mplete thi	s part.) Se	e instructions		
The organization is not a	a private foundation	because it is: (I	For lines 1 through 12, ch	neck only o	one box.)			
	nvention of churche	s, or associatio	n of churches described	in <b>sectio</b>	n <b>170(b)(</b> 1	l)(A)(i).		
			Attach Schedule E (Form					
		0	anization described in se				(:::) Entard	the beenitel's name
4 A medical res	-	operated in cor	njunction with a hospital	uescribeu	iii secuo	n 170(b)(1)(A)	(III). Enter	ine nospital s hame,
		benefit of a col	llege or university owned	or operate	ed by a go	vernmental ur	nit describe	d in
	( <b>b)(1)(A)(iv).</b> (Compl		5	ļ	, 3			
6 🗌 A federal, sta	te, or local governm	ent or governm	nental unit described in s	ection 17	'0(b)(1)(A)	(v).		
7 🗌 An organizat	on that normally rec	eives a substa	ntial part of its support fr	om a gove	rnmental	unit or from th	e general p	ublic described in
	b)(1)(A)(vi). (Comple							
			(1)(A)(vi). (Complete Part					
	U U		in section 170(b)(1)(A)(i				Ū.	•
university:	or a non-land-grant o	college of agric	ulture (see instructions). I		lame, city	, and state of	the college	01
· _	on that normally rec	eives: (1) more	than 33 1/3% of its supp	ort from c	ontributio	ns, membersh	ip fees, and	d gross receipts from
			ct to certain exceptions, a					
income and u	inrelated business t	axable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	fter June 30, 1975.
	509(a)(2). (Complete	-						
	•		vely to test for public saf	•				
-	-		vely for the benefit of, to d in section 509(a)(1) or	-			•	
			f supporting organization					
	-	• •	upervised, or controlled b				-	iving
		-	gularly appoint or elect a	•	-			-
organizatio	n. <b>You must compl</b>	ete Part IV, Se	ections A and B.					
		-	or controlled in connect			-		-
	-		anization vested in the sa	me persor	ns that co	ntrol or manag	je the supp	orted
	n(s). You must com	•	g organization operated i	n connoct	ion with a		vintograto	d with
			). You must complete F				yintegrate	a with,
	•		porting organization operation			-	ted organiz	ation(s)
			ation generally must sati					
requiremer	t (see instructions).	You must con	nplete Part IV, Sections	A and D,	and Part	<b>V</b> .		
	-		written determination fror			Type I, Type I	I, Type III	
			nally integrated supportir					
f Enter the number	of supported organi ing information abou		d organization(s)					
(i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governin	nization listed	(v) Amount of	monetary	(vi) Amount of other
organization	1		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)
	duction Act Nation	coo the lest	uctions for Form 990 or	000 E7	000001 15	11.10 <b>C-b</b>		m 990 or 990-EZ) 2018
	addition Act NULLCE	, see the motion		550-LZ.	002021 10-	Schel		11 330 01 330-EZJ 2010

# Schedule A (Form 990 or 990-EZ) 2018 SCHOOL

Part II

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support			-			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge $\dots$						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support				_		_
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
14	Public support percentage for 2018 (li	ne 6, column (f) d	ivided by line 11, c	olumn (f))		14	%
	Public support percentage from 2017					15	%
16a	33 1/3% support test - 2018. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2017. If the c	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	% or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly	supported organization	ation			▶∟
17a	10% -facts-and-circumstances test	- 2018. If the org	ganization did not (	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ices" test, check th	is box and <b>stop</b>	here. Explain in Pa	art VI how the orga	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances test	- 2017. If the org	ganization did not o	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	e "facts-and-circu	imstances" test, ch	neck this box and	stop here. Explai	in in Part VI how th	e
	organization meets the "facts-and-circ	umstances" test.	The organization of	lualifies as a publi	cly supported orga	anization	
18	Private foundation. If the organizatio	<u>n did not check a</u>	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	s ►
					Sch	edule A (Form 99	or 000 E7) 2019

Schedule A (Form 990 or 990-EZ) 2018

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# Schedule A (Form 990 or 990 EZ) 2018 SCHOOL

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

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(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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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						
	a Amounts included on lines 1, 2, and 3 received from disgualified persons						
ł	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support				-		
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10;	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
I	• Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	zation,
_	check this box and stop here		-				
Se	ction C. Computation of Publ	ic Support Per	rcentage			<u> </u>	
15	Public support percentage for 2018 (	line 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2017					16	%
	ction D. Computation of Inves					<u> </u>	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2018. If the						17 is not
	more than 33 1/3%, check this box a						
ł	o 33 1/3% support tests - 2017. If the	-					
	line 18 is not more than 33 1/3%, che						▶∐
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t			
8320	23 10-11-18		4 -		Sch	edule A (Form 99	0 or 990-EZ) 2018
			15	1			

# Schedule A (Form 990 or 990-EZ) 2018 SCHOOL 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.)

16

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2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

Schedule A (Form 990 or 990-EZ) 2018

10b

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Yes No

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Sche	dule A (Form 990 or 990-EZ) 2018 SCHOOL	27 - 4713450	) Pa	age <b>5</b>
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
u	below, the governing body of a supported organization?	11a		
h				
	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	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		L
000		I.	Val	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
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			
Ū	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			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structions).		
а	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government enti	ty (see instructions),		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
		2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>	20		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	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 Part VI the role played by the organization in this regard.	3b		
832025	5 10-11-18 Schedule	A (Form 990 or 990	)-EZ)	2018

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Sche	edule A (Form 990 or 990-EZ) 2018 SCHOOL			27-4713450 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organi		5
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on N	lov. 20, 1970 (explain in l	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	tions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
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	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
_4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		

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

Schedule A (Form 990 or 990-EZ) 2018

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	dule A (Form 990 or 990-EZ) 2018 SCHOOL			27-4713450 Page 7
Par	t V   Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continued)	1
Secti	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	S		
_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	ne organization is responsive	1	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
			FIE-2010	Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>	Excess from 2014			
	Excess from 2015			
с	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

832027 10-11-18

Schedule A	(Form 990 or 990-EZ) 2018	EAST HARLEM SCHOOL	SCHOLARS	ACADEMY (	CHARTER	27-4713450 Pag
Part VI	Supplemental Information Part IV, Section A, lines 1	<b>mation.</b> Provide the e , 2, 3b, 3c, 4b, 4c, 5a, 6 lines 2 and 3; Part IV, Se	, 9a, 9b, 9c, 11a, 11 ection E, lines 1c, 2a	b, and 11c; Part a, 2b, 3a, and 3b;	IV, Section B, lines 1 ; Part V, line 1; Part V	and 2; Part IV, Section C, , Section B, line 1e; Part V,

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# Schedule B

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

#### Name of the organization

*	PUBLIC	DISCLOSURE	COPY	*
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# 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

2018

Employer identification number

EAST	HARLEM	SCHOLARS	ACADEMY	CHARTER
SCHO	JL			

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Organization type (check one):

27-4713450

Filers of:	Section:
Form 990 or 990-EZ	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

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

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**

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.

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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an exclusively religious, charitable, etc., exclusively religious, exclusively religious,

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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) (2018)

Name of organization

EAST HARLEM SCHOLARS ACADEMY CHARTER SCHOOL

Employer identification number

27-4713450

#### Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (b) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 685,338. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 69,572. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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		Employer identification number	
EAST I	HARLEM SCHOLARS ACADEMY CHARTER		27-4713450
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Page 3

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

	ganization		Employer identification number
	IARLEM SCHOLARS ACADEMY	CHARTER	27 4712450
CHOOL Part III	Exclusively religious, charitable, etc., contribu	tions to organizations described in se	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the yea
	from any one contributor. Complete columns ( completing Part III, enter the total of exclusively religious,	a) through (e) and the following line entri charitable, etc., contributions of \$1,000 or I	y. For organizations ess for the year. (Enter this info. once.) \$
<u></u>	Use duplicate copies of Part III if additiona	I space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gift	
-	Transferee's name, address, a	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			
F		(e) Transfer of gift	
	Transferee's name, address, a		Relationship of transferor to transferee
F			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F			
		(e) Transfer of gift	
F	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee

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~ ~			<u>Cump</u>		al Einanai	<b>_</b> ] (	Statemente			OMB No. 1545-0047
	SCHEDULE D       Supplemental Financial Statements         (Form 990)       ► Complete if the organization answered "Yes" on Form 990,									2010
(Forn	n 990)		Part IV, line	ete if the org	anization answe	red " 11d.	'Yes" on Form 990, 11e, 11f, 12a, or 12	b.		
	Department of the Treasury Attach to Form 990.								Open to Public Inspection	
Internal Revenue Service         ►Go to www.irs.gov/Form990 for instructions and the latest information.           Name of the organization         EAST HARLEM SCHOLARS ACADEMY CHARTER						Emr	blover identification number			
Nam	Ū	SCHOO	DL				-			27-4713450
Par	t I Organizatio	ns Maint	taining Do	nor Advise	d Funds or O	ther	Similar Funds	or Ac	coun	ts. Complete if the
	organization and	swered "Ye	es" on Form 9	90, Part IV, lir	e 6.					
					(a) Dono	r adv	rised funds	(t	<b>)</b> Fun	ds and other accounts
1	Total number at end of									
2	Aggregate value of cor									
3	Aggregate value of gra									
4	Aggregate value at end									
5	Did the organization in				-					
~	are the organization's p									Yes No
6	Did the organization in for charitable purposes	· ·		-			•			
	impermissible private b				-		any other purpose of		°	
Par			nents. Com	plete if the or	nanization answe	red "	Yes" on Form 990, F	Part IV. I	ine 7.	
1	Purpose(s) of conserva							u,		
-	Preservation of la		,	Ũ	` _	<u> </u>	reservation of a hist	orically	impor	tant land area
	Protection of nat				, [		reservation of a cert	,		
	Preservation of c	open space	•							
2	Complete lines 2a thro	ugh 2d if th	ne organizatio	n held a quali	fied conservation	cont	ribution in the form o	of a con	servat	tion easement on the last
	day of the tax year.									Held at the End of the Tax Year
а	Total number of conse	rvation eas	ements						2a	
b	Total acreage restricted	d by conse	rvation easem	nents					2b	
с	Number of conservatio	n easemen	nts on a certifi	ed historic str	ucture included i	n (a)			2c	
d	Number of conservatio									
	listed in the National R								2d	
3	Number of conservatio	n easemen	nts modified, t	ransferred, re	eased, extinguis	ned, c	or terminated by the	organiz	ation	during the tax
	year	<u> </u>								
4	Number of states wher					-				
5	Does the organization violations, and enforce									Yes No
6	Staff and volunteer hou						and enforcing cons			
Ŭ				g, mopeoung,				orvation	10000	monto during the year
7	Amount of expenses in	ncurred in r	nonitorina, ins	specting, hand	lling of violations	and	enforcing conservat	tion eas	ement	s during the year
-	► \$			,	g er rielaliene		enterentig eenteertaa			ie dannig trie year
8	Does each conservatio	n easemer	– nt reported on	line 2(d) abov	e satisfy the requ	irem	ents of section 170(h	n)(4)(B)(i	)	
	and section 170(h)(4)(E	3)(ii)?								Yes 📃 No
9	In Part XIII, describe ho									
	include, if applicable, t	he text of t	he footnote to	the organiza	tion's financial st	ateme	ents that describes t	he orga	nizatio	on's accounting for
	conservation easement	ts.								
Par			-				reasures, or Ot	ner Si	milai	r Assets.
	-	-			990, Part IV, line					
<b>1</b> a	If the organization elec									
						n, or	research in furtherar	nce of p	ublic	service, provide, in Part XIII,
<b>L</b>	the text of the footnote					:		امطامه		
b	-									sheet works of art, historical
	relating to these items:				Jucation, of rese	ai GH I	in lumerance of pub	NIC SELV	ice, pr	rovide the following amounts
	(i) Revenue included		90. Part VIII li	ne 1						\$
	(ii) Assets included in									♀ \$
2	If the organization rece								· ·	·
_	the following amounts			-				J, P		
а	Revenue included on F	-	-			-				\$
b	Assets included in For									\$
	For Paperwork Reduc									Schedule D (Form 990) 2018
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EAST 3	HARLEM	SCHOLARS	ACADEMY	CHARTER

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	dule D (Form 990) 2018 SCHOOL t III Organizations Maintaining C	ollections of Ar	t. Hist	orical Tre	asures, o	r Other S			
3	Using the organization's acquisition, accessi								,
-	(check all that apply):		.,		onormig ma	a a a a gr			
а	Public exhibition	d		Loan or exc	hange progra	ams			
b	Scholarly research	e							
	b     Scholarly research     e     Other       c     Preservation for future generations     e     Other								
4	Provide a description of the organization's co	ollections and explain	how th	nev further th	e organizatio	on's exemr	ot purpose in F	Part XIII	
5	During the year, did the organization solicit o								
-	to be sold to raise funds rather than to be ma							Yes	No
Par	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Pa			5			,	, ,	
1a	Is the organization an agent, trustee, custodi	ian or other intermed	iary for	contributions	s or other as	sets not ind	cluded		
	on Form 990, Part X?							Yes	No No
b	If "Yes," explain the arrangement in Part XIII								
			-					Amount	
с	Beginning balance						1c		
	Additions during the year						1d		
	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or cu	istodial acco	unt liability	?	Yes	No No
	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planatio	on has been	provided on	Part XIII			
Par	t V Endowment Funds. Complete	if the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line 10			
		(a) Current year	(b)	Prior year	(c) Two yea	rs back <b>(c</b>	<b>d)</b> Three years b	ack <b>(e)</b> Four y	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curr	,	e (line 1	g, column (a)	) held as:				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С	Temporarily restricted endowment								
-	The percentages on lines 2a, 2b, and 2c sho								
3a	Are there endowment funds not in the posse	ession of the organiza	ation that	at are held ar	nd administer	red for the	organization	Г.	
	by:								Yes No
	(i) unrelated organizations								
	If "Yes" on line 3a(ii), are the related organiza							3b	
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm	endo ent.	wmeni	iunus.					
	Complete if the organization answere		) Part I	line 11a S	ee Form 990	Part X lir	ne 10		
	Description of property	(a) Cost or o			or other		cumulated	(d) Book	value
	beschption of property	basis (investr		• •	(other)		eciation	(0) DOON	value
1a	Land	· · ·	,	1		·			
	Buildings								
	Leasehold improvements			12	9,623.		91,002.	38	,621.
	Equipment				2,858.	1,14	46,797.		,061.
	Other			1	5,788.		13,187.	2	,601.
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	mn (B), line 1	0c.)			657	,283.

Schedule D (Form 990) 2018

EAST HARLEM SCHOLARS ACADEMY	CHARTER
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# Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990,

SCHOOL

if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12	12.	art X. line <sup>.</sup>	0. Par	rm 990	See Forn	11b.	. line	Part IV	on Form 990.	"Yes"	answered	e organization	if the
--	-----	--------------------------	--------	--------	----------	------	--------	---------	--------------	-------	----------	----------------	--------

(a	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)	Financial derivatives		
(2)	Closely-held equity interests		
(3)	Other		
	(A)		
	B)		
	(C)		
	D)		
(	G)		
	H)		
Tota	II. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

#### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-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.

Schedule D (Form 990) 2018

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	

(b) Book value

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a)	Description of liability

(1) Federal income taxes	
(2) DUE TO EHTP	452,187.
(3) DEFERRED RENT LIABILITY	562,427.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,014,614.

 Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)
 ▶
 Ⅰ, ⋃𝒶𝔹, ҄ט𝒶𝔹, 𝔄𝒶𝔹,

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 ►
 Ⅰ, ⋃𝒶𝔹, 𝔄𝒶𝔹, 𝔄𝔄𝔄
 ►

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

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1.

EAST	HARLEM	SCHOLARS	ACADEMY	CHARTER
EAST.	HARLEM	SCHULARS	ACADEMY	CHARTER

27 - 4	713	3450	Page 4
4/ 3	:/	7330	Page T

Sche	edule D (Form 990) 2018 SCHOOL			4713450 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stat	ements With Revenue	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	23,095,454.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line <b>2e</b> from line <b>1</b>			23,095,454.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b			0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			23,095,454.
_	THIS MUST COULD FOR THE TE			
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expens	es per Retur	n.
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lin	itements With Expens	es per Returi	n.
<b>Pa</b>	rt XII Reconciliation of Expenses per Audited Financial Sta	i <b>tements With Expens</b> e 12a.	es per Returi	n. 23,001,101.
	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lin	i <b>tements With Expens</b> e 12a.	es per Returi	n.
1	Reconciliation of Expenses per Audited Financial Sta           Complete if the organization answered "Yes" on Form 990, Part IV, lin           Total expenses and losses per audited financial statements	e 12a.	es per Returi	n.
1 2	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	e 12a.	es per Returi	n.
1 2 a	<b>rt XII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	e 12a.         2a	es per Returi	n.
1 2 a	<b>TXII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	itements With Expens           e 12a.	es per Returi	n.
1 2 a	<b>rt XII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a           2b           2c           2d	1	n. <u>23,001,101.</u> 0.
1 2 b c d	<b>TXII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	Itements With Expens           e 12a.           2a           2b           2c           2d	2e	n.
1 2 b c d e	<b>rt XII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines <b>2a</b> through <b>2d</b>	Itements With Expens           e 12a.           2a           2b           2c           2d	2e	n. <u>23,001,101.</u> 0.
1 2 b c d e 3	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	Itements With Expens           e 12a.           2a           2b           2c           2d	2e	n. <u>23,001,101.</u> 0.
1 2 3 4	TXII       Reconciliation of Expenses per Audited Financial Sta         Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	Itements With Expens           e 12a.           2a           2b           2c           2d           2d	2e	n. <u>23,001,101.</u> 0.
1 2 a b c d e 3 4 a b	TXII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	Itements With Expens           e 12a.           2a           2b           2b           2c           2d           2d	2e 3	n. <u>23,001,101.</u> <u>0.</u> <u>23,001,101.</u> 0.
1 2 a b c d e 3 4 a b c 5	<b>TXII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a         2b         2b         2c         2d	2e 3	n. <u>23,001,101.</u> <u>0.</u> <u>23,001,101.</u>

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE	SCHOO	<u>)L REC</u>	COGNIZ	ZES TH	<u>e ef</u>	FECT	OF	INCOM	E TAX	POSIT	IONS	ONLY	WHEN	THEY
ARE	MORE	LIKEI	Y THZ	AN NOT	то	BE S	USTZ	AINED.	MANA	GEMENT	HAS	DETE	RMINEI	D THAT
THE	SCHOO	DL HAI	ΝΟΙ	JNCERT	AIN	TAX	POSI	TIONS	THAT	WOULD	REQU	JIRE H	FINANC	CIAL
STAT	EMENI	RECO	GNITI	ION OR	DIS	CLOS	URE	THE	SCHOO	LISN	O LON	IGER S	SUBJEC	СТ ТО
EXAM	IINATI	ION BY	APPI	LICABL	Е ТА	XING	AU	THORIT	IES F	OR PER	IODS	PRIO	R TO C	JUNE 30,
2016	5.													

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SC	HEDULE E	Schools	1	OMB No.	1545-004	47
(For	m 990 or 990-EZ)	Complete if the organization answered "Yes" on Form 990,		20	19	2
		Part IV, line 13, or Form 990-EZ, Part VI, line 48.				
	ment of the Treasury Revenue Service	<ul> <li>Attach to Form 990 or Form 990-EZ.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>		Open to Inspect		ic
Name	e of the organization		Employer i	•		mher
- taint	or the organization	SCHOOL		7-4713		
Pa	rt I				100	
					YES	NO
1	Does the organization	on have a racially nondiscriminatory policy toward students by statement in its charter, bylay	NS,			
	other governing inst	rument, or in a resolution of its governing body?		1	Х	
2	Does the organization	on include a statement of its racially nondiscriminatory policy toward students in all its broch	nures,			
		er written communications with the public dealing with student admissions, programs, and		s? 2	X	
3		n publicized its racially nondiscriminatory policy through newspaper or broadcast media dur				
	•	n for students, or during the registration period if it has no solicitation program, in a way that				
		all parts of the general community it serves? If "Yes," please describe. If "No," please expla		3		x
	SEE PART I	ace, use Part II		3		
		±		-		
				-		
				-		
				_		
4	Does the organization	on maintain the following?		_		
а	Records indicating t	he racial composition of the student body, faculty, and administrative staff?		4a	Х	
		ng that scholarships and other financial assistance are awarded on a racially nondiscriminat	ory basis?	4b		X
с	Copies of all catalog	ues, brochures, announcements, and other written communications to the public dealing w	ith student			
	admissions, program	ns, and scholarships?		4c	Х	
d	Copies of all materia	al used by the organization or on its behalf to solicit contributions?		4d	Х	
		" to any of the above, please explain. If you need more space, use Part II.				
		ZATION IS A FREE PUBLIC CHARTER SCHOOL AND NO		_		
	ASSISTANCE	IS OFFERED.		_		
				_		
5	Doos the organizatio	on discriminate by race in any way with respect to:				
	•	privileges?		5a		x
		?				X
c	Employment of facu	Ity or administrative staff?				x
		er financial assistance?				x
		?				X
						Х
g						X
		r activities?				X
		s" to any of the above, please explain. If you need more space, use Part II.				
				_		
				_		
				_		
				_	37	
		on receive any financial aid or assistance from a governmental agency?			X	
b		n's right to such aid ever been revoked or suspended?		<u>6b</u>		X
-		s" on either line 6a or line 6b, explain on Part II.	F .4			
7	•	on certify that it has complied with the applicable requirements of sections 4.01 through 4.0		7	x	
ΙНΔ		075-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	Schedule E (F			) 2018

832061 10-15-18

 Schedule E (Form 990 or 990-EZ) 2018
 SCHOOL
 27-4713

 Part II
 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 3 - EXPLANATION OF NONDISCRIMINATION POLICY:

AS A PUBLIC SCHOOL, SUBJECT TO OPEN ENROLLMENT, THE CHARTER

SCHOOL IS NOT SUBJECT TO THE SPECIFIC GUIDELINES SET FORTH IN

REV. PROC. 75-50 AND AS MODIFIED BY REV. PROC. 2019-22.

A CHARTER SCHOOL SHALL NOT DISCRIMINATE AGAINST OR LIMIT THE

ADMISSION OF ANY STUDENT ON ANY UNLAWFUL BASIS, INCLUDING ON THE BASIS OF

ETHNICITY, NATIONAL ORIGIN, GENDER, DISABILITY, INTELLECTUAL ABILITY,

MEASURES OF ACHIEVEMENT OR APTITUDE, ATHLETIC ABILITY, RACE, CREED,

NATIONAL ORIGIN, RELIGION OR ANCESTRY. A SCHOOL MAY NOT REQUIRE ANY ACTION

BY A STUDENT OR FAMILY (SUCH AS AN ADMISSIONS TEST, INTERVIEW, ESSAY,

ATTENDANCE AT AN INFORMATION SESSION, ETC.) IN ORDER FOR AN APPLICANT TO

EITHER RECEIVE OR SUBMIT AN APPLICATION FOR ADMISSION TO THAT SCHOOL.

HOWEVER, EAST HARLEM SCHOLARS ACADEMY PROVIDES AN ACADEMIC PROGRAM

SPECIFICALLY DESIGNED FOR ENGLISH LANGUAGE LEARNERS. THESE PREFERENCES

HAVE BEEN APPROVED BY THE SCHOOL'S AUTHORIZER AND ARE PERMISSIBLE.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE ORGANIZATION RECEIVED \$21,313,555 IN GRANTS AND PER-PUPIL

REIMBURSEMENTS FROM THE NEW YORK STATE EDUCATION DEPARTMENT, \$988,527 IN

GRANTS FROM THE NEW YORK CITY DEPARTMENT OF EDUCATION, AND A \$69,572 IN

30

GRANTS AND REIMBURSEMENTS FROM THE UNIVERSAL SERVICE ADMINISTRATIVE

COMPANY (ERATE).

SC	HEDULE J Compensation Information	OM	3 No. 1	545-004	17
(Fo	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest	•		10	,
•	Compensated Employees		<b>2</b> U	18	)
-	truent of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	Op	en to	Publi	ic
	rtment of the Treasury al Revenue Service ■ Go to www.irs.gov/Form990 for instructions and the latest information.	-	nspe		
Nan		oloyer identif	icatio	n nur	nber
		27-4713	450	)	
Pa	Int 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 us	e			
	Travel for companions Payments for business use of personal residence	ce			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (such as maid, chauffeur, che	ef)			
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	L	1b		L
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?	L	2		<u> </u>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's				
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to				
	establish compensation of the CEO/Executive Director, but explain in Part III.				
	X     Compensation committee         Written employment contract				
	Independent compensation consultant				
	XForm 990 of other organizationsXApproval by the board or compensation commi	ttee			
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		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	·····	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
~	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
э	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:		50		x
	The organization?		5a 5b		X
b	Any related organization? If "Yes" on line 5a or 5b, describe in Part III.	·····	5b		
6					
0	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			6a		х
	The organization?		6b		x
U	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	·····	55		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
'	not described on lines 5 and 6? If "Yes," describe in Part III		7		x
ß	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	·····	,		
0			8		х
9	Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	·····	0		
9			9		
LHA		Schedule J		n 990)	2018

832111 10-26-18

Schedule J (Form 990) 2018

SCHOOL

27-4713450

Page **2** 

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
(1) JEFFREY GINSBURG	(i)	0.	0.	0.	0.	0.	0.	0.	
FORMER CHAIRMAN/EXECUTIVE DIRECTOR	(ii)	215,637.	35,000.	150.	7,880.	22,574.	281,241.	0.	
(2) DESREE CABRALL-NJENGA	(i)	128,999.	0.	102.	4,053.	20,913.	154,067.	0.	
PRINCIPAL, SCHOLARS ELEMENTARY	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2018

EAST	HARLEM	SCHOLARS	ACADEMY	CHARTER
SCHOO	JL			

Schedule J	(Form 990)	) 2018
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Part III Supplemental Information

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.

Schedule J (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

FORM 990, PART

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.

EAST HARLEM SCHOLARS ACADEMY CHARTER



SCHOOL

I,

LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENVIRONMENT FOR STUDENTS IN GRADE K-2.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EAST HARLEM TUTORIAL PROGRAM (EHTP), A COMMUNITY-BASED ORGANIZATION

FOUNDED IN 1958.

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

THE 21ST CENTURY WORK FORCE AND SUCCESSFULLY PURSUE BOUNDLESS

POSSIBILITIES, OUR STUDENTS LEARN TO QUESTION, ANALYZE AND APPLY THEIR

LEARNING MEANINGFULLY. STUDENTS DEVELOP THE ESSENTIAL CRITICAL

REASONING AND LEADERSHIP SKILLS TO SUCCEED IN THEIR ENDEAVORS, BOTH

INSIDE AND OUTSIDE THE CLASSROOM. WE VALUE A NURTURING AND SUPPORTIVE

ENVIRONMENT THAT SUPPORTS STUDENTS' LOVE OF LEARNING AND OF THEMSELVES.

WE PLACE A PREMIUM ON STUDENT COGNITIVE, CREATIVE, SOCIAL AND EMOTIONAL

GROWTH AND PHYSICAL HEALTH, BLENDING RIGOR WITH JOY TO ENSURE OUR

SCHOLARS ARE INSPIRED TO LEARN. STUDENTS EXPLORE THEIR INDIVIDUAL

ASPIRATIONS THROUGH THE SCHOOL EXPERIENCE, DEVELOPING RICH PERSONAL

CONNECTIONS TO THEIR LEARNING.

 OUR LEARNING COMMUNITY INSTILLS IN ALL SCHOLARS A DEEP SENSE OF

 SELF-ESTEEM, CULTURAL PRIDE AND GLOBAL RESPONSIBILITY SO THAT THEY

 DEVELOP INTO THEIR BEST POSSIBLE SELVES. DIVERSITY IS AN ASSET TO OUR

 LEARNING SPACE, AND OUR SCHOLARS ARE ENGAGED WITH AND AWARE OF

 DIFFERENT BACKGROUNDS AND PERSPECTIVES AS THEY DEVELOP A RICH

 UNDERSTANDING OF THE WORLD IN WHICH THEY LIVE. WE VALUE ACTIVE

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

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

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Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization EAST HARLEM SCHOLARS ACADEMY CHARTER SCHOOL	Employer identification number $27 - 4713450$
COMMUNITY ENGAGEMENT AS A WAY TO ENHANCE EDUCATIONAL OPPOR	TUNITIES.
FAMILIES AND THE WIDER COMMUNITY ARE MUTUAL STAKEHOLDERS I	N OUR
SCHOLARS' EDUCATIONAL SUCCESS. HAVING ACCESS TO A COMPREHE	NSIVE SUPPORT
SYSTEM POSITIONS STUDENTS TO REACH THEIR FULLEST POTENTIAL	, AND OUR
SCHOLARS' COMMITMENT TO SERVICE PROMOTES OUR VISION OF SOC	IAL JUSTICE
AND A DESIRE TO HELP THOSE IN NEED.	
OUR SCHOOLS ARE IN SESSION FROM 7:40 A.M. TO 4:00 P.M. MON	DAY THROUGH
THURSDAY. ON FRIDAYS, SCHOLARS DISMISS AT 1 P.M., AFTER WH	ICH TIME

STAFF PARTICIPATE IN PROFESSIONAL DEVELOPMENT. ELEMENTARY STUDENTS HAVE

DAILY BLOCKS OF ELA, MATH, AND SCIENCE OR SOCIAL STUDIES, IN ADDITION

TO DAILY ROTATING SPECIALS/ENRICHMENT CLASSES (SPANISH, PHYSICAL

EDUCATION, OR MUSIC) AND RECESS. MIDDLE SCHOOL STUDENTS STUDY ELA,

MATH, SCIENCE, SOCIAL STUDIES, AND SPANISH AS CORE SUBJECTS, WHILE ALSO

HAVING BLOCKS FOR RECREATION AND ENRICHMENT. OUR AFTERSCHOOL PROGRAM

RUNS UNTIL 5:00 P.M. MONDAY THROUGH THURSDAY, AND UNTIL 4:00 P.M ON

FRIDAY.

FORM 990, PART VI, SECTION B, LINE 11B: EAST HARLEM SCHOLARS ACADEMY HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. MANAGEMENT AND THE PARENT ORGANIZATION, EHTP, REVIEW THE FORM 990 AFTER THE DRAFT IS PREPARED. ONCE APPROVED, A DRAFT OF THE FORM 990 IS DISTRIBUTED TO THE FINANCE COMMITTEE FOR REVIEW PRIOR TO BEING SUBMITTED TO THE IRS. THE DRAFT FORM 990 IS DISTRIBUTED EARLY ENOUGH TO PROVIDE EACH COMMITTEE MEMBER WITH A REASONABLE AMOUNT OF TIME FOR REVIEW AND SUBMISSION OF QUESTIONS OR COMMENTS PRIOR TO THE FILING DEADLINE. THE FINAL FORM 990 IS DISTRIBUTED TO 882212 10-10-18 35

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Schedule O (Form 990 or 990-EZ) (2018) Page 2							
Name of the organization EAST HARLEM SCHOLARS ACADEMY CHARTER SCHOOL	Employer identification number $27 - 4713450$						
EACH BOARD MEMBER FOLLOWING THE FINANCE COMMITTEE'S APPROV	AL. THE DRAFT AND						
FINAL FORM 990 MAY BE DISTRIBUTED IN PERSON, BY REGULAR MA	IL, E-MAIL OR						
FAX.							

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

EAST HARLEM SCHOLARS ACADEMY CURRENTLY HAS IN PLACE A CONFLICT OF INTEREST POLICY WHICH IT ANNUALLY MONITORS AND ENFORCES. THE BOARD CURRENTLY MANDATES THAT ALL MEMBERS OF MANAGEMENT AND THE GOVERNING BODY ANNUALLY SIGN A CONFLICT OF INTEREST POLICY AND DISCLOSE ANY POTENTIAL OR ACTUAL CONFLICTS THAT MAY EXIST. THE SIGNED CONFLICT OF INTEREST POLICY IS SUBMITTED TO THE CORPORATE COMPLIANCE OFFICER WHO REVIEWS THE SIGNED ATTESTATIONS FOR POTENTIAL OR ACTUAL CONFLICTS. IF A POTENTIAL OR ACTUAL CONFLICT OF INTEREST EXISTS, THE CORPORATE COMPLIANCE OFFICER WILL NOTIFY MEMBER OF MANAGEMENT OR THE GOVERNING BODY ABOUT SUCH CONFLICT AND INVESTIGATE THE CONFLICT. THE RESULTS OF THE INVESTIGATION WILL BE SUMMARIZED AND DOCUMENTED BY THE CORPORATE COMPLIANCE OFFICER AND BE REPORTED TO THE GOVERNING BODY. IF THE CORPORATE COMPLIANCE OFFICER ESTABLISHES THAT AN ACTUAL CONFLICT EXISTS, THE MEMBER OF MANAGEMENT OR THE GOVERNING BODY WILL BE NOTIFIED IMMEDIATELY AND WILL NOT BE ALLOWED TO VOTE OR BE A PART OF ANY DECISIONS ABOUT ANY SUCH TRANSACTIONS THAT HAVE TO DO WITH THE CONFLICT UNTIL SUCH TIME THERE IS NO LONGER A CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION PROCESS FOR THE FOUNDING SUPERINTENDENT AND DEPUTY SUPERINTENDENT IS RUN BY THE EXECUTIVE DIRECTOR WITH SUPPORT FROM OUR MD OF TALENT. THE PROCESS INCLUDES A WRITTEN EVALUATION PREPARED BY THE SUPERINTENDENTS AND THE EXECUTIVE DIRECTOR, WHICH INCLUDES 360 FEEDBACK FROM PRINCIPALS AND OTHER DIRECT REPORTS AND BUILDS ON A YEAR-LONG TALENT 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

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Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization EAST HARLEM SCHOLARS ACADEMY CHARTER	Employer identification number
SCHOOL	27-4713450
MANAGEMENT PROCESS THAT INCLUDES A BEGINNING AND MIDDLE OF	YEAR EVALUATION
AS WELL AS SCHOOL LEVEL GOALS, NETWORK GOALS, AND FINANCIA	L GOALS. THE
COMPENSATION IS APPROVED BY THE EAST HARLEM SCHOLARS ACADE	MY BOARD'S
FINANCE COMMITTEE AND THEN THE BOARD APPROVES IT AS PART O	F THE BUDGET
APPROVAL PROCESS (THIS IS AN ANNUAL PROCESS). IN ADDITION	, THE MD OF
TALENT CHECKS COMPENSATION DATA FOR SIMILAR SIZED SCHOOL N	ETWORKS.

THIS PROCESS WAS LAST UNDERTAKEN IN FY19. CONTEMPORANEOUS SUBSTANTIATION OF THESE DELIBERATIONS AND DECISIONS ARE ACCOMPLISHED THROUGH MINUTES OF THE COMMITTEE'S MEETING.

FORM 990, PART VI, SECTION C, LINE 19:

EAST HARLEM SCHOLARS ACADEMY CHARTER SCHOOL MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE RETURN IS POSTED ON GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. IN ADDITION, THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, FORM 990, FORM 1023, AND BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST AT 1573 MADISON AVENUE, NEW YORK, NY 10029.

FORM 990, PART XII, LINE 2C: THE SCHOLAR ACADEMY HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND FOR THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

37

832212 10-10-18

SCHEDULE R	I	<b>Bolotod</b> Organizations	and Unrolated Da	rtnorohino		L	OMB No. 154	5-0047		
(Form 990) Department of the Treasury Internal Revenue Service	orm 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.									
Name of the organizat		CHOLARS ACADEMY CHA		st information.		Employer ident				
	SCHOOL					27-4713	3450			
Part I Identificati	ion of Disregarded Entities. Comple	te if the organization answered "Yes'	on Form 990, Part IV, line 3	3.						
	(a)	(b)	(c)	(d)	(e)		(f)			
	lress, and EIN (if applicable) disregarded entity	Primary activity	Legal domicile (state o foreign country)	or Total inco	me End-of-year		controlling entity	g		
		_								
		_								
		_								
Part II Identification	ion of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990	), Part IV, line 34, t	because it had one	or more related tax-e>	empt			
	(a)	(b)	(c)	(d)	(e)	(f)	(	( <b>g)</b> 512(b)(13)		
	ne, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling		trolled		
of	related organization		foreign country)			entity		tity?		
					501(c)(3))		Yes	No		
	RIAL PROGRAM, INC	4								
,	SECOND AVENUE, NEW YORK, NY	PREPARES STUDENTS WITH THE						l		
10029		ACADEMIC SKILLS	NEW YORK	501 (C) 3		N/A		X		
	JNITY LEARNING PROGRAM -	4				EAST HARLEM				
47-1878321, 2035	SECOND AVENUE, NEW YORK, NY	_				TUTORIAL PROGRAM	,			
10029		LEVERAGE LENDER	NEW YORK	501 (C) 3	LINE 7	INC.		Х		

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

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 SCHOOL

#### 27-4713450 Page 2

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.

		-	6.5		(2)						
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	n)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	io

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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(C) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	Sec 512(l contr ent	(i) ction (b)(13) trolled tity?
		country)		0				Yes	No
									$\square$

Schedule R (Form 990) 2018 SCHOOL

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

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
b	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	X	
	Loans or loan guarantees to or for related organization(s)	1d		Х
е	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	Х	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	X	
Т	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
0	Sharing of paid employees with related organization(s)	10	Х	
р	Reimbursement paid to related organization(s) for expenses	1p	X	
q	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		Х
s	Other transfer of cash or property from related organization(s)	1s		Х

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.

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)			
(2)			
<u>(3)</u>			
(4)			
(5)			
<u>(6)</u>			

Schedule R (Form 990) 2018 SCHOOL

#### 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.

(a)	(b)	(c)	(d)	((	<b>e)</b> e all	(f)	(g)	()	ו)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partne 501( org	rs sec. c)(3) s.?	Share of total	Share of end-of-year assets	Dispr tior alloca	opor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1	General managi partner	or Percentage ownership
		<i>c c c</i> , <i>y</i> ,	Sections 512-514)	Yes	No			Yes	No	(1011111003)	Yes N	0
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EAST	HARLEM	SCHOLARS	ACADEMY	CHARTER
SCHOO	ЪГ			

Schedule	P	(Form	aan	2018	
Schedule	к	(Form	990	2018	

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

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