BOARD OF DIRECTORS
NOVATO CHARTER SCHOOL
(A California Non-Profit Public Benefit Corporation)
940 C Street, Novato, CA

May 3rd, 2021 6:00pm

RESCHEDULED FROM APRIL 21ST MEETING
REGULAR MEETING AGENDA

This meeting will be by teleconference pursuant to Executive Orders N-25-20 and N-29-20.

The Board of Directors ("Board") and employees of the Novato Charter School shall meet via the Zoom meeting platform. Members of the public who wish to access this Board meeting may do so at:

Join Zoom Meeting
https://nusd-org.zoom.us/j/86167501039?pwd=VjNYM3BiOE1UOTRTZ3kzczUxNThPQT09
Meeting ID: 861 6750 1039
Passcode: 322020

Find your local number: https://nusd-org.zoom.us/u/kcVZGuUE85

Members of the public who wish to comment during the Board meeting may use the "raise hand" tool on the Zoom platform. Members of the public calling in will be given the opportunity to address the Board during the meeting. Individual comments will be limited to three (3) minutes. If an interpreter is needed for comments, they will be translated to English and the time limit shall be six (6) minutes. The Board may limit the total time for public comment to a reasonable time. The Board reserves the right to mute or remove a participant from the meeting if the participant unreasonably disrupts the Board meeting.

Access to Board Materials: A copy of the written materials which will be submitted to the Board may be reviewed by any interested persons on The Novato Charter School's website along with this agenda following the posting of the agenda at least 72 hours in advance of this meeting.

Disability Access: Requests for disability-related modifications or accommodations to participate in this public meeting should be made 24 hours prior to the meeting by emailing mbloom@nusd.org. All efforts will be made for reasonable accommodations. The agenda and public documents can be modified upon request as required by Section 202 of the Americans with Disabilities Act.

BOARD OF DIRECTORS
NOVATO CHARTER SCHOOL
(A California Non-Profit Public Benefit Corporation)
940 C Street, Novato, CA

May 3rd, 2021 6:00pm

RESCHEDULED FROM APRIL 21ST MEETING
REGULAR MEETING AGENDA

BOARD MEMBER CODE OF CONDUCT

We will demonstrate **respect** for each other and all school constituents through open communication and by practicing gratitude and appreciation.
We will **collaborate** by honoring each member's unique point of view when working on the common goal of supporting the mission and vision of NCS.
We will align our actions to support the faculty and staff in their endeavor to provide a **holistic/developmentally** appropriate education through **creativity and the art of teaching**.
We will hold ourselves and each other accountable to arrive at Board meetings prepared and in follow-through of additional responsibilities including committee work outside of meetings.

BOARD MEETING CODE OF CONDUCT

We welcome the public to our Board Meetings! We request that each visitor honor the following agreements in support of our school core values:

- Maintain open, respectful body language and tone of voice when sharing viewpoints.
- Respect the Direct Communication model by bringing any concern first to the person(s) most directly connected or responsible for the topic.
- Offer full listening and attention and lend a benefit of the doubt to each member.
- Honor established agreements and limitations of the board meeting format including:
- Time limits
- Discussion limited only to agenda items (no discussion of non-agendized topics)
- Avoid interrupting others
- Stay focused on speaker and topic (do not engaging in distracting behavior/side conversations)
- Express gratitude and appreciation whenever/wherever possible.

BOARD OF DIRECTORS
NOVATO CHARTER SCHOOL
(A California Non-Profit Public Benefit Corporation)
940 C Street, Novato, CA

May 3rd, 2021 6:00pm

RESCHEDULED FROM APRIL 21ST MEETING
REGULAR MEETING AGENDA

AGENDA ITEM SPONSOR Approx. Time **1. Call Meeting to Order, Roll Call** Alexandria Quam 5 Min.

Board Member	Present Absent Late	Arrival time
Craig Allender (CA)		
Erik Berkowitz (EB)		
Bridgette Corridan (BC)		
Lia Heath (LH)		
Alexandria Quam (AQ)		

2. Agenda Modification Alexandria Quam 5 Min.

3. Public Comment Alexandria Quam 5 Min. *This is the opportunity for members of the community to speak on topics that are not agendized on tonight's board meeting. Because these are not agendized items the board and staff may not dialog back and forth with you. If you have a specific question that staff may be able to answer, staff may contact you. Should a board member choose to have this placed on a future meeting they may contact staff to do that*.

4. Consent Agenda Items Alexandria Quam 5 Min.

A. Approve Minutes: March 10, 2021
B. Approve IRS Form 990 and FTB Form 199

5. Board Discussion/Action Items John Azzizzi/Alexandria Quam 20 Min.

A. Salary Increase proposal from John Azzizzi
B. 2021 Board Elections application reviews

BOARD OF DIRECTORS
NOVATO CHARTER SCHOOL
(A California Non-Profit Public Benefit Corporation)
940 C Street, Novato, CA

May 3rd, 2021 6:00pm

RESCHEDULED FROM APRIL 21ST MEETING
REGULAR MEETING AGENDA

6. Information Items: Administrative Reports Nikki Lloyd 30 Min.

A. On-Site instruction Update
B. Facilities and Safety
    a. New Portable -received a proposal from QKA
    b. Received Proposals from YMCA and NBCC
    c. HVAC repair for Office and signed maintenance contract
C. LCAP
    a. Parent & Community survey results
    b. Charter School Development Center LCAP info
        i. https://www.chartercenter.org/resources/accountability/2021-lcap-update webinar-resource-page
D. Charter Renewal
    a. Review Public Hearing, March 30, 2021
    b. Preview: Vote May 18, 2021
E. Administrative Organization Review
F. Review calendar corrections

7. Next Board Meeting 5 Min. Wednesday, May 26 , 6:00 pm

8.. **Comments from Board Members** -
Please email future agenda items to Nlloyd@nusd.org and Aquam@nusd.org 5 Min.

9. Adjournment
Agenda publicly posted on www.novatocharterschool.org on Friday April 30th, 2021 by Megan Bloom

BOARD OF DIRECTORS
NOVATO CHARTER SCHOOL
(A California Non-Profit Public Benefit Corporation)
940 C Street, Novato, CA

March 10, 2021 6:00pm
REGULAR MEETING AGENDA

Minutes March 10, 2021

This meeting will be by teleconference pursuant to Executive Orders N-25-20 and N-29-20.

The Board of Directors ("Board") and employees of the Novato Charter School shall meet via the Zoom meeting platform. Members of the public who wish to access this Board meeting may do so at:

Topic: NCS BOARD MEETING
Time: Mar 10, 2021 06:00 PM Pacific Time (US and Canada)

Join Zoom Meeting
https://nusd-org.zoom.us/j/82613725499?pwd=a1Y4Mmlqa1N4SFpnVWlYSVMwK1FWUT09

Meeting ID: 826 1372 5499
Passcode: 819967
One tap mobile
+16699009128,,82613725499#,,,,*819967# US (San Jose)
+13462487799,,82613725499#,,,,*819967# US (Houston)

Dial by your location
+1 669 900 9128 US (San Jose)
+1 346 248 7799 US (Houston)
+1 253 215 8782 US (Tacoma)
+1 312 626 6799 US (Chicago)
+1 646 558 8656 US (New York)
+1 301 715 8592 US (Washington D.C)
Meeting ID: 826 1372 5499
Passcode: 819967
Find your local number: https://nusd-org.zoom.us/u/kfCmeJa1H

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BOARD OF DIRECTORS
NOVATO CHARTER SCHOOL
(A California Non-Profit Public Benefit Corporation)
940 C Street, Novato, CA

March 10, 2021 6:00pm
REGULAR MEETING AGENDA

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BOARD OF DIRECTORS
NOVATO CHARTER SCHOOL
(A California Non-Profit Public Benefit Corporation)
940 C Street, Novato, CA

March 10, 2021 6:00pm
REGULAR MEETING AGENDA

AGENDA ITEM	SPONSOR	Approx. Time
1. Call Meeting to Order, Roll Call	Alexandria Quam	5 Min.

Meeting called to order by Ali Quam at 6:02pm

Board Member	Present	Absent	Late	Arrival time
Craig Allender (CA)	x			
Erik Berkowitz (EB)	x			
Bridgette Corridan (BC)	x			
Lia Heath (LH)	x			
Alexandria Quam (AQ)	x			

2. Agenda Modification Alexandria Quam 5 Min.

3. Public Comment Alexandria Quam 5 Min. *This is the opportunity for members of the community to speak on topics that are not agendized on tonight's board meeting. Because these are not agendized items the board and staff may not dialog back and forth with you. If you have a specific question that staff may be able to answer, staff may contact you. Should a board member choose to have this placed on a future meeting they may contact staff to do that*.

Question from community member about whether state funding for NUSD Covid-related return to classrooms will be allocated to NUSD. Nikki to discuss offline.

4. Consent Agenda Items Alexandria Quam 5 Min. A. Approve Minutes: February 3, 2021

Motion to approve: Craig
2nd: Bridgette
Vote:
Craig – yay
Erik – yay
Bridgette – yay
Lia – yay
Ali- yay

5. Board Discussion/Action Items Alexandria Quam/John Azzizzi 20 Min.

A. Financial Report John Azzizzi

John reviewed 2nd interim report which will take us through the end of the school year.

B. Approve Second Interim Budget John Azzizzi

Motion to approve: Bridgette
2nd: Lia
Ali – yay
Craig – yay
Lia – yay
Erik – yay
Bridgette - yay

C. AUDITOR SELECTION - Open Ended

John Azizi commented that Clifton/Larson, our current auditor has done a good job over their tenure for the past many years. Nikki agreed with that assessment. This will be the last year that our auditor, Wade, will be on our account (by state law you can't have the same person for more than 6 years).

Board voted to keep Clifton/Larson on as our auditor, with Wade assigned to our account for one more year:

Craig, Erik
Ali – yay
Craig – yay
Lia – yay
Erik – yay
Bridgette - yay

D. Form 700-final collection

Board members need to turn their annual signed forms into Megan Bloom ASAP.

E. 2021 Board Election Process Preview

Nikki Lloyd shared the Board Election policy & election calendar. Board member Erik Berkowitz & Megan Bloom checked the calendar dates and confirmed they are correct. There are 2 board members at the end of their term this year (Lia Heath & Craig Allender), they have the option to run for re-election.

6. Information Items: Administrative Reports Nikki Lloyd 30 Min.

A. Remote and On-Site instruction/Enhanced Hybrid Learning and Future Full Return Update

Nikki:

All students are now on campus for hybrid learning with middle school now joining the rest of the grades.

All teachers had the opportunity to get their first vaccine last week, so within 4 weeks or so they will be fully vaccinated.

We are still unclear what NUSD has planned for full return to campus and expect to get clarity next week. NUSD will have an announcement of a plan on Monday the 15th.

While we chose to depart from NUSD for remote learning during the around the winter holiday break, and we went through a lengthy process in order to make that decision.

AS a school we are committed to following NUSD as we move forward.

We have learned that the safety protocols call for 4ft of distance rather than 6ft, so we are preparing our classrooms accordingly.

NUSD now has union updates around reopening posted on their website. This information is available to everyone and staff is also using this as a source of information.

One goal in reopening is to reduce the pickup line on C St.

As we look to reopening further, staff is considering how to handle students who choose to stay remote.

We are anticipating that students may return in full cohorts 5 days per week after Spring Break, with details around that yet to come.

There will be a community meeting where details of the NUSD plan (being announced March 15th/16th) will be shared on Wednesday March 18th. This community meeting will be announced in the Thread this Friday.

No comments from the Board.

Public Comments:

Tara Riley, Ben Whitfield, Mel Hall, Faera Taylor

Comments and questions around whether we align with NUSD or we don't.

B. Facilities and Safety

a. New Portable

Need new portable to allow for a dedicated space for aftercare & additional needs during the school day. Staff is looking into details of space requirements, as we learn more we will start to look into what the impact would be on the budget.

Community question on how facilities might be impacted by Measure G and whether NCS might be impacted by the school closure decision being made by the 7-11 committee.

To be discussed under agenda item B part c.

b. HVAC replacement for K room

Board member Craig Allender advised that part of the HVAC system on campus needs replacing and the facilities team is getting quotes. Will advise potential costs at future meeting about how this will affect our budget.

c. Measure G Bond - NCS Allocations

Nikki Lloyd shared the Measure G Allocations by site that was put together by the district. NCS is included in their project schedule.

Note that the district is looking into closing a school but since we are an independent Charter school we would not be able to be closed.

If a school is closed, there is potential that district facilities may be reallocated or closed.

C. Review NCS Enrollment Lottery held on March 3rd, 2021

Nikki: Jill Healy ran the lottery via the SchoolMint system with board member Lia Heath in attendance. New students' families will be called this week about accepting their spots. We did have less families apply this year. While we still have waiting lists for all classes, we could see applicants decrease in the future. NUSD is reporting around 300 fewer students this year than last.

D. Charter Renewal - Tentative Public Hearing at NUSD Board Mtg March 30, 2021

Nikki: Due to some staffing changes at NUSD, our charter renewal has been moved out to the March 30th NUSD Board Meeting. Board members should plan to be in attendance. (Nikki will send a calendar invite.)

Ali: Board members are encouraged to speak at the NUSD meeting.

E. NCS Admin Organizational Structure Review

Nikki: We are lucky that Megan Bloom joined us for part time help and was able to move into a full-time position after Kenya left. Moving forward we are going to pause on hiring and re-look at our administrative needs to see what makes the most sense. We definitely need help, especially with additional compliance needs, but we are studying with advising from board member Bridgette Corridan how we can best fill our needs now and in the long term.

7. Next Board Meeting 5 Min. Wednesday, April 21 , 6:00 pm

8.. Comments from Board Members - Please email future agenda items to Nlloyd@nusd.org and Aquam@nusd.org 5 Min.

9. Adjournment

Meeting adjourned by Ali Quam at 8:25pm

Agenda publicly posted at Novato Charter School on Friday, March 5th, 2021 by Megan Bloom. And on the school website at www.novatocharterschool.org

*Items that are expected to have back up materials provided prior to or at the meeting are indicated with an asterisk. Other items may also have back up materials provided.

CLIFTONLARSONALLEN LLP
2210 EAST ROUTE 66
GLENDORA, CA 91740

NOVATO CHARTER SCHOOL
940 C STREET
NOVATO, CA 94949

DRAFT

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY

DRAFT

CLA (CliftonLarsonAllen LLP)
CLAconnect.com

Novato Charter School
940 C Street
Novato, CA 94949

Novato Charter School:

Enclosed is the organization's 2019 Exempt Organization return. The state Exempt Organization return is also enclosed. These should be signed, dated, and mailed, as indicated.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Please return Form 8879-EO to us as soon as possible, but no later than by May 17, 2021 the filing deadline.

In addition, tax-exempt organizations must make available for public inspection a copy of their annual returns for the preceding three years and exemption application, if applicable. An organization generally must furnish filings to anyone who requests them in person or in writing. An exempt organization may meet this requirement by posting all the documents on its website or at another organizations site as part of a database of similar materials. Specific requirements must be met to meet this exception.

CALIFORNIA FORM 199 RETURN:

The California Form 199 return has qualified for electronic filing. After you have reviewed your return for completeness and accuracy, please sign, date and return Form 8453-EO to our office. We will then transmit your return to the FTB. Do not mail the paper copy of the return to the FTB.

No payment is required.

When mailing is necessary, we recommend that you use certified mail with postmarked receipts for proof of timely filing.

Be sure to review the returns prior to signing as you have final responsibility for all information included in the returns. If there is anything on the return you do not understand, we would be glad to answer your questions.

Copies of each return are provided for your permanent records. Based on IRS guidance, we generally recommend that you keep supporting documentation for a minimum of seven years; and that you keep copies of the tax returns, and records that support basis for items in the tax return, indefinitely.

We value our relationship with you and thank you for your trust and confidence in allowing us to serve you. If you have any questions regarding the returns or other services that we can assist you with, please do not hesitate to contact us. Some of our best clients come through referrals from existing clients. If you know of anyone who could benefit from our assistance, we would be pleased to speak to him or her.

Sincerely,

DRAFT

CliftonLarsonAllen LLP

DRAFT

CLA (CliftonLarsonAllen LLP)
CLAconnect.com

NOVATO CHARTER SCHOOL

FORM 990 INCOME TAX RETURN

FOR YEAR ENDED JUNE 30, 2020

DRAFT

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2019, or fiscal year beginning JUL 1 , 2019, and ending JUN 30 , 20 20

▶ **Do not send to the IRS. Keep for your records.**

▶ **Go to www.irs.gov/Form8879EO for the latest information.**

OMB No. 1545-1878

2019

Name of exempt organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Name and title of officer

NIKKI LLOYD
DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶ [X]	**b** **Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	2,534,750.
2a Form 990-EZ check here ▶ [ ]	**b** **Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a Form 1120-POL check here ▶ [ ]	**b** **Total tax** (Form 1120-POL, line 22)	**3b**	
4a Form 990-PF check here ▶ [ ]	**b** **Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**	
5a Form 8868 check here ▶ [ ]	**b** **Balance Due** (Form 8868, line 3c)	**5b**	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

DRAFT

Officer's PIN: check one box only

[X] I authorize CLIFTONLARSONALLEN LLP to enter my PIN 94949

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 95405291740

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ▶ WADE MCMULLEN, CPA Date ▶ 04/21/21

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

EXTENDED TO MAY 17, 2021

Form **990** (Rev. January 2020)

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning JUL 1, 2019 **and ending** JUN 30, 2020

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
NOVATO CHARTER SCHOOL

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 940 C STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
NOVATO, CA 94949

F Name and address of principal officer: NIKKI LLOYD
940 C STREET, NOVATO, CA 94949

D Employer identification number
56-2609145

E Telephone number
004-158-8342

G Gross receipts $ 2,534,750.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ HTTP://WWW.NOVATOCHARTERSCHOOL.ORG/

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2005 **M** State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: THE NOVATO CHARTER SCHOOL IS AN EDUCATIONAL COMMUNITY THAT IS COMMITTED TO

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	5
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	45
6	Total number of volunteers (estimate if necessary)	6	40
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	2,542,605.	2,511,370.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,681.	10,987.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,039.	12,393.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,560,325.	2,534,750.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,791,457.	1,794,843.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	685,863.	717,267.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,477,320.	2,512,110.
19	Revenue less expenses. Subtract line 18 from line 12	83,005.	22,640.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	1,218,369.	1,684,224.
21	Total liabilities (Part X, line 26)	417,393.	860,608.
22	Net assets or fund balances. Subtract line 21 from line 20	800,976.	823,616.

DRAFT

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date

▶ NIKKI LLOYD, DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
WADE MCMULLEN, CPA	WADE MCMULLEN, CPA	04/21/21	☐	P00541671

Firm's name ▶ CLIFTONLARSONALLEN LLP — Firm's EIN ▶ 41-0746749

Firm's address ▶ 2210 EAST ROUTE 66
GLENDORA, CA 91740 — Phone no. (626) 857-7300

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE NOVATO CHARTER SCHOOL IS AN EDUCATIONAL COMMUNITY THAT IS COMMITTED TO THE HEALTHY GROWTH AND DEVELOPMENT OF THE WHOLE CHILD. THROUGH A CURRICULUM INSPIRED BY WALDORF-METHODS, OUR TEACHERS NURTURE THROUGH THE IMAGINATION IN THE EARLY YEARS, BUILDING A FOUNDATION FOR

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ..... ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 2,091,731. including grants of $) (Revenue $ 12,393.)
A CHARTER SCHOOL PROVIDING EDUCATIONAL OPPORTUNITIES TO THE SURROUNDING COMMUNITY SERVING AROUND 265 STUDENTS GRADES K-8TH, OVER 180 INSTRUCTIONAL DAYS.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 2,091,731.

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		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? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
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)? *If "Yes," complete Schedule E*	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		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		X

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Part 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 and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
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 Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit 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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	45		
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)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on 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	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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			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).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the 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:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	5		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b			X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		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		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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ CA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 ▶

LAURELLE ANSPACH - 415-883-4254

940 C. STREET, NOVATO, CA 94949

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NIKKI LLOYD	40.00									
DIRECTOR				X				113,302.	0.	9,588.
(2) ALEXANDRIA QUAM	1.00									
CHAIRPERSON		X		X				0.	0.	0.
(3) ERIK BERKOWITZ	1.00									
TRESURER		X		X				0.	0.	0.
(4) CRAIG ALLENDER	1.00									
SECRETARY		X		X				0.	0.	0.
(5) BRIDGETTE CORRIDAN	1.00									
TRUSTEE		X						0.	0.	0.
(6) LIA HEATH	1.00									
TRUSTEE		X						0.	0.	0.

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Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal								113,302.	0.	9,588.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								113,302.	0.	9,588.

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2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d	228,600.			
	e Government grants (contributions)	1e	2,279,770.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,000.			
	g Noncash contributions included in lines 1a-1f	1g	$			
	h **Total.** Add lines 1a-1f		2,511,370.			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		10,987.			10,987.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross rents 6a	3,410.				
	b Less: rental expenses 6b	0.				
	c Rental income or (loss) 6c	3,410.				
	d Net rental income or (loss)		3,410.	3,410.		
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory 7a					
	b Less: cost or other basis and sales expenses 7b					
	c Gain or (loss) 7c					
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 8a					
	b Less: direct expenses 8b					
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19 9a					
	b Less: direct expenses 9b					
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances 10a					
	b Less: cost of goods sold 10b					
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
	11a OTHER REVENUE	900099	8,983.	8,983.		
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d		8,983.			
	12 **Total revenue.** See instructions		2,534,750.	12,393.	0.	10,987.

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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	156,404.	132,943.	23,461.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,239,521.	1,041,137.	198,384.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	206,600.	172,161.	34,439.	
9 Other employee benefits	146,391.	127,355.	19,036.	
10 Payroll taxes	45,927.	30,841.	15,086.	
11 Fees for services (nonemployees):				
a Management	64,583.		64,583.	
b Legal	1,048.		1,048.	
c Accounting	36,912.		36,912.	
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, column (A) amount, list line 11g expenses on Sch O.)	333,822.	333,822.		
12 Advertising and promotion	2,301.		2,301.	
13 Office expenses	19,305.	12,803.	6,502.	
14 Information technology	9,868.	9,868.		
15 Royalties				
16 Occupancy	162,933.	162,933.		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	30,312.	30,312.		
23 Insurance	12,824.		12,824.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER EXPENSES	23,946.	18,143.	5,803.	
b INSTRUCTIONAL MATERIAL	19,413.	19,413.		
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	2,512,110.	2,091,731.	420,379.	0.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

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Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	171,877.	1	490,511.
	2	Savings and temporary cash investments	404,219.	2	521,203.
	3	Pledges and grants receivable, net	185,211.	3	245,760.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 809,136.			
	b	Less: accumulated depreciation — 10b: 382,386.	457,062.	10c	426,750.
	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 33)	1,218,369.	16	1,684,224.
Liabilities	17	Accounts payable and accrued expenses	417,393.	17	506,106.
	18	Grants payable		18	
	19	Deferred revenue		19	
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	354,502.
	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		25	
	26	**Total liabilities.** Add lines 17 through 25	417,393.	26	860,608.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☒ and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	800,976.	27	823,616.
	28	Net assets with donor restrictions		28	
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	800,976.	32	823,616.
	33	Total liabilities and net assets/fund balances	1,218,369.	33	1,684,224.

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Form **990** (2019)

Part 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	2,534,750.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,512,110.
3	Revenue less expenses. Subtract line 2 from line 1	3	22,640.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	800,976.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	823,616.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

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SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☒ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) ▶ 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) ▶ 14 %

15 Public support percentage from 2018 Schedule A, Part II, line 14 ▶ 15 %

16a **33 1/3% support test - 2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test - 2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2019** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2018** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

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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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
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.*	3c		
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.*	4a		
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.*	4b		
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.*	4c		
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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
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.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

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Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	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		

Section 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, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. **Answer (a) and (b) below.**			
a	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 activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* **Part VI.**	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		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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		

Section 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		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1.	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3.	4	
5 Income tax imposed in prior year	5	
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

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Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2019 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in **Part VI**). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI.** See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions.			
7	**Excess distributions carryover to 2020.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

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

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

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2019

Name of the organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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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

☒ 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, II, and III.

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

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

Name of organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NOVATO CHARTER SHCOOL FOUNDATION 940 C STREET NOVATO, CA 94949	$ 228,600.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

DRAFT

Name of organization: NOVATO CHARTER SCHOOL

Employer identification number: 56-2609145

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

DRAFT

Name of organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (for example, recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____%
b Permanent endowment ▶ _____%
c Term endowment ▶ _____%

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations	3a(i)		
(ii) Related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		809,136.	382,386.	426,750.
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				426,750.

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" 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.) ▶		

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Part IX Other Assets.

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

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

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	2,534,750.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	2,534,750.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	2,534,750.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	2,512,110.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	2,512,110.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	2,512,110.

Part XIII Supplemental Information.

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

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PART X, LINE 2:

THE SCHOOL IS A NONPROFIT ENTITY EXEMPT FROM THE PAYMENT OF INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND CALIFORNIA REVENUE AND TAXATION CODE SECTION 23701D. ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR INCOME TAXES. MANAGEMENT HAS DETERMINED THAT ALL INCOME TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED UPON POTENTIAL AUDIT OR EXAMINATION; THEREFORE, NO DISCLOSURES OF UNCERTAIN INCOME TAX POSITIONS ARE REQUIRED. THE SCHOOL IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO THE EXEMPT PURPOSES. THE SCHOOL FILES AND EXEMPT SCHOOL RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE U.S. FEDERAL JURISDICTION AND WITH THE CALIFORNIA FRANCHISE TAX BOARD.

Part XIII Supplemental Information *(continued)*

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SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

Part I

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	X	
	NOVATO MAKES ITS NONDISCRIMINATORY POLICY KNOWN THROUGH ITS WEBSITE AND ON THE STUDENT'S APPLICATION. NOVATO DRAWS ITS STUDENTS FROM THE LOCAL COMMUNITY, AND CURRENTLY ENROLLS STUDENTS FROM VARIOUS RACIAL MINORITY GROUPS.			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		X
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	NOVATO CHARTER IS A PUBLIC SCHOOL THAT IS FREE TO ATTEND. THEY DO NOT PROVIDE ANY SCHOLARSHIPS OR OTHER FINANCIAL ASSISTANCE.			
5	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

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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 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

AS A PUBLIC CHARTER SCHOOL, NOVATO CHARTER RECEIVES A PER ADA FEE FROM THE CALIFORNIA DEPARTMENT OF EDUCATION FOR EVERY PUPIL ATTENDING THE SCHOOL. ADDITIONALLY, NOVATO CHATER IS ELIGIBLE FOR LOCAL, STATE, AND FEDERAL PROGRAMS, AND CALIFORNIA LOTTERY FUNDS.

DRAFT

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

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

THE HEALTHY GROWTH AND DEVELOPMENT OF THE WHOLE CHILD. THROUGH A CURRICULUM INSPIRED BY WALDORF-METHODS, OUR TEACHERS NURTURE THROUGH THE IMAGINATION IN THE EARLY YEARS, BUILDING A FOUNDATION FOR ABSTRACT THINKING, GRADUALLY AND APPROPRIATELY CHALLENGING THE INTELLECT THROUGHOUT THE GRADES. THIS PHILOSOPHY PLACES EQUAL EMPHASIS ON A SOLID ACADEMIC PROGRAM, ARTISTIC EXPRESSION, SOCIAL DEVELOPMENT AND ATTENTION TO THE INNER LIFE AND NATURAL RHYTHMS OF THE CHILD.

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

ABSTRACT THINKING, GRADUALLY AND APPROPRIATELY CHALLENGING THE INTELLECT THROUGHOUT THE GRADES. THIS PHILOSOPHY PLACES EQUAL EMPHASIS ON A SOLID ACADEMIC PROGRAM, ARTISTIC EXPRESSION, SOCIAL DEVELOPMENT AND ATTENTION TO THE INNER LIFE AND NATURAL RHYTHMS OF THE CHILD.

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

THERE ARE NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE BOARD.

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

THE 990 RETURN IS INITIALLY REVIEWED BY MANAGEMENT AND THEN REVIEWED BY THE BOARD PRIOR TO FILING THE RETURN.

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

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS

Name of the organization: NOVATO CHARTER SCHOOL

Employer identification number: 56-2609145

AND MEMBERS OF COMMITTEES CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACT, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE BOARD OF DIRECTORS MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

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

THE BOARD REVIEWS AND APPROVES THE SALARY OF THE EXECUTIVE DIRECTOR AT A BOARD MEETING. THIS PROCESS IS INCLUDED IN THE DISCUSSIONS FOR APPROVING THE ANNUAL BUDGET. THE BOARD DETERMINES THE EXECUTIVE DIRECTOR'S SALARY BY COMPARING IT TO SIMILAR POSITIONS WITHIN THE GEOGRAPHIC LOCATION OF THE SCHOOL.

DRAFT

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

THE SCHOOL PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER FEES FOR SERVICES:

PROGRAM SERVICE EXPENSES	585.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	585.

SPECIAL EDUCATION FEES FOR SERVICES:

PROGRAM SERVICE EXPENSES	323,994.
MANAGEMENT AND GENERAL EXPENSES	0.

Name of the organization: NOVATO CHARTER SCHOOL

Employer identification number: 56-2609145

FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	323,994.

CONSULTING FEES FOR SERVICES:

PROGRAM SERVICE EXPENSES	9,243.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	9,243.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	333,822.

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

DRAFT

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
NOVATO CHARTER SCHOOL FOUNDATION - 68-0470644, 940 C STREET, NOVATO, CA 94949	SUPPORT NOVATO CHARTER SCHOOL	CALIFORNIA	501(C)(3)	LINE 12A, I	N/A		X

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

Schedule R (Form 990) 2019

932161 09-10-19 LHA

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No

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

		Yes	No
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			
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?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	1o		X
p Reimbursement paid to related organization(s) for expenses	1p		X
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

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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) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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Part VII Supplemental Information

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

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Form **8868**
(Rev. January 2020)

Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Taxpayer identification number (TIN)
File by the due date for filing your return. See instructions.	NOVATO CHARTER SCHOOL	56-2609145
	Number, street, and room or suite no. If a P.O. box, see instructions. 940 C STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NOVATO, CA 94949	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ LAURELLE ANSPACH
  940 C. STREET - NOVATO, CA 94949
  Telephone No. ▶ 415-883-4254 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box ..... ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 17, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year _____ or
▶ ☒ tax year beginning JUL 1, 2019, and ending JUN 30, 2020.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$	0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.** Form **8868** (Rev. 1-2020)

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TAXABLE YEAR **2019**

California Exempt Organization Annual Information Return

928941 12-04-19
FORM **199**

Calendar Year 2019 or fiscal year beginning (mm/dd/yyyy) 07/01/2019 , and ending (mm/dd/yyyy) 06/30/2020 .

Corporation/Organization name	California corporation number
NOVATO CHARTER SCHOOL	2863435
Additional information. See instructions.	FEIN 56-2609145
Street address (suite or room) 940 C STREET	PMB no.
City NOVATO	State CA / ZIP code 94949
Foreign country name / Foreign province/state/county / Foreign postal code	

A First Return ..... ☐ Yes ☒ No
B Amended Return ..... ● ☐ Yes ☒ No
C IRC Section 4947(a)(1) trust ..... ☐ Yes ☒ No
D Final Information Return?
● ☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized
Enter date: (mm/dd/yyyy) ● _____
E Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other
F Federal return filed? (1) ● ☐ 990T (2) ● ☐ 990PF (3) ● ☐ Sch H (990)
(4) ☒ Other 990 series
G Is this a group filing? See instructions ..... ● ☐ Yes ☒ No
H Is this organization in a group exemption ..... ☐ Yes ☒ No
If "Yes," what is the parent's name?
_____
I Did the organization have any changes to its guidelines not reported to the FTB? See instructions ..... ● ☐ Yes ☒ No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. ..... ● ☐ Yes ☒ No
K Is the organization exempt under R&TC Section 23701g? ● ☐ Yes ☒ No
If "Yes," enter the gross receipts from nonmember sources $ _____
L If organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required ..... ● ☒
M Is the organization a Limited Liability Company? ..... ● ☐ Yes ☒ No
N Did the organization file Form 100 or Form 109 to report taxable income? ..... ● ☐ Yes ☒ No
O Is the organization under audit by the IRS or has the IRS audited in a prior year? ..... ● ☐ Yes ☒ No
P Is federal Form 1023/1024 pending? ..... ☐ Yes ☒ No
Date filed with IRS _____

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Part I **Complete Part I unless not required to file this form. See General Information B and C.**

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 ●	1	23,380	00
	2	Gross dues and assessments from members and affiliates ●	2		00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1 ●	3	2,511,370	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than $50,000, see General Information B ●	4	2,534,750	00
	5	Cost of goods sold ● 5 00			
	6	Cost or other basis, and sales expenses of assets sold ● 6 00			
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4 ●	8	2,534,750	00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18 ●	9	2,512,110	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 ●	10	22,640	00
Filing Fee	11	Total payments ●	11		00
	12	Use tax. See General Information K ●	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11 ●	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12 ●	14		00
	15	Filing fee $10 or $25. See General Information F	15	N/A	00
	16	Penalties and Interest. See General Information J	16		00
	17	**Balance due.** Add line 12, line 15, and line 16. Then subtract line 11 from the result ◉	17		00

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer ▶	Title	Date	● Telephone
	DIRECTOR		707-824-9700

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	● PTIN
WADE MCMULLEN, CPA	04/21/21		P00541671

Firm's name (or yours, if self-employed) and address ▶	● Firm's FEIN
CLIFTONLARSONALLEN LLP	41-0746749
2210 EAST ROUTE 66 GLENDORA, CA 91740	● Telephone (626) 857-7300

May the FTB discuss this return with the preparer shown above? See instructions ..... ● ☒ Yes ☐ No

Part II **Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.**

	1	Gross sales or receipts from all business activities. See instructions	1		00
	2	Interest	2		00
	3	Dividends	3	10,987	00
Receipts	4	Gross rents	4	3,410	00
from	5	Gross royalties	5		00
Other	6	Gross amount received from sale of assets (See Instructions)	6		00
Sources	7	Other income SEE STATEMENT 2	7	8,983	00
	8	**Total** gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	23,380	00
	9	Contributions, gifts, grants, and similar amounts paid	9		00
	10	Disbursements to or for members	10		00
	11	Compensation of officers, directors, and trustees SEE STATEMENT 3	11	156,404	00
	12	Other salaries and wages	12	1,239,521	00
Expenses	13	Interest	13		00
and	14	Taxes	14	45,927	00
Disburse-	15	Rents	15	162,933	00
ments	16	Depreciation and depletion (See instructions)	16	30,312	00
	17	Other Expenses and Disbursements SEE STATEMENT 4	17	877,013	00
	18	**Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	2,512,110	00

Schedule L **Balance Sheet**

Assets	Beginning of taxable year (a)	(b)	End of taxable year (c)	(d)
1 Cash		576,096		1,011,714
2 Net accounts receivable				
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments				
10 a Depreciable assets	809,136		809,136	
b Less accumulated depreciation	(352,074)	457,062	(382,386)	426,750
11 Land				
12 Other assets STMT 5		185,211		245,760
13 **Total assets**		1,218,369		1,684,224
Liabilities and net worth				
14 Accounts payable		417,393		506,106
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities STMT 6				354,502
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		800,976		823,616
22 **Total liabilities and net worth**		1,218,369		1,684,224

Schedule M-1 **Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.

1 Net income per books	22,640	7 Income recorded on books this year not included in this return	
2 Federal income tax		8 Deductions in this return not charged against book income this year	
3 Excess of capital losses over capital gains		9 Total. Add line 7 and line 8	
4 Income not recorded on books this year		10 Net income per return. Subtract line 9 from line 6	22,640
5 Expenses recorded on books this year not deducted in this return			
6 Total. Add line 1 through line 5	22,640		

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CA 199 CASH CONTRIBUTIONS INCLUDED ON PART I, LINE 3 STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
NOVATO CHARTER SHCOOL FOUNDATION	940 C STREET NOVATO, CA 94949		228,600.
TOTAL INCLUDED ON LINE 3			228,600.

CA 199 OTHER INCOME STATEMENT 2

DESCRIPTION	AMOUNT
OTHER REVENUE	8,983.
TOTAL TO FORM 199, PART II, LINE 7	8,983.

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CA 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 3

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
NIKKI LLOYD 940 C STREET NOVATO, CA 94949	DIRECTOR 40.00	156,404.
ALEXANDRIA QUAM 940 C STREET NOVATO, CA 94949	CHAIRPERSON 1.00	0.
ERIK BERKOWITZ 940 C STREET NOVATO, CA 94949	TRESURER 1.00	0.
CRAIG ALLENDER 940 C STREET NOVATO, CA 94949	SECRETARY 1.00	0.
BRIDGETTE CORRIDAN 940 C STREET NOVATO, CA 94949	TRUSTEE 1.00	0.
LIA HEATH 940 C STREET NOVATO, CA 94949	TRUSTEE 1.00	0.
TOTAL TO FORM 199, PART II, LINE 11		156,404.

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CA 199 OTHER EXPENSES STATEMENT 4

DESCRIPTION	AMOUNT
OTHER EXPENSES	23,946.
INSTRUCTIONAL MATERIAL	19,413.
PENSION PLAN CONTRIBUTIONS	206,600.
OTHER EMPLOYEE BENEFITS	146,391.
MANAGEMENT FEES	64,583.
LEGAL FEES	1,048.
ACCOUNTING FEES	36,912.
OTHER PROFESSIONAL FEES	333,822.
ADVERTISING AND PROMOTION	2,301.
OFFICE EXPENSES	19,305.
INFORMATION TECHNOLOGY	9,868.
INSURANCE	12,824.
TOTAL TO FORM 199, PART II, LINE 17	877,013.

CA 199 OTHER ASSETS STATEMENT 5

DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	185,211.	245,760.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	185,211.	245,760.

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CA 199 OTHER LIABILITIES STATEMENT 6

DESCRIPTION	BEG. OF YEAR	END OF YEAR
UNSECURED NOTES AND LOANS PAYABLE	0.	354,502.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	0.	354,502.

CA 199 FUND BALANCES STATEMENT 7

DESCRIPTION	BEG. OF YEAR	END OF YEAR
NET ASSETS WITHOUT DONOR RESTRICTIONS	800,976.	823,616.
TOTAL TO FORM 199, SCHEDULE L, LINE 21	800,976.	823,616.

022

Date Accepted _____

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR **2019**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name	Identifying number
NOVATO CHARTER SCHOOL	56-2609145

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts (Form 199, line 4)	1	2,534,750
2	Total gross income (Form 199, line 8)	2	2,534,750
3	Total expenses and disbursements (Form 199, line 9)	3	2,512,110

Part II Settle Your Account Electronically for Taxable Year 2019

4 ☐ Electronic funds withdrawal **4a** Amount **4b** Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____

6 Account number **7** Type of account: ☐ Checking ☐ Savings

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2019 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

Sign Here ▶ _____ (Signature of officer) _____ (Date) ▶ DIRECTOR (Title)

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Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2019 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature ▶ WADE MCMULLEN, CPA | Date | Check if also paid preparer [X] | Check if self-employed [ ] | ERO's PTIN P00541671

Firm's name (or yours if self-employed) and address ▶ CLIFTONLARSONALLEN LLP
2210 EAST ROUTE 66
GLENDORA, CA

Firm's FEIN 41-0746749

ZIP code 91740

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature ▶ _____ | Date | Check if self-employed [ ] | Paid preparer's PTIN

Firm's name (or yours if self-employed) and address ▶ _____

Firm's FEIN

ZIP code

For Privacy Notice, get FTB 1131 ENG/SP.

FTB 8453-EO 2019

929021 11-08-19

EXTENDED TO MAY 17, 2021

Form **990** (Rev. January 2020)

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning JUL 1, 2019 **and ending** JUN 30, 2020

B Check if applicable: Address change; Name change; Initial return; Final return/ terminated; Amended return; Application pending

C Name of organization
NOVATO CHARTER SCHOOL

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 940 C STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
NOVATO, CA 94949

F Name and address of principal officer: NIKKI LLOYD
940 C STREET, NOVATO, CA 94949

D Employer identification number
56-2609145

E Telephone number
004-158-8342

G Gross receipts $ 2,534,750.

H(a) Is this a group return for subordinates? Yes [X] No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ HTTP://WWW.NOVATOCHARTERSCHOOL.ORG/

K Form of organization: [X] Corporation Trust Association Other ▶

L Year of formation: 2005 **M** State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: THE NOVATO CHARTER SCHOOL IS AN EDUCATIONAL COMMUNITY THAT IS COMMITTED TO

2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	5
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	45
6	Total number of volunteers (estimate if necessary)	6	40
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	2,542,605.	2,511,370.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,681.	10,987.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,039.	12,393.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,560,325.	2,534,750.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,791,457.	1,794,843.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	685,863.	717,267.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,477,320.	2,512,110.
19	Revenue less expenses. Subtract line 18 from line 12	83,005.	22,640.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	1,218,369.	1,684,224.
21	Total liabilities (Part X, line 26)	417,393.	860,608.
22	Net assets or fund balances. Subtract line 21 from line 20	800,976.	823,616.

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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date

▶ NIKKI LLOYD, DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
WADE MCMULLEN, CPA	WADE MCMULLEN, CPA	04/29/21		P00541671

Firm's name ▶ CLIFTONLARSONALLEN LLP — Firm's EIN ▶ 41-0746749

Firm's address ▶ 2210 EAST ROUTE 66
GLENDORA, CA 91740 — Phone no. (626) 857-7300

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE NOVATO CHARTER SCHOOL IS AN EDUCATIONAL COMMUNITY THAT IS COMMITTED TO THE HEALTHY GROWTH AND DEVELOPMENT OF THE WHOLE CHILD. THROUGH A CURRICULUM INSPIRED BY WALDORF-METHODS, OUR TEACHERS NURTURE THROUGH THE IMAGINATION IN THE EARLY YEARS, BUILDING A FOUNDATION FOR

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ..... ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses $ 2,091,731. including grants of $ _____) (Revenue $ 12,393.)
A CHARTER SCHOOL PROVIDING EDUCATIONAL OPPORTUNITIES TO THE SURROUNDING COMMUNITY SERVING AROUND 265 STUDENTS GRADES K-8TH, OVER 180 INSTRUCTIONAL DAYS.

4b (Code: _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4c (Code: _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 2,091,731.

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		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? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
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)? *If "Yes," complete Schedule E*	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		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		X

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Part 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 and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
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 Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit 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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 45			
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)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on 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	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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**		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).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		X
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the 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:			
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state?	**13a**		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	**15**		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**		X

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	5		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b			X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		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		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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ CA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 ▶

LAURELLE ANSPACH - 415-883-4254
940 C. STREET, NOVATO, CA 94949

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NIKKI LLOYD	40.00									
DIRECTOR				X				113,302.	0.	9,588.
(2) ALEXANDRIA QUAM	1.00									
CHAIRPERSON		X		X				0.	0.	0.
(3) ERIK BERKOWITZ	1.00									
TRESURER		X		X				0.	0.	0.
(4) CRAIG ALLENDER	1.00									
SECRETARY		X		X				0.	0.	0.
(5) BRIDGETTE CORRIDAN	1.00									
TRUSTEE		X						0.	0.	0.
(6) LIA HEATH	1.00									
TRUSTEE		X						0.	0.	0.

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Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal ▶								113,302.	0.	9,588.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								113,302.	0.	9,588.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

		Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

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Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	228,600.				
	e Government grants (contributions)	1e	2,279,770.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,000.				
	g Noncash contributions included in lines 1a-1f	1g	$				
	h **Total.** Add lines 1a-1f			2,511,370.			
Program Service Revenue			**Business Code**				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			10,987.			10,987.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real / (ii) Personal				
	6a Gross rents	6a	3,410.				
	b Less: rental expenses	6b	0.				
	c Rental income or (loss)	6c	3,410.				
	d Net rental income or (loss)			3,410.	3,410.		
			(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	7a					
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			**Business Code**				
	11a OTHER REVENUE		900099	8,983.	8,983.		
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d			8,983.			
	12 **Total revenue.** See instructions			2,534,750.	12,393.	0.	10,987.

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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	156,404.	132,943.	23,461.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,239,521.	1,041,137.	198,384.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	206,600.	172,161.	34,439.	
9 Other employee benefits	146,391.	127,355.	19,036.	
10 Payroll taxes	45,927.	30,841.	15,086.	
11 Fees for services (nonemployees):				
a Management	64,583.		64,583.	
b Legal	1,048.		1,048.	
c Accounting	36,912.		36,912.	
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, column (A) amount, list line 11g expenses on Sch O.)	333,822.	333,822.		
12 Advertising and promotion	2,301.		2,301.	
13 Office expenses	19,305.	12,803.	6,502.	
14 Information technology	9,868.	9,868.		
15 Royalties				
16 Occupancy	162,933.	162,933.		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	30,312.	30,312.		
23 Insurance	12,824.		12,824.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER EXPENSES	23,946.	18,143.	5,803.	
b INSTRUCTIONAL MATERIAL	19,413.	19,413.		
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	2,512,110.	2,091,731.	420,379.	0.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

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Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	171,877.	1	490,511.
	2	Savings and temporary cash investments	404,219.	2	521,203.
	3	Pledges and grants receivable, net	185,211.	3	245,760.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 809,136.			
	b	Less: accumulated depreciation — 10b: 382,386.	457,062.	10c	426,750.
	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 33)	1,218,369.	16	1,684,224.
Liabilities	17	Accounts payable and accrued expenses	417,393.	17	506,106.
	18	Grants payable		18	
	19	Deferred revenue		19	
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	354,502.
	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		25	
	26	**Total liabilities.** Add lines 17 through 25	417,393.	26	860,608.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☒ and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	800,976.	27	823,616.
	28	Net assets with donor restrictions		28	
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	800,976.	32	823,616.
	33	Total liabilities and net assets/fund balances	1,218,369.	33	1,684,224.

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Form **990** (2019)

Part 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	2,534,750.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,512,110.
3	Revenue less expenses. Subtract line 2 from line 1	3	22,640.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	800,976.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	823,616.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

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SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☒ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) ▶ 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2018 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test - 2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test - 2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2019** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2018** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

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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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
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.*	3c		
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.*	4a		
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.*	4b		
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.*	4c		
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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
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.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

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Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	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		

Section 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, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. **Answer (a) and (b) below.**			
a	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 activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* **Part VI.**	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		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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		

Section 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		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1.	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3.	4	
5 Income tax imposed in prior year	5	
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

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Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2019 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-able cause required- explain in **Part VI**). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI.** See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions.			
7	**Excess distributions carryover to 2020.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

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

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

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2019

Name of the organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

☒ 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, II, and III.

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

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

DRAFT

Name of organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NOVATO CHARTER SHCOOL FOUNDATION 940 C STREET NOVATO, CA 94949	$ 228,600.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

DRAFT

Name of organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

DRAFT

Name of organization

NOVATO CHARTER SCHOOL

Employer identification number

56-2609145

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (for example, recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

		Held at the End of the Tax Year
a	Total number of conservation easements 2a	
b	Total acreage restricted by conservation easements 2b	
c	Number of conservation easements on a certified historic structure included in (a) 2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____%
b Permanent endowment ▶ _____%
c Term endowment ▶ _____%

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations	3a(i)		
(ii) Related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		809,136.	382,386.	426,750.
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				426,750.

Schedule D (Form 990) 2019

DRAFT

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" 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.

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.)* ▶	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

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

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	2,534,750.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	2,534,750.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	2,534,750.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	2,512,110.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	2,512,110.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	2,512,110.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE SCHOOL IS A NONPROFIT ENTITY EXEMPT FROM THE PAYMENT OF INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND CALIFORNIA REVENUE AND TAXATION CODE SECTION 23701D. ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR INCOME TAXES. MANAGEMENT HAS DETERMINED THAT ALL INCOME TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED UPON POTENTIAL AUDIT OR EXAMINATION; THEREFORE, NO DISCLOSURES OF UNCERTAIN INCOME TAX POSITIONS ARE REQUIRED. THE SCHOOL IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO THE EXEMPT PURPOSES. THE SCHOOL FILES AND EXEMPT SCHOOL RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE U.S. FEDERAL JURISDICTION AND WITH THE CALIFORNIA FRANCHISE TAX BOARD.

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Part XIII Supplemental Information *(continued)*

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SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

Part I

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	X	
	NOVATO MAKES ITS NONDISCRIMINATORY POLICY KNOWN THROUGH ITS WEBSITE AND ON THE STUDENT'S APPLICATION. NOVATO DRAWS ITS STUDENTS FROM THE LOCAL COMMUNITY, AND CURRENTLY ENROLLS STUDENTS FROM VARIOUS RACIAL MINORITY GROUPS.			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		X
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	NOVATO CHARTER IS A PUBLIC SCHOOL THAT IS FREE TO ATTEND. THEY DO NOT PROVIDE ANY SCHOLARSHIPS OR OTHER FINANCIAL ASSISTANCE.			
5	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

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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 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

AS A PUBLIC CHARTER SCHOOL, NOVATO CHARTER RECEIVES A PER ADA FEE FROM THE CALIFORNIA DEPARTMENT OF EDUCATION FOR EVERY PUPIL ATTENDING THE SCHOOL. ADDITIONALLY, NOVATO CHATER IS ELIGIBLE FOR LOCAL, STATE, AND FEDERAL PROGRAMS, AND CALIFORNIA LOTTERY FUNDS.

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

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

THE HEALTHY GROWTH AND DEVELOPMENT OF THE WHOLE CHILD. THROUGH A CURRICULUM INSPIRED BY WALDORF-METHODS, OUR TEACHERS NURTURE THROUGH THE IMAGINATION IN THE EARLY YEARS, BUILDING A FOUNDATION FOR ABSTRACT THINKING, GRADUALLY AND APPROPRIATELY CHALLENGING THE INTELLECT THROUGHOUT THE GRADES. THIS PHILOSOPHY PLACES EQUAL EMPHASIS ON A SOLID ACADEMIC PROGRAM, ARTISTIC EXPRESSION, SOCIAL DEVELOPMENT AND ATTENTION TO THE INNER LIFE AND NATURAL RHYTHMS OF THE CHILD.

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

ABSTRACT THINKING, GRADUALLY AND APPROPRIATELY CHALLENGING THE INTELLECT THROUGHOUT THE GRADES. THIS PHILOSOPHY PLACES EQUAL EMPHASIS ON A SOLID ACADEMIC PROGRAM, ARTISTIC EXPRESSION, SOCIAL DEVELOPMENT AND ATTENTION TO THE INNER LIFE AND NATURAL RHYTHMS OF THE CHILD.

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

THERE ARE NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE BOARD.

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

THE 990 RETURN IS INITIALLY REVIEWED BY MANAGEMENT AND THEN REVIEWED BY THE BOARD PRIOR TO FILING THE RETURN.

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

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS

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Name of the organization: NOVATO CHARTER SCHOOL

Employer identification number: 56-2609145

AND MEMBERS OF COMMITTEES CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACT, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE BOARD OF DIRECTORS MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

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

THE BOARD REVIEWS AND APPROVES THE SALARY OF THE EXECUTIVE DIRECTOR AT A BOARD MEETING. THIS PROCESS IS INCLUDED IN THE DISCUSSIONS FOR APPROVING THE ANNUAL BUDGET. THE BOARD DETERMINES THE EXECUTIVE DIRECTOR'S SALARY BY COMPARING IT TO SIMILAR POSITIONS WITHIN THE GEOGRAPHIC LOCATION OF THE SCHOOL.

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

THE SCHOOL PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER FEES FOR SERVICES:

PROGRAM SERVICE EXPENSES	585.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	585.

SPECIAL EDUCATION FEES FOR SERVICES:

PROGRAM SERVICE EXPENSES	323,994.
MANAGEMENT AND GENERAL EXPENSES	0.

Name of the organization: NOVATO CHARTER SCHOOL

Employer identification number: 56-2609145

FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	323,994.

CONSULTING FEES FOR SERVICES:

PROGRAM SERVICE EXPENSES	9,243.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	9,243.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	333,822.

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NOVATO CHARTER SCHOOL

Employer identification number
56-2609145

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
NOVATO CHARTER SCHOOL FOUNDATION - 68-0470644, 940 C STREET, NOVATO, CA 94949	SUPPORT NOVATO CHARTER SCHOOL	CALIFORNIA	501(C)(3)	LINE 12A, I	N/A		X

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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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	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?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c	X	
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	1o		X
p Reimbursement paid to related organization(s) for expenses	1p		X
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

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)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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Part VII Supplemental Information

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

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Form **8868**
(Rev. January 2020)

Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Taxpayer identification number (TIN)
File by the due date for filing your return. See instructions.	NOVATO CHARTER SCHOOL	56-2609145
	Number, street, and room or suite no. If a P.O. box, see instructions. 940 C STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NOVATO, CA 94949	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ LAURELLE ANSPACH
  940 C. STREET - NOVATO, CA 94949
  Telephone No. ▶ 415-883-4254 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box ..... ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 17, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year _____ or
▶ ☒ tax year beginning JUL 1, 2019, and ending JUN 30, 2020.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$	0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.** Form **8868** (Rev. 1-2020)

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TAXABLE YEAR **2019**

California Exempt Organization Annual Information Return

928941 12-04-19
FORM **199**

Calendar Year 2019 or fiscal year beginning (mm/dd/yyyy) 07/01/2019 , and ending (mm/dd/yyyy) 06/30/2020 .

Corporation/Organization name	California corporation number
NOVATO CHARTER SCHOOL	2863435
Additional information. See instructions.	FEIN 56-2609145
Street address (suite or room) 940 C STREET	PMB no.
City NOVATO	State CA / ZIP code 94949
Foreign country name / Foreign province/state/county / Foreign postal code	

A First Return ..... ☐ Yes ☒ No
B Amended Return ..... ● ☐ Yes ☒ No
C IRC Section 4947(a)(1) trust ..... ☐ Yes ☒ No
D Final Information Return?
● ☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized
Enter date: (mm/dd/yyyy) ● _____
E Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other
F Federal return filed? (1) ● ☐ 990T (2) ● ☐ 990PF (3) ● ☐ Sch H (990)
(4) ☒ Other 990 series
G Is this a group filing? See instructions ..... ● ☐ Yes ☒ No
H Is this organization in a group exemption ..... ☐ Yes ☒ No
If "Yes," what is the parent's name?
_____
I Did the organization have any changes to its guidelines not reported to the FTB? See instructions ..... ● ☐ Yes ☒ No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. ..... ● ☐ Yes ☒ No
K Is the organization exempt under R&TC Section 23701g? ● ☐ Yes ☒ No
If "Yes," enter the gross receipts from nonmember sources $ _____
L If organization is a public charity exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required ..... ● ☒
M Is the organization a Limited Liability Company? ..... ● ☐ Yes ☒ No
N Did the organization file Form 100 or Form 109 to report taxable income? ..... ● ☐ Yes ☒ No
O Is the organization under audit by the IRS or has the IRS audited in a prior year? ..... ● ☐ Yes ☒ No
P Is federal Form 1023/1024 pending? ..... ☐ Yes ☒ No
Date filed with IRS _____

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Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 ●	1	23,380	00
	2	Gross dues and assessments from members and affiliates ●	2		00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1 ●	3	2,511,370	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than $50,000, see General Information B ●	4	2,534,750	00
	5	Cost of goods sold ● 5 00			
	6	Cost or other basis, and sales expenses of assets sold ● 6 00			
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4 ●	8	2,534,750	00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18 ●	9	2,512,110	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 ●	10	22,640	00
Filing Fee	11	Total payments ●	11		00
	12	Use tax. See General Information K ●	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11 ●	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12 ●	14		00
	15	Filing fee $10 or $25. See General Information F	15	N/A	00
	16	Penalties and Interest. See General Information J	16		00
	17	**Balance due.** Add line 12, line 15, and line 16. Then subtract line 11 from the result ◉	17		00

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer ▶	Title	Date	● Telephone
	DIRECTOR		707-824-9700

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	● PTIN
WADE MCMULLEN, CPA	04/29/21		P00541671

Firm's name (or yours, if self-employed) and address ▶	● Firm's FEIN
CLIFTONLARSONALLEN LLP	41-0746749
2210 EAST ROUTE 66 GLENDORA, CA 91740	● Telephone (626) 857-7300

May the FTB discuss this return with the preparer shown above? See instructions ..... ● ☒ Yes ☐ No

Part II **Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.**

	1	Gross sales or receipts from all business activities. See instructions	1		00
	2	Interest	2		00
	3	Dividends	3	10,987	00
Receipts	4	Gross rents	4	3,410	00
from	5	Gross royalties	5		00
Other	6	Gross amount received from sale of assets (See Instructions)	6		00
Sources	7	Other income SEE STATEMENT 2	7	8,983	00
	8	**Total** gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	23,380	00
	9	Contributions, gifts, grants, and similar amounts paid	9		00
	10	Disbursements to or for members	10		00
	11	Compensation of officers, directors, and trustees SEE STATEMENT 3	11	156,404	00
	12	Other salaries and wages	12	1,239,521	00
Expenses	13	Interest	13		00
and	14	Taxes	14	45,927	00
Disburse-	15	Rents	15	162,933	00
ments	16	Depreciation and depletion (See instructions)	16	30,312	00
	17	Other Expenses and Disbursements SEE STATEMENT 4	17	877,013	00
	18	**Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	2,512,110	00

Schedule L **Balance Sheet**

Assets	Beginning of taxable year (a)	(b)	End of taxable year (c)	(d)
1 Cash		576,096		1,011,714
2 Net accounts receivable				
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments				
10 a Depreciable assets	809,136		809,136	
b Less accumulated depreciation	(352,074)	457,062	(382,386)	426,750
11 Land				
12 Other assets STMT 5		185,211		245,760
13 **Total assets**		1,218,369		1,684,224
Liabilities and net worth				
14 Accounts payable		417,393		506,106
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities STMT 6				354,502
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		800,976		823,616
22 **Total liabilities and net worth**		1,218,369		1,684,224

Schedule M-1 **Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.

1 Net income per books	22,640	7 Income recorded on books this year not included in this return	
2 Federal income tax		8 Deductions in this return not charged against book income this year	
3 Excess of capital losses over capital gains		9 Total. Add line 7 and line 8	
4 Income not recorded on books this year		10 Net income per return. Subtract line 9 from line 6	22,640
5 Expenses recorded on books this year not deducted in this return			
6 Total. Add line 1 through line 5	22,640		

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CA 199 CASH CONTRIBUTIONS INCLUDED ON PART I, LINE 3 STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
NOVATO CHARTER SHCOOL FOUNDATION	940 C STREET NOVATO, CA 94949		228,600.
TOTAL INCLUDED ON LINE 3			228,600.

CA 199 OTHER INCOME STATEMENT 2

DESCRIPTION	AMOUNT
OTHER REVENUE	8,983.
TOTAL TO FORM 199, PART II, LINE 7	8,983.

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CA 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 3

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
NIKKI LLOYD 940 C STREET NOVATO, CA 94949	DIRECTOR 40.00	156,404.
ALEXANDRIA QUAM 940 C STREET NOVATO, CA 94949	CHAIRPERSON 1.00	0.
ERIK BERKOWITZ 940 C STREET NOVATO, CA 94949	TRESURER 1.00	0.
CRAIG ALLENDER 940 C STREET NOVATO, CA 94949	SECRETARY 1.00	0.
BRIDGETTE CORRIDAN 940 C STREET NOVATO, CA 94949	TRUSTEE 1.00	0.
LIA HEATH 940 C STREET NOVATO, CA 94949	TRUSTEE 1.00	0.
TOTAL TO FORM 199, PART II, LINE 11		156,404.

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CA 199 OTHER EXPENSES STATEMENT 4

DESCRIPTION	AMOUNT
OTHER EXPENSES	23,946.
INSTRUCTIONAL MATERIAL	19,413.
PENSION PLAN CONTRIBUTIONS	206,600.
OTHER EMPLOYEE BENEFITS	146,391.
MANAGEMENT FEES	64,583.
LEGAL FEES	1,048.
ACCOUNTING FEES	36,912.
OTHER PROFESSIONAL FEES	333,822.
ADVERTISING AND PROMOTION	2,301.
OFFICE EXPENSES	19,305.
INFORMATION TECHNOLOGY	9,868.
INSURANCE	12,824.
TOTAL TO FORM 199, PART II, LINE 17	877,013.

CA 199 OTHER ASSETS STATEMENT 5

DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	185,211.	245,760.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	185,211.	245,760.

CA 199 OTHER LIABILITIES STATEMENT 6

DESCRIPTION	BEG. OF YEAR	END OF YEAR
UNSECURED NOTES AND LOANS PAYABLE	0.	354,502.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	0.	354,502.

CA 199 FUND BALANCES STATEMENT 7

DESCRIPTION	BEG. OF YEAR	END OF YEAR
NET ASSETS WITHOUT DONOR RESTRICTIONS	800,976.	823,616.
TOTAL TO FORM 199, SCHEDULE L, LINE 21	800,976.	823,616.

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022

Date Accepted _____

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR **2019**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name	Identifying number
NOVATO CHARTER SCHOOL	56-2609145

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts (Form 199, line 4)	1	2,534,750
2	Total gross income (Form 199, line 8)	2	2,534,750
3	Total expenses and disbursements (Form 199, line 9)	3	2,512,110

Part II Settle Your Account Electronically for Taxable Year 2019

4 ☐ Electronic funds withdrawal **4a** Amount **4b** Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____

6 Account number **7** Type of account: ☐ Checking ☐ Savings

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2019 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

Sign Here ▶ _____ (Signature of officer) _____ (Date) ▶ DIRECTOR (Title)

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2019 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature ▶ WADE MCMULLEN, CPA | Date | Check if also paid preparer ☒ | Check if self-employed ☐ | ERO's PTIN P00541671

Firm's name (or yours if self-employed) and address ▶ CLIFTONLARSONALLEN LLP, 2210 EAST ROUTE 66, GLENDORA, CA | Firm's FEIN 41-0746749 | ZIP code 91740

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature ▶ | Date | Check if self-employed ☐ | Paid preparer's PTIN

Firm's name (or yours if self-employed) and address ▶ | Firm's FEIN | ZIP code

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For Privacy Notice, get FTB 1131 ENG/SP. FTB 8453-EO 2019

929021 11-08-19

BOARD RESOLUTION

APRIL 21, 2021

Authorization of 2020-21 Salary Action / Bonus

Background:

The below salary actions were incorporated into and approved as part of the 2nd Interim budget at the March 2021 Regular Board Meeting. The assumptions incorporated into the original 20-21 June budget that included a "salary freeze" for 20-21, namely an overall State Funding decrease, no longer pertain. In addition, as part of state legislation (AB86) the school is scheduled to receive a state funding apportionment for an In-Person Instruction Grant.

Resolution:

It was resolved that:

1. The board rescinds its previous actions (as part of 20-21 Original/June Budget process) related to a "salary freeze" for the 20-21 school year.
2. This action is granted to active employees with current assignments as of April 15, 2021.
3. The board grants salary increases/bonuses per the actions listed below to be granted in the form or combination of forms acceptable for payroll and retirement systems and related procedures including the following: one-time salary bonuses / incentive grant payments; retroactive salary increases (including "step and column" increases); stipends; or any other form which accomplishes the granting of additional salary per the attached schedule. *All of the following actions shall effectively be retroactive to the beginning of the 20-21 school year or calculated based on total year 20-21 pre-bonus/increase salary amounts.*

Summary of Actions:

4. Certificated Teachers ($22.8K):
    a. All certificated teachers *hired prior to the 20-21 school year* shall first receive the equivalent of a one step advancement on the existing Certificated Teacher Salary Schedule (96-00); which equates to a $1,000 salary/step increase (pro-rated for FTE) for the teachers who meet this criterion.
    b. Subsequent to (3) above, all certificated teachers shall be granted a 1.75% salary increase/bonus.
    c. It is noted that the above actions result in an overall certificated teacher salary increase of 2.50%.
5. Certificated Directors hired prior to 20-21 shall be granted an increase equivalent to one step on the existing Director Salary Schedule (99-00). Certificated Directors hired in 20-21 shall receive a 1.75% increase. ($4.7K)

6. Classified Employees hired prior to 20-21 shall receive the equivalent of a 2.5% salary increase / bonus. Employees hired in 20-21 shall receive a 1.75% increase. For hourly employees the increase/bonus will be calculated based on their total year earnings or estimate thereof. ($7.0K est)
    a. Classified Employees on the Classified – Annual Salary Schedule (97-00) hired prior to 20-21 shall receive the equivalent of advancing one step. Those hired in 20-21 shall receive 1.75%
    b. All other Classified Employees *hired prior to the 20-21 school year* shall be advanced one step on the existing Classified – Hourly Salary Schedule (98-00) or receive the equivalent.

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i. This can alternatively be accomplished by granting a 2.5% bonus based on salaries earned through April 30, 2021 and using the new rate for all subsequent salary payments; or granting a 2.5% bonus based on total year earnings at 6/30/21.

Certified by: _____ Date: _____
Board Secretary

DRAFT

2021 BOARD APPLICATION – LIA HEATH

1. What do you hope to accomplish as a member of the NCS Board of Directors?

My hope as a board member is to ensure that we as a school are upholding the highest educational standards for our students, and doing so according to our mission & core principles. With respect, collaboration, creativity and the art of teaching, we are accountable for the results of our holistic and developmental approach. Keeping these guiding principles at the heart of our decision making enables us to best serve our community, staff and ultimately our students. After Covid 19 presented us with an extremely difficult year, we are faced with multiple exacerbated challenges including social/emotional issues, racial discrimination and learning loss. As we return to in-person classes after a year of remote and hybrid education, we have an opportunity during this transition to assess and make adjustments based on our learnings. My hope is that we at NCS can embrace this opportunity to face our challenges, grow, and come out stronger and better.

2. Please list the qualifications you would bring to the job (such as management skills, financial skills, fundraising experience, other Board memberships, and/or relevant volunteer activities).

I am finishing my first term on the Novato Charter School Board, and this application is to serve on the Board for a second term. I can say with experience that there is a learning curve in joining any Board and that is certainly true for NCS. Now that I am completing my first 3-year term, I feel like I have a solid understanding of our budget and its nuances, our Charter and our relationship with NUSD, the LCAP, as well as countless other policies, procedures and relevant aspects of maintaining a thriving Charter School. With this gained understanding I feel like I've hit my stride and can truly be an effective board member for the upcoming term.

In addition to the Board, I have also volunteered at NCS as a room parent, a class play coordinator, a field trip coordinator and several other jobs that keep me engaged with the students and teachers. My community involvement outside of NCS includes serving as a Board Member of the Novato Mother's Club and graduating with the 2019 Novato Leadership Class through the Novato Chamber of Commerce.

Outside of NCS, I have worked for over 20 years as an apparel designer for large outdoor and athleisure companies including The North Face and Athleta. I believe that with my design background I bring extensive experience in creative thinking and solution-oriented problem solving that brings a unique perspective and skill set the board room setting.

3. Please express something of your philosophy and vision regarding the NCS as a school guided by the Core Principles of Waldorf Education.

I was originally introduced to Waldorf Education by friends in the design industry who had their children in Waldorf-based programs. Based on their enthusiasm, I toured the Novato Charter School and was immediately impressed and drawn in by my observations. I remember being particularly impressed that the students wrote and illustrated their own textbooks – what a wonderful way to truly learn and understand a concept by creating it through your own eyes. I loved seeing the 6th graders speaking aloud

in their classrooms with confidence and poise. I observed a level of engagement among both the teachers and students that I had not seen elsewhere.

While my initial love of Waldorf was instinctual, I have learned much more about the philosophies of Rudolf Steiner as my children have progressed through the grades. Each step of their education is thoroughly thought through and tied to the natural development of their minds, hearts and bodies. I love the unique methods that the Waldorf pedagogy uses to make these mind/heart/body connections – from imaginative stories of magical lands, to cooking and gardening, to weaving ribbons around the maypole. It is brilliant as a parent to see your 6-year-old son knitting a scarf or your 10-year-old daughter practicing the unicycle. I feel so fortunate to benefit from these enriching aspects of a Waldorf education and still be a part of the public school system. To me, the public Waldorf Charter arrangement provides the ideal educational platform for K-8 development.

NOVATO CHARTER SCHOOL

Application for NCS Board of Directors

Thank you for your interest in serving on the NCS Board of Directors. This application consists of three parts: the biographical information to be completed below and both a shorter and longer statement of your qualifications and ideas for the NCS (these statements are described in detail below). Please complete all three parts and return them to the NCS Board Clerk, Megan Bloom (mbloom@nusd.org) no later than **Friday, April 16th**.

Name: Lia Heath

Address: 134 Rockrose Way, Novato CA 94945

Telephone (Home): 415-577-2430

Telephone (Work): 415-577-2430

Can you commit to a minimum of one evening plus an additional five to ten hours of time a month? Yes x No _____

Explanation if necessary: _____

Please complete and return with this application form a short, 50-word statement for publication in *The Thread* addressing your qualifications for the job and a brief description of your vision for the school. You must also complete a longer (maximum one typed page) statement specifically answering the questions listed below. This second statement will be posted on the Bulletin Board and will be available as a handout in the office.

1. What do you hope to accomplish as a member of the NCS Board of Directors?

2. Please list the qualifications you would bring to the job (such as management skills, financial skills, fundraising experience, other Board memberships, and/or relevant volunteer activities).

3. Please express something of your philosophy and vision regarding the NCS as a school guided by the Core Principles of Public Waldorf Education.

NOVATO CHARTER SCHOOL

Application for NCS Board of Directors

Thank you for your interest in serving on the NCS Board of Directors. This application consists of three parts: the biographical information to be completed below and both a shorter and longer statement of your qualifications and ideas for the NCS (these statements are described in detail below). Please complete all three parts and return them to the NCS office by the due date.

Name: Craig William Allender

Address: 677 Cherry St, Novato, CA 94945

Telephone (Home): 415-652-4502 Telephone (Work): 415-343-3002

Can you commit to a minimum of one evening plus an additional five to ten hours of time a month? Yes X No ___

Explanation if necessary: _____

_____

Please complete and return with this application form a short, 50-word statement for publication in *The Weekly Thread* addressing your qualifications for the job and a brief description of your vision for the school. You must also complete a longer (maximum one typed page) statement specifically answering the questions listed below. This second statement will be posted on the Bulletin Board and will be available as a handout in the office.

1. What do you hope to accomplish as a member of the NCS Board of Directors?

My continued focus from my first term on the NCS Board will be on the NCS campus and facilities. We made great progress over the last three years, although much of it was derailed by the Covid pandemic. We have made progress on our buildings and grounds, having completed roofing repairs and starting a routine maintenance program for our classroom HVAC units. We are also in the process of coordinating the design and erection of a new portable to support before and after-care, as well as community events. Following that effort, I hope to continue to improve campus conditions and the facilities in which our children learn and grow to ensure they can last the next 20 years without distraction. The grounds are beautiful and perfect for the Waldorf-inspired atmosphere and I want to ensure that we can assist the effort to continue and build upon that atmosphere.

As a part of maintaining the NCS environment, I look forward to working with NUSD, NCS administration, NCS faculty and NCS families to identify areas of the curriculum, campus, and general school environment that need updating or improvement.

There are many other areas of school management for which I hope to provide continued support, including a balanced budget with state-mandated surplus for good financial standing, competitive pay rates for our teachers and staff, strong relationships with our authorizer, increasing diversity of our student body and community outreach/involvement.

2. Please list the qualifications you would bring to the job (such as management skills, financial skills, fundraising experience, other Board memberships, and/or relevant volunteer activities).

Having just completed three years serving on the NCS Board, I have learned about school operations, function, budgets, and planning. I served as the secretary and treasurer, and also participated on the facilities committee and Covid re-entry task force. I made it past the Board learning curve, and can continue to be an active participant for the next Board term. I have also been regularly involved in various facility improvements, including roofing repairs, HVAC repairs, and coordination for a new portable on campus. Beyond my recent NCS Board experience, I am a manager at a large national engineering firm in San Francisco, where I directly oversee numerous staff, layout career paths for future leaders, and have a leadership position in our office related to recruiting and office management. I manage clients, projects, budgets, and staff on a daily basis for over 60 large scale design and construction projects. I recently served on the Board of Directors for a national industry group that strives to advance the construction industry and the quality of work that is performed. While on that Board I lead the Institute to advance into new technologies, and to revise its vision and mission statement for a new era, all while working with a variety of generations and levels of sophistication. Throughout family's involvement with NCS, I offered my time and energy on a variety of building and facility needs related to my engineering background, and quickly took on a leadership role with the parent facility volunteer group known as the Tiger Team. My passion for a healthy and exciting learning atmosphere for our children has lead me to oversee and coordinate this group of dedicated parents for various projects and tasks around the NCS campus, including significant activities preparing the campus for re-entry after the Covid pandemic. I've had the opportunity to work closely not only with parents and faculty, but also our administrators to understand our funding and need for volunteer work around the campus.

3. Please express something of your philosophy and vision regarding the NCS as a Waldorf-inspired school.

The Waldorf-inspired school atmosphere is an ideal setting for my and many other children. The community environment is one that I truly appreciate and embrace, as it leads the administration, faculty, parents and children to learn and grow in a way that stands out from other educational approaches. You can see the development in our students (and parents!) into strong, productive, empathetic contributors to our world. Being able to communicate, participate, interact, and contribute is becoming an increasingly valuable skill that can only be fostered in an atmosphere where community,

kindness, compassion and connection to people and nature are a core focus of daily instruction.

I hope that I can continue to be a part of the NCS Board of Directors to have not only a continued role in creating, maintaining, and fostering the Magical NCS environment, but also rebuilding our spirit in a post-pandemic world.

50 WORD STATEMENT

Having just completed my first term on the NCS Board, I'm excited to move the school past the Covid pandemic and see it thrive in its intended capacity to nurture our students' head, heart and hands through support, campus and facility improvement, and staff/faculty engagement.

Memorandum

Date: 15 April 2021

To: NCS Board of Directors

From: Craig Allender, on behalf of NCS Facilities Team

Subject: NCS Childcare Location Options

NCS is looking at options for physical locations to host before- and after-care childcare services for NCS families. Based on County health department restrictions we cannot currently share classroom and restroom facilities with childcare services due to limits on stable groups and due to cleaning requirements between group uses. Additional spaces on campus, such as the multi-purpose room, are supporting other essential needs, such as our mandated triage space for on-campus illnesses. We will continue to evaluate returning to shared spaces as Option 5 describes below.

We are currently exploring on-site and off-site locations, as outlined below, for childcare for NCS families. The intent of this proposal is to share options with the Board for consideration of approving design services for the preparation of on-site space to receive a new portable classroom.

Option 1 – On-Site Portable with Purchased New Building

This option includes utilizing space west of the current 5th Grade Classroom, on the blacktop. The scope of work would include contracting an architect to design the space per local codes and the California *Division of the State Architect* (DSA). The design would include site utilities to support a new portable including electrical, water, and sewer, as well as compliance with ADA requirements and local fire marshal requirements. The design includes the placement of a pre-engineered portable classroom unit, with pre-approval by DSA, to be placed onto the prepared site. For this option, NCS would purchase a *new* portable classroom unit from an approved vendor to be placed on the space. The portable classroom unit would be configured to meet the needs of our contracted childcare provider, once selected. The contracted childcare provider would pay rent to NCS, potentially offsetting some costs, and the space could be used for other school and NCS community activities.

Costs

Design - $48,000

Site Construction (Estimate) - $25,000

Portable Classroom Building (Estimate) - $91,168

Space Rental - $0

Childcare Provider - TBD

Option 2 – On-Site Portable with Purchased Used Building

This option includes utilizing space west of the current 5th Grade Classroom, on the blacktop. The scope of work would include contracting an architect to design the space per local codes and the California *Division of the State Architect* (DSA). The design would include site utilities to support a new portable including electrical, water, and sewer, as well as compliance with ADA requirements and local fire marshal requirements. The design includes the placement of a pre-engineered portable classroom unit, with pre-approval by DSA, to be placed onto the prepared site. For this option, NCS would purchase a *used* portable classroom unit from an approved vendor to be placed on the space. The portable classroom unit would be configured to meet the needs of our contracted childcare provider, once selected. The contracted childcare provider would pay rent to NCS, potentially offsetting some costs, and the space could be used for other school and NCS community activities.

Costs

Design - $48,000

Site Construction (Estimate) - $25,000

Portable Classroom Building (Estimate) - $54,290

Space Rental - $0

Childcare Provider - TBD

Option 3 – On-Site Portable with Leased Building

This option includes utilizing space west of the current 5th Grade Classroom, on the blacktop. The scope of work would include contracting an architect to design the space per local codes and the California *Division of the State Architect* (DSA). The design would include site utilities to support a new portable including electrical, water, and sewer, as well as compliance with ADA requirements and local fire marshal requirements. The design includes the placement of a pre-engineered portable classroom unit, with pre-approval by DSA, to be placed onto the prepared site. For this option, NCS would *rent* a portable classroom unit from an approved vendor to be placed on the space. To the extent allowed by the lease agreement, the portable classroom unit would be configured to meet the needs of our contracted childcare provider, once selected. The contracted childcare provider would pay rent to NCS, potentially offsetting some costs, and the space could be used for other school and NCS community activities.

Costs

Design - $48,000

Site Construction (Estimate) - $25,000

Portable Classroom Building (Estimate) - $72,658 (3-year Lease @ $15,901 annually)

Space Rental - $0

Childcare Provider - TBD

Option 4 – Off-Site Rental of Lanham Village

This option includes utilizing space at Lanham Village, a prior childcare facility in Hamilton located just north of the NCS campus, across the street from the new senior housing complex. NCS would not need to accommodate any space on campus for this option, and would not need to expend cost associated with engineering and construction on-site. The space at Lanham Village needs further assessment by NCS and our contracted childcare provider, once selected. There may be costs associated with remediation of the site and preparation of the space to support NCS childcare. NCS would rent the space from the Hamilton Homeowners Association, and the contracted childcare provider would pay rent to NCS, potentially offsetting some costs.

Costs

Design - $0

Site Construction (Estimate) - $0

Portable Classroom Building (Estimate) - $0

Space Rental - $TBD

Childcare Provider - TBD

Option 5 – Return to use of Shared Existing Spaces

This option returns to our previous model of using existing spaces on campus for before- and after-care. The spaces to consider are the Kindergarten classroom, bathrooms, and possible the Community Room. To return to shared spaces, the following have to be evaluated:

- Review updates to guidance from NUSD and Marin County regarding limits to number of stable groups for children (i.e. we do not want to induce a stable group onto students in Kindergarten by adding childcare into the space)
- Review updates to guidance from NUSD and Marin County regarding having a triage space on campus for students that become sick at school
- Coordinate the available spaces on campus with the contracted childcare provider to evaluate the feasibility and any potential modifications

Costs

Design - $0

Site Construction (Estimate) - $0

Portable Classroom Building (Estimate) - $0

Space Rental - $0

Childcare Provider - TBD

QUATTROCCHI KWOK
ARCHITECTS

March 18, 2021

Nikki Lloyd
Director
Novato Charter School
940 C Street
Novato, CA 94949

RE: Novato Charter School Portable Classroom
Project No.: 1926.00

Dear Nikki,

We are pleased to provide this proposal for the Architectural Services related to the addition of one portable classroom at the Novato Charter School. We will provide the services required for the successful installation of this portable classroom. The portable will be leased or purchased from Mobile Modular, and will be placed on a wood foundation with a ramp to the door. It will be located on the asphalt concrete paving on the west side of the campus near the fire hydrant.

Included in our services will be:

- Site design for building layout and path of travel considerations, including verification of existing path of travel elements for code compliance.
- Civil engineering for relative finished grades, paving, storm drainage, water and sewer.
- Electrical engineering for power, data and fire alarm.
- DSA approval at over the counter appointment.
- Construction administration.
- DSA certification.

We propose to provide these services for a fixed fee of $48,000. We base this fee on our engineering fees and our anticipated production time based on past similar projects.

MAIN OFFICE:
636 Fifth Street, Santa Rosa, CA 95404
PLEASANTON OFFICE:
600 Main Street, Suite E, Pleasanton, CA 94566
707.576.0829
A California Corporation
www.qka.com

Exclusions to this proposal include geotechnical engineering, remodel of building interiors, and any unanticipated upgrades required by other agencies, including but not limited to Local fire authority, DSA, or PG&E.

Reimbursable expenses shall be in addition to these fees and will be invoiced at 1.1 times our direct cost. All fees for agencies having jurisdiction over the project shall be paid by the Novato Charter School.

Thank you for the opportunity to provide this proposal. If this proposal is acceptable please sign where indicated and return via email to QKA Contract's Manager carolt@qka.com .If you have any questions or concerns regarding this proposal, please do not hesitate to contact me. We look forward to working with you on this project.

Sincerely,

Jim Theiss, AIA

Sign Below to Authorize QKA to proceed:

_____ _____

Nikki Lloyd, Director Date

cc: Megan Bloom
Craig Allender

JT:tr.

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

April 12, 2021

YMCA Before & After School at NCS

Nikki Lloyd
Director, Novato Charter School
940 C St.
Novato, CA 94949

Dear Ms. Lloyd,

The Marin YMCA is excited to submit a before and after school provider proposal for an on-campus program at Novato Charter School. Enclosed is a copy of the complete Marin YMCA proposal.

If you have any questions please contact Jordan James, Senior Director of Youth Development, at jajames@ymcasf.org or 415-446-2134.

We look forward to hearing from you.

Sincerely,

Jordan James
Senior Director of Youth Development
Marin YMCA
415-446-2134 (Office)
707-338-9002 (Cell)
Jajames@ymcasf.org

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Marin YMCA
YMCA of San Francisco

Proposal to Provide Before & After School Programming
at Novato Charter School

INTRODUCTION

The Marin YMCA, a branch of the YMCA of San Francisco, is proposing to be the provider of before and after school programming for the Novato Charter School community. The Marin YMCA currently operates 10 before and after school sites in Marin including 5 programs on Novato Unified School District campuses.

MISSION AND HISTORY OF MARIN YMCA

Our mission is to build strong kids, strong families, and strong communities by enriching the lives of all people in spirit, mind, and body.

Since its inception in 1946, the Marin YMCA has had a history of partnering with local organizations to strengthen the ways in which the local community raises its children and supports its families. The Marin Y is pleased to be invited to submit a proposal to the Novato Charter School Board for the operation of a before and after school program at NCS.

DESCRIPTION OF PROGRAM

Youth Development Philosophy

YMCA Youth Programming promotes the development of each child's physical, emotional, and social needs on a developmentally appropriate level in a stimulating multi-faceted environment. The YMCA encourages individuality, decision-making, understanding and respect for others. YMCA of San Francisco's Youth Development Initiative aims to provide youth and teens opportunities to build leadership skills, have new challenging and enriching experiences, connect and care about their community, and develop positive relationships with adults and peers in a safe and enriching environment. We believe every young person can achieve and become a successful contributing adult. With the support and encouragement of YMCA staff and programs, we strive to enhance the assets of every young person and support their opportunity to succeed.

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

We do this through:

- Ensuring safe environments where youth can find and exercise their voices, develop confidence, and build positive relationships
- Actively promote inclusion and belonging by guiding social interactions and teaching honesty, caring, responsibility and respect
- Recognize and cultivate an understanding of the value of each individual and their contributions to the community

At the Y, we embrace four core values: Caring, Honesty, Respect, and Responsibility. Our curriculum is infused with opportunities to help children gain an understanding of the meaning of each value and to develop a desire to apply that understanding in their lives.

Professional staff create flexible and enriching programs that present young minds with exciting discoveries about themselves and the world in which they live. Staff members encourage the children to use independent problem-solving skills, exploration, and curiosity to help drive their development. This fosters strong social relationships and steady emotional growth.

KEY PROGRAM ELEMENTS

- **Character Development**: Character Development is woven throughout the day as an integral part of the program
- **Personal Choices:** School-age children are given the opportunity to influence and choose their daily activities
- **Homework Support**: Time is given daily for children to work on their homework and receive academic support
- **Social Recreation**: School-age children need an opportunity to socialize and engage with their peers organically. A balance of supervised structured and supervised unstructured time allows for the creation and development of relationships and social identity
- **Arts and Crafts:** Art is an open expression of creativity that emphasizes the process, not necessarily the results
- **Performing Arts**: Accomplished through music, plays, skits, dance, puppets, and dramatic play

MARIN YMCA
1500 Los Gamos Drive, San Rafael, CA 94903
415-492-9622 • www.ymcasf.org/marin

- **Group Games**: Children at the site are given an opportunity to play group games; these games can be sports-oriented, cooperative, or indoor-focused

- **Science & Nature**: This time of discovery is done through reading, exploration centers, experimentation, and nature walks

- **Environmental Awareness**: This component guides children to a better understanding of the environment around them and their role as stewards

Developmental Youth Outcomes

Developmental Youth Outcomes can be described as the most fundamental skills that youth need to learn to transition into healthy adulthood.

To be Productive:
Youth will engage positively and do well in school, use their spare time well and take care of their basic needs.

To be Connected:
Youth will form attachments and have supportive relationships with adults and peers; they will identify with a larger community.

To Navigate:
Youth will learn how to move through different settings, situations and challenges among their multiple worlds-- peer groups, families, neighborhoods--each of which may require different behavior and even language; behaving in ways that are appropriate to each setting. Youth need to be able to navigate through the pressure and choose not to engage in unhealthy and risky behaviors.

Hours of Operation

The Marin YMCA Child Care program will operate Monday through Friday, 7 a.m. until 6 p.m. during non-instructional time. To remain open from the hours of 7 a.m. to the start of school, the program must have and enrollment of at least 10 children. The program will also offer care during Holidays and Teacher Workdays if there is interest.

Child-to-Teacher Ratio

California State Licensing mandates a 14:1 child to teacher ratio. The YMCA prefers to work at a 12:1 ratio while on campus and between an 8:1 to 10:1 ratio during fieldtrips

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Fee Structure

Before school programming tuition is based on the single monthly rate plan of Monday-Friday. After school programming is provided with the monthly rate plans of 2 days/week, 3 days/week, or 5 days/week. Please see attachment A for estimated monthly tuition rates for the 2021-22 school year. These rates are estimates only and may change.

Program Evaluation

The YMCA conducts program evaluation surveys once a year with both parents and at students. These survey evaluations ensure that the program remains high-quality and is meeting the current needs of our students and families. Internal program quality and curriculum fidelity assessments are completed and contribute to a year long cyclical process of assessment, planning, and improvement.

Lease Agreement

The Marin YMCA would lease a standard classroom sized space on campus for 11 months out of the year with exclusive use during program operating hours and shared use during non program hours, August-June, on a yearly term agreement. Per Community Care Licensing requirements, the space must have running water. Shared use indoor facilities will also need to be available and Licensed per Licensing's minimum square foot of indoor space of 35 square feet per student. Overall program capacity will be determined by 35 square feet of indoor space per student and 75 square feet of outdoor space per student. Separate restroom facilities for staff and students would be required. A formal MOU and Lease Agreement will be drafted if NCS and the Marin YMCA decide to proceed forward with a partnership.

STRENGTH OF YMCA PROGRAMMING

The YMCA of San Francisco, founded in 1853, is a 501(c)(3) not-for-profit organization committed to serving the diverse communities of San Francisco, Marin and San Mateo Counties. More than 41,000 children, youth and teens are involved in over 110 YMCA programs. Since 1853, the YMCA has been a haven, particularly for youth, providing programs that foster respect for others, self-sufficiency, and leadership. The YMCA of San Francisco and its branches have a rich history of creating and maintaining programs that help young people develop the skills to choose positive behaviors, to develop to their fullest potential, and become community leaders.

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Attachment A
Monthly Tuition Rates (Estimates only for 2021-22 School Year)

5 Days/week: $644/month
3 Days/week: $517/month
2 Days/week: $416/month
Morning 5 Days/week: $350/month

Financial Assistance:

Financial Assistance, to the extent possible, is made available to before & after school participants.

MARIN YMCA
1500 Los Gamos Drive, San Rafael, CA 94903
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NBCC 30 YEARS of Excellence in Early Education

1988 – 2021
Celebrating
33 Years
of Caring
for our
Community's
Children

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Walt Spevak
Frima Stewart

President & CEO
Susan Gilmore

April 15, 2021

Re: Proposal to operate Before/After School program

Ms. Nikki Lloyd
Director
Novato Charter School
940 C Street
Novato, CA 94949

Dear Nikki,

Thank you for inviting the North Bay Children's Center (NBCC) to submit a proposal to operate Novato Charter School's (NCS) before and after school child care program for 2021-2022 school year.

NBCC has been servicing the community for the past 33 years in Marin and Sonoma County. We currently partner with six school districts providing child care services at 16 locations in Marin and Sonoma County. NBCC is considered a leader in the field of early childhood education and is well known for our innovation, quality programming, and our Garden of Eatin' Living Curriculum.

We are proposing to operate the before and after school child care program on NCS campus for 75 children on a daily basis. Hours will be from 7:00 am to 8:30 am for before school, and from 12:45 pm to 6:00 pm after school.

NBCC's programs are regulated by Community Care licensing (CCL) which will determine the classroom capacity during the licensing application process. NBCC's budget calculations for the proposed program are based on the number of students served by NCS's previous child care vendor. Families fees are determined by a cost analysis of the proposed program and reflect the actual cost of care (see attached Tuition Rate Sheet).

Through research-based age-appropriate activities our school age program promotes self-esteem, cooperative peer interactions, and creative expression. With a teacher to child ratio of 1:14, NBCC provides a safe place for children to create, learn, reflect, and discover solutions to everyday situations that help them to become successful, life-long learners.

We look forward to partnering with NCS. Please reach out if you have any questions or need additional information.

Sincerely,

Kristina Sisseck
V.P. Programs

NBCC 30 YEARS of Excellence in Early Education

TUITION & FEES effective FY 20/21
22 Tinker Way, Novato, 94949 (415)883-6228
~ 7:00 am to 5:00 pm ~

DUE AT TIME OF ENROLLMENT:

Registration Fee:	$60.00 per child (Non-refundable)
Materials Fee:	$120.00 per year per child or $180.00 per family of two or more children. (Non-refundable - Prorated)
Tuition:	First month's full tuition (Prorated)

MONTHLY TUITION RATES: School Age

AM/PM	Combo
$550	$786

A 10% sibling discount applies for more than one child; 15% for 2 or more additional children

MISCELLANEOUS CHARGES:

Late Pickup Fee: $6.00 **per minute** after 5:00 pm. Pickup will be considered late if not completely out of the building.

Late Payment Fee: $25.00 for account balances **unpaid by the 7th** of each month. 2.5% monthly late charge will be assessed on accounts **30 days past due**. Immediate termination of childcare may result if tuition is unpaid by the specified date in the pre-collections letter.

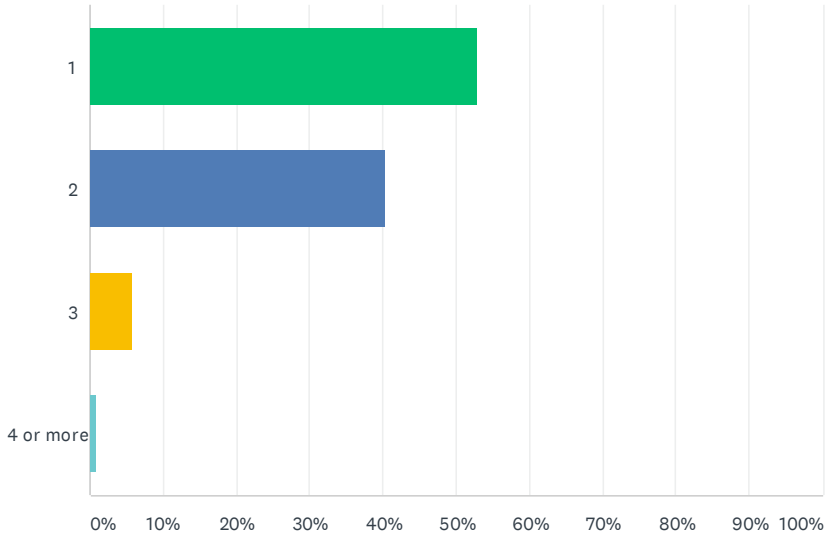
ANNUAL BILLING:

Materials Fee (Billed on the August invoice): $120.00 for one child / $180.00 for two or more children

School-Age Field Trip Fee: Variable *nonrefundable* fees billed per session for Camp programs.

Q1 How many children do you have enrolled at NCS for the 2020/2021 school year?

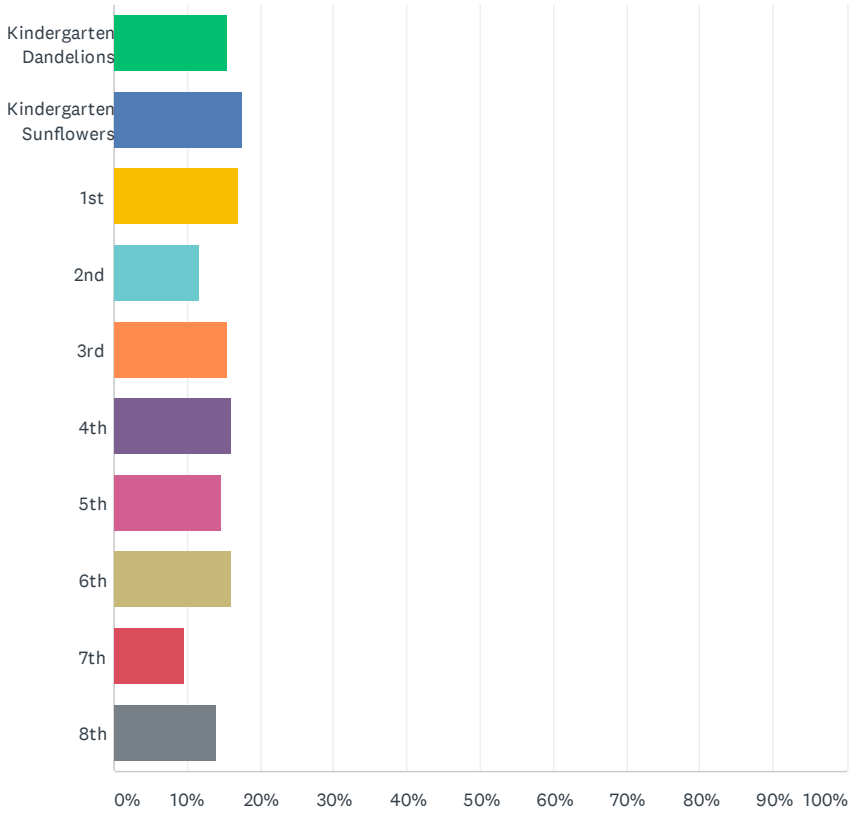
Answered: 136 Skipped: 0



ANSWER CHOICES	RESPONSES	
1	52.94%	72
2	40.44%	55
3	5.88%	8
4 or more	0.74%	1
TOTAL		136

Q2 Which grade or grades are your children enrolled in for the 2020/2021 school year? (Please check all that apply)

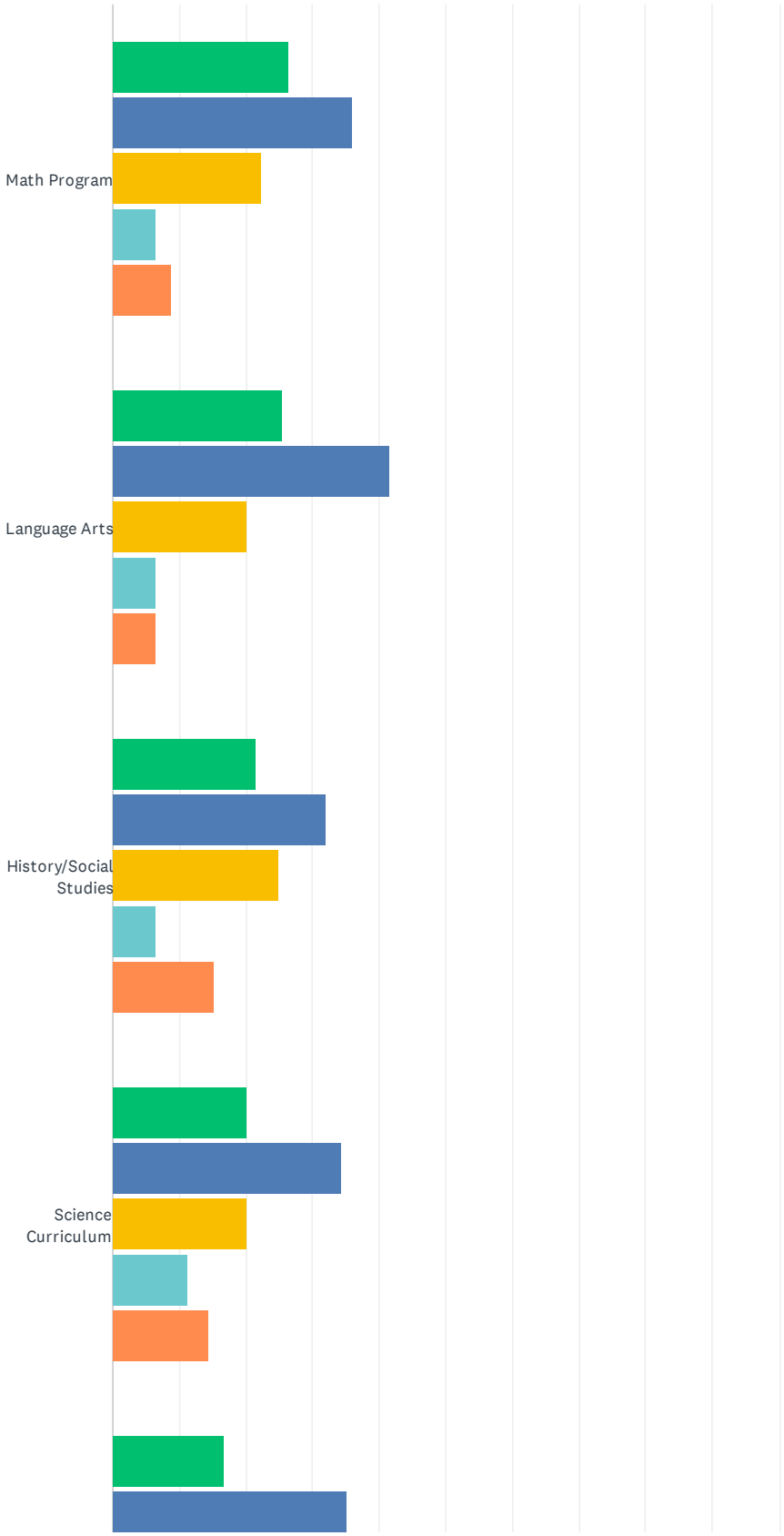
Answered: 136 Skipped: 0

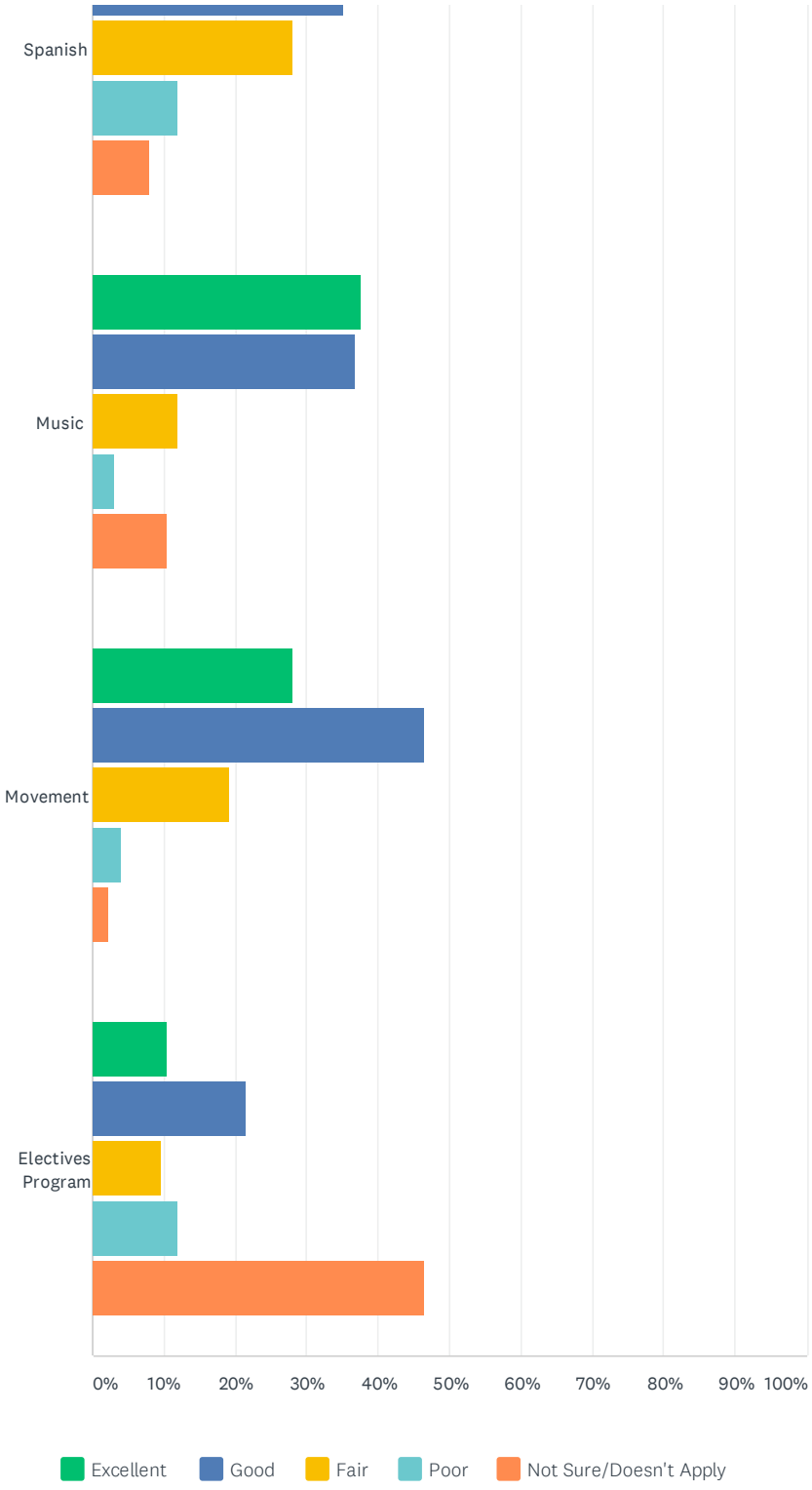


ANSWER CHOICES	RESPONSES	
Kindergarten Dandelions	15.44%	21
Kindergarten Sunflowers	17.65%	24
1st	16.91%	23
2nd	11.76%	16
3rd	15.44%	21
4th	16.18%	22
5th	14.71%	20
6th	16.18%	22
7th	9.56%	13
8th	13.97%	19
Total Respondents: 136		

Q3 How would you describe your current level of understanding of the each of the following as it is taught at NCS?

Answered: 125 Skipped: 11

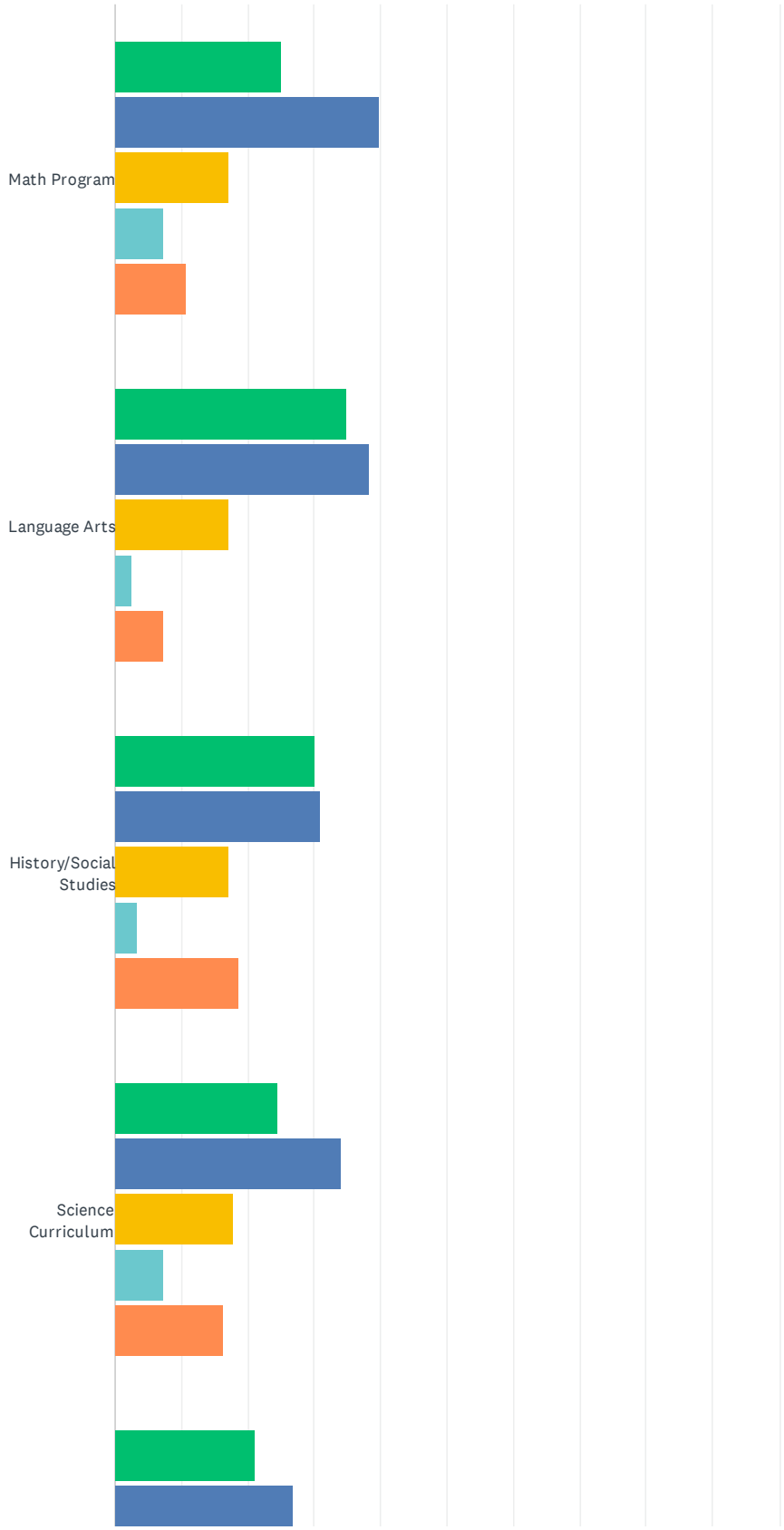


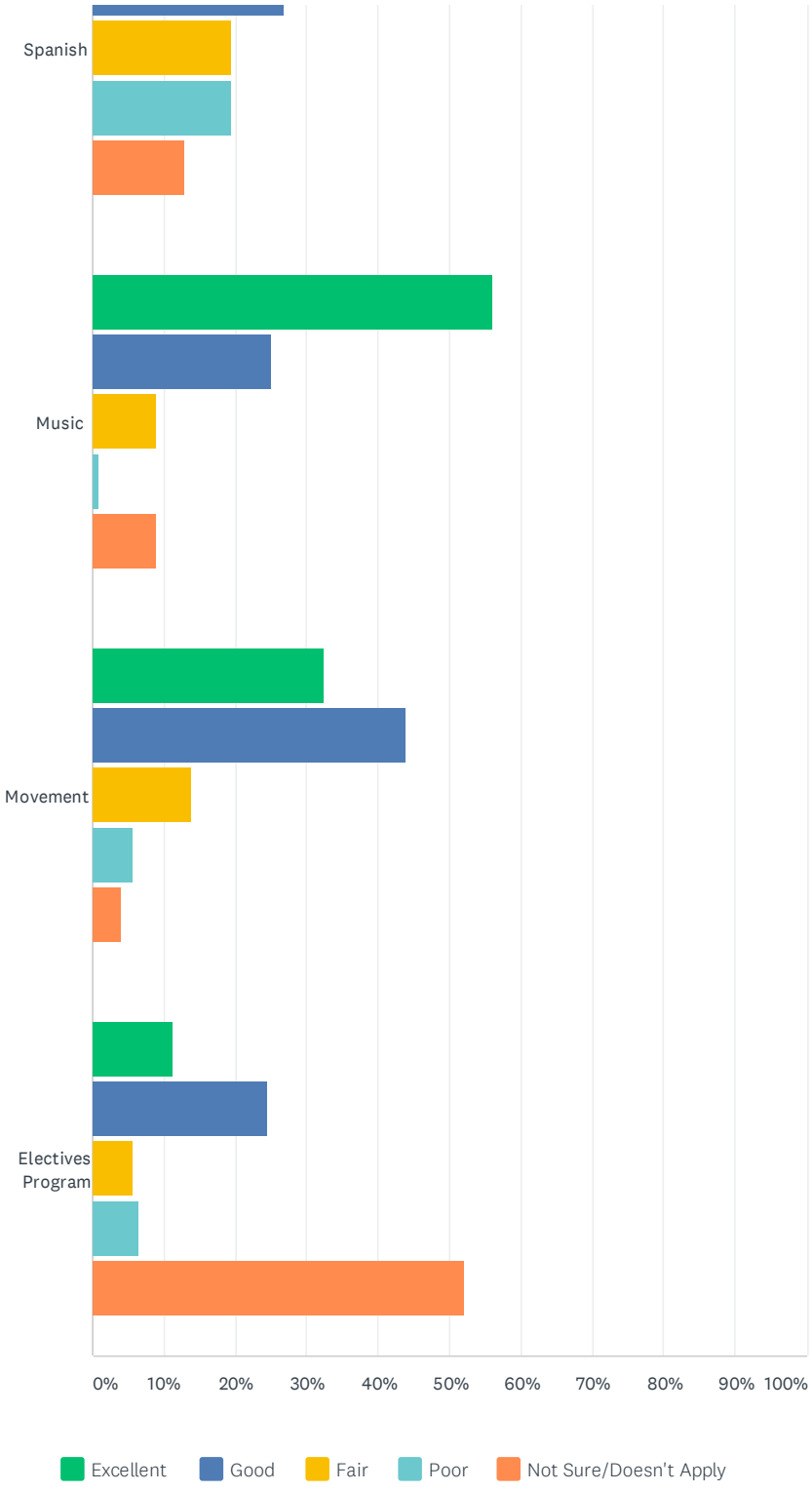

Spanish
Music
Movement
Electives Program
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
Excellent
Good
Fair
Poor
Not Sure/Doesn't Apply

	EXCELLENT	GOOD	FAIR	POOR	NOT SURE/DOESN'T APPLY	TOTAL
Math Program	26.40% 33	36.00% 45	22.40% 28	6.40% 8	8.80% 11	125
Language Arts	25.60% 32	41.60% 52	20.00% 25	6.40% 8	6.40% 8	125
History/Social Studies	21.60% 27	32.00% 40	24.80% 31	6.40% 8	15.20% 19	125
Science Curriculum	20.00% 25	34.40% 43	20.00% 25	11.20% 14	14.40% 18	125
Spanish	16.80% 21	35.20% 44	28.00% 35	12.00% 15	8.00% 10	125
Music	37.60% 47	36.80% 46	12.00% 15	3.20% 4	10.40% 13	125
Movement	28.00% 35	46.40% 58	19.20% 24	4.00% 5	2.40% 3	125
Electives Program	10.40% 13	21.60% 27	9.60% 12	12.00% 15	46.40% 58	125

Q4 What is your overall impression of each of the following parts of the curriculum at NCS?

Answered: 123 Skipped: 13

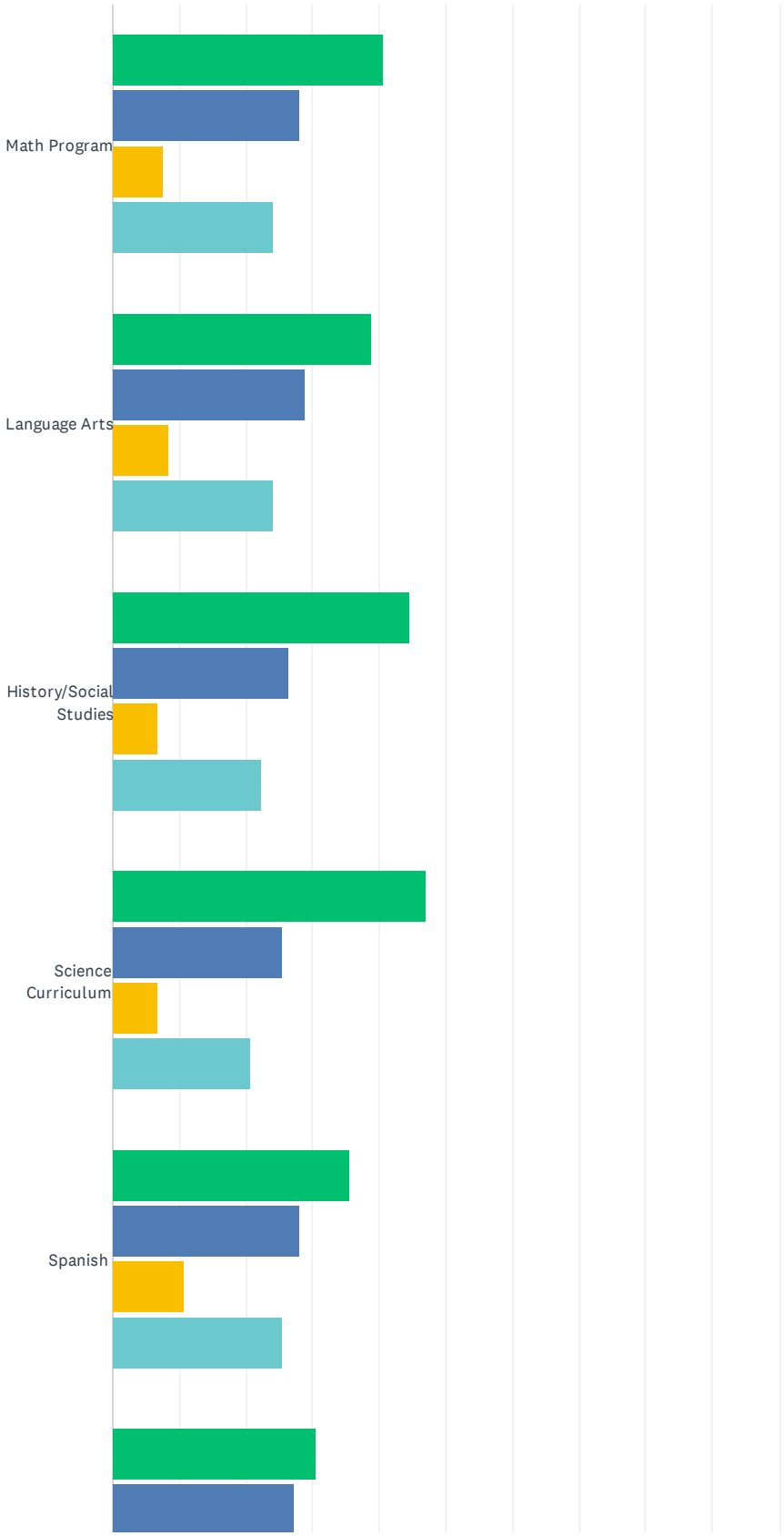


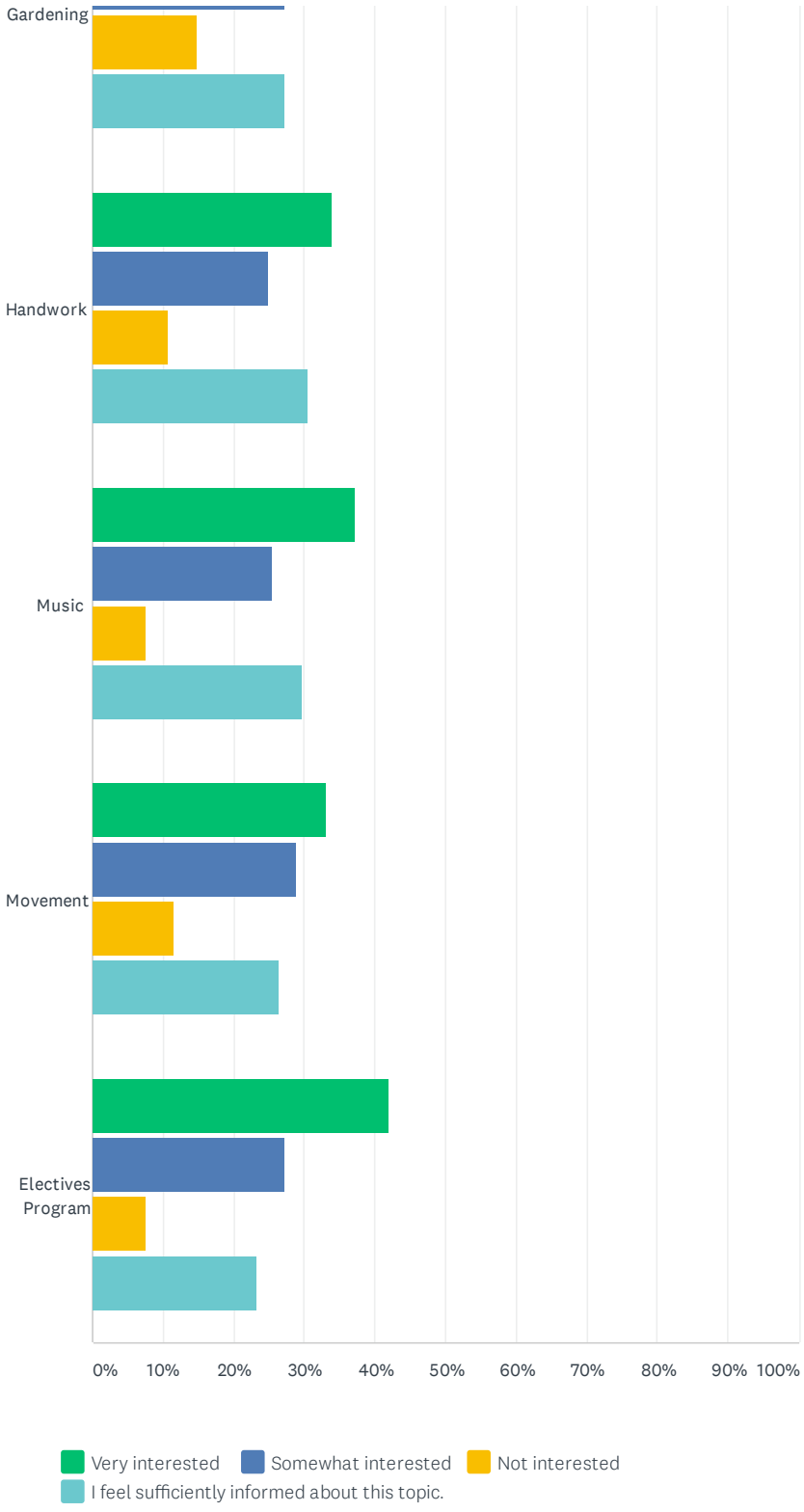

Spanish
Music
Movement
Electives Program
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
Excellent
Good
Fair
Poor
Not Sure/Doesn't Apply

	EXCELLENT	GOOD	FAIR	POOR	NOT SURE/DOESN'T APPLY	TOTAL	WEIGHTED AVERAGE
Math Program	25.20% 31	39.84% 49	17.07% 21	7.32% 9	10.57% 13	123	2.62
Language Arts	34.96% 43	38.21% 47	17.07% 21	2.44% 3	7.32% 9	123	2.91
History/Social Studies	30.08% 37	30.89% 38	17.07% 21	3.25% 4	18.70% 23	123	2.50
Science Curriculum	24.39% 30	34.15% 42	17.89% 22	7.32% 9	16.26% 20	123	2.43
Spanish	21.14% 26	26.83% 33	19.51% 24	19.51% 24	13.01% 16	123	2.24
Music	56.10% 69	25.20% 31	8.94% 11	0.81% 1	8.94% 11	123	3.19
Movement	32.52% 40	43.90% 54	13.82% 17	5.69% 7	4.07% 5	123	2.95
Electives Program	11.38% 14	24.39% 30	5.69% 7	6.50% 8	52.03% 64	123	1.37

Q5 How interested are you in finding out more about each of these components of the curriculum?

Answered: 121 Skipped: 15

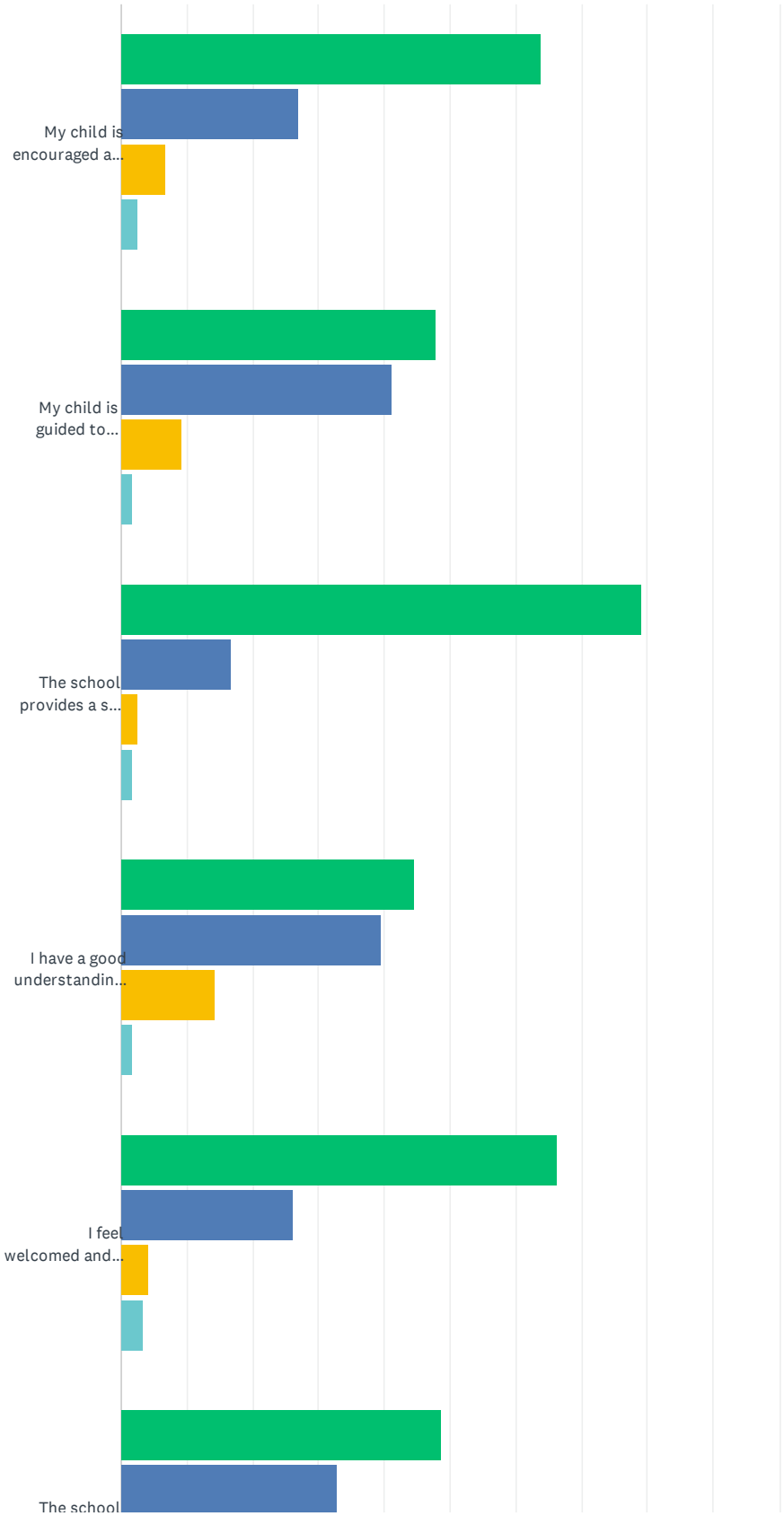


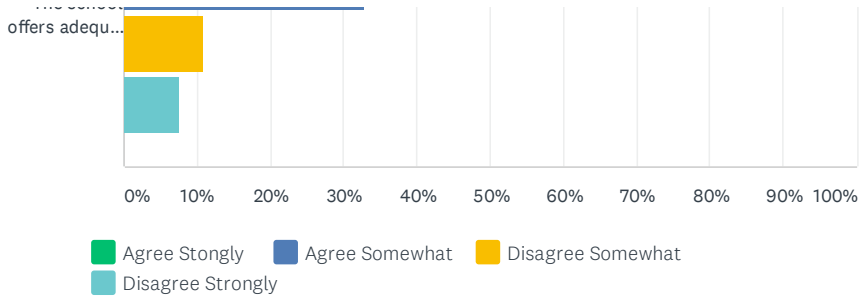

Gardening
Handwork
Music
Movement
Electives Program
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
Very interested
Somewhat interested
Not interested
I feel sufficiently informed about this topic.

	VERY INTERESTED	SOMEWHAT INTERESTED	NOT INTERESTED	I FEEL SUFFICIENTLY INFORMED ABOUT THIS TOPIC.	TOTAL
Math Program	40.50% 49	28.10% 34	7.44% 9	23.97% 29	121
Language Arts	38.84% 47	28.93% 35	8.26% 10	23.97% 29	121
History/Social Studies	44.63% 54	26.45% 32	6.61% 8	22.31% 27	121
Science Curriculum	47.11% 57	25.62% 31	6.61% 8	20.66% 25	121
Spanish	35.54% 43	28.10% 34	10.74% 13	25.62% 31	121
Gardening	30.58% 37	27.27% 33	14.88% 18	27.27% 33	121
Handwork	33.88% 41	24.79% 30	10.74% 13	30.58% 37	121
Music	37.19% 45	25.62% 31	7.44% 9	29.75% 36	121
Movement	33.06% 40	28.93% 35	11.57% 14	26.45% 32	121
Electives Program	42.15% 51	27.27% 33	7.44% 9	23.14% 28	121

Q6 Please indicate how much you agree or disagree with each of the following statements:

Answered: 119 Skipped: 17

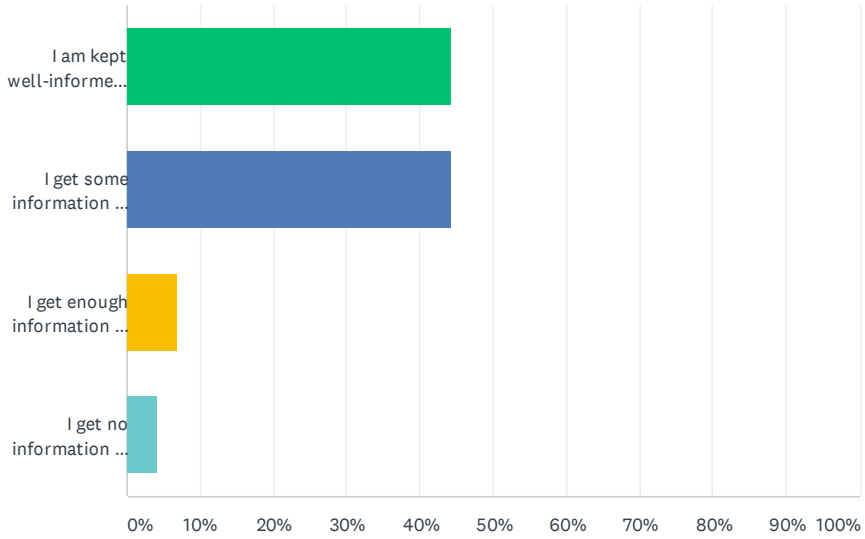




	AGREE STONGLY	AGREE SOMEWHAT	DISAGREE SOMEWHAT	DISAGREE STRONGLY	TOTAL	WEIGHTED AVERAGE
My child is encouraged and supported by faculty and staff to develop healthy relationships with adults at the school.	63.87% 76	26.89% 32	6.72% 8	2.52% 3	119	3.52
My child is guided to navigate peer relationships and solve peer conflict.	47.90% 57	41.18% 49	9.24% 11	1.68% 2	119	3.35
The school provides a safe learning environment for students, free from racial discrimination, gender identity discrimination and harassment.	78.99% 94	16.81% 20	2.52% 3	1.68% 2	119	3.73
I have a good understanding of what the school is doing to support my child's relationships with adults and fellow students at the school.	44.54% 53	39.50% 47	14.29% 17	1.68% 2	119	3.27
I feel welcomed and respected at the school	66.39% 79	26.05% 31	4.20% 5	3.36% 4	119	3.55
The school offers adequate opportunities and resources to help me support the success of my child	48.74% 58	32.77% 39	10.92% 13	7.56% 9	119	3.23

Q7 Which of the following best describes your impression of communications related to your child's (or children's) progress at the school?

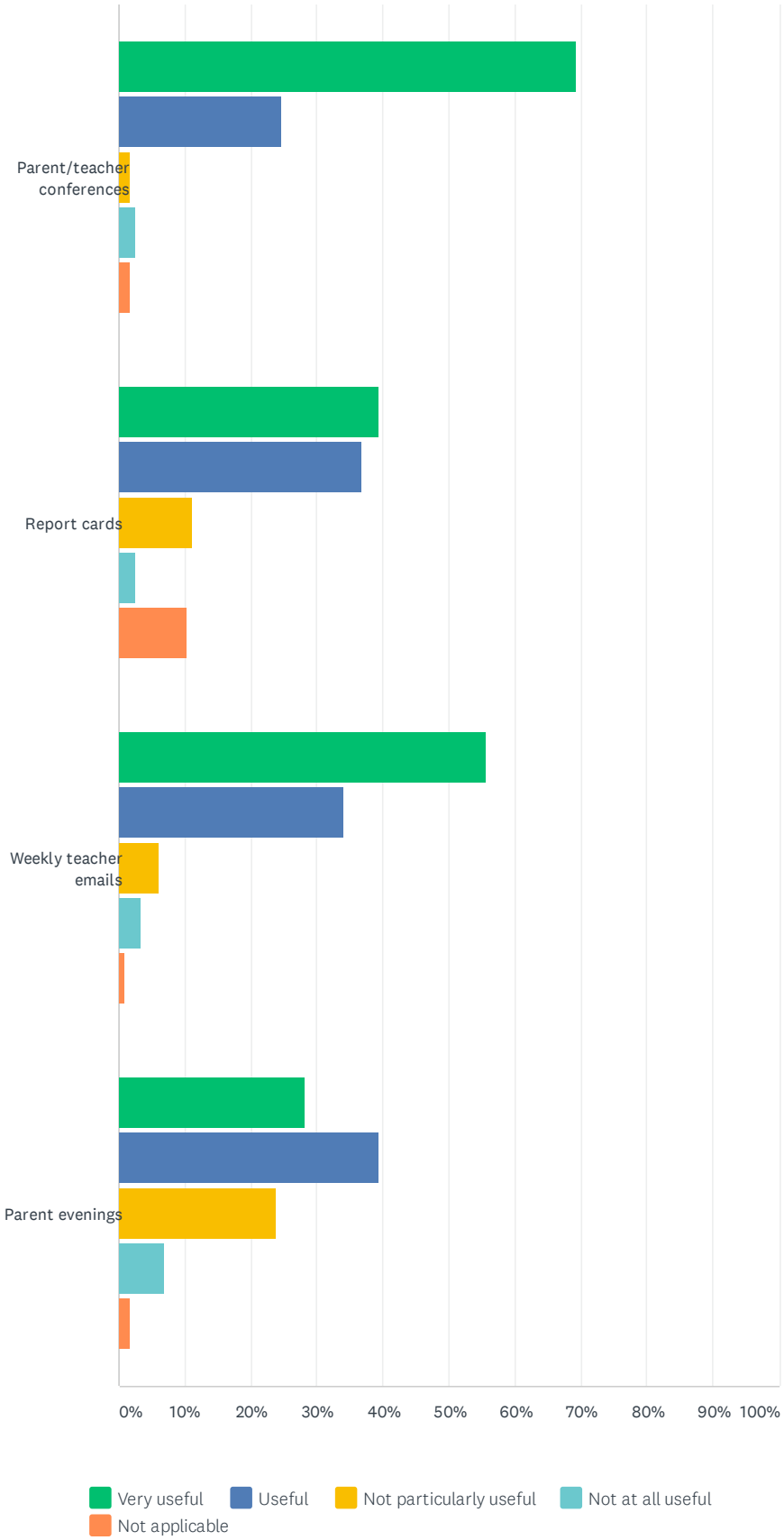
Answered: 117 Skipped: 19



ANSWER CHOICES	RESPONSES	
I am kept well-informed about my child's progress	44.44%	52
I get some information but would welcome more	44.44%	52
I get enough information to get by and don't require more	6.84%	8
I get no information at all about my child's progress	4.27%	5
TOTAL		117

Q8 How useful do you find each of the following in terms of keeping informed about your child's progress?

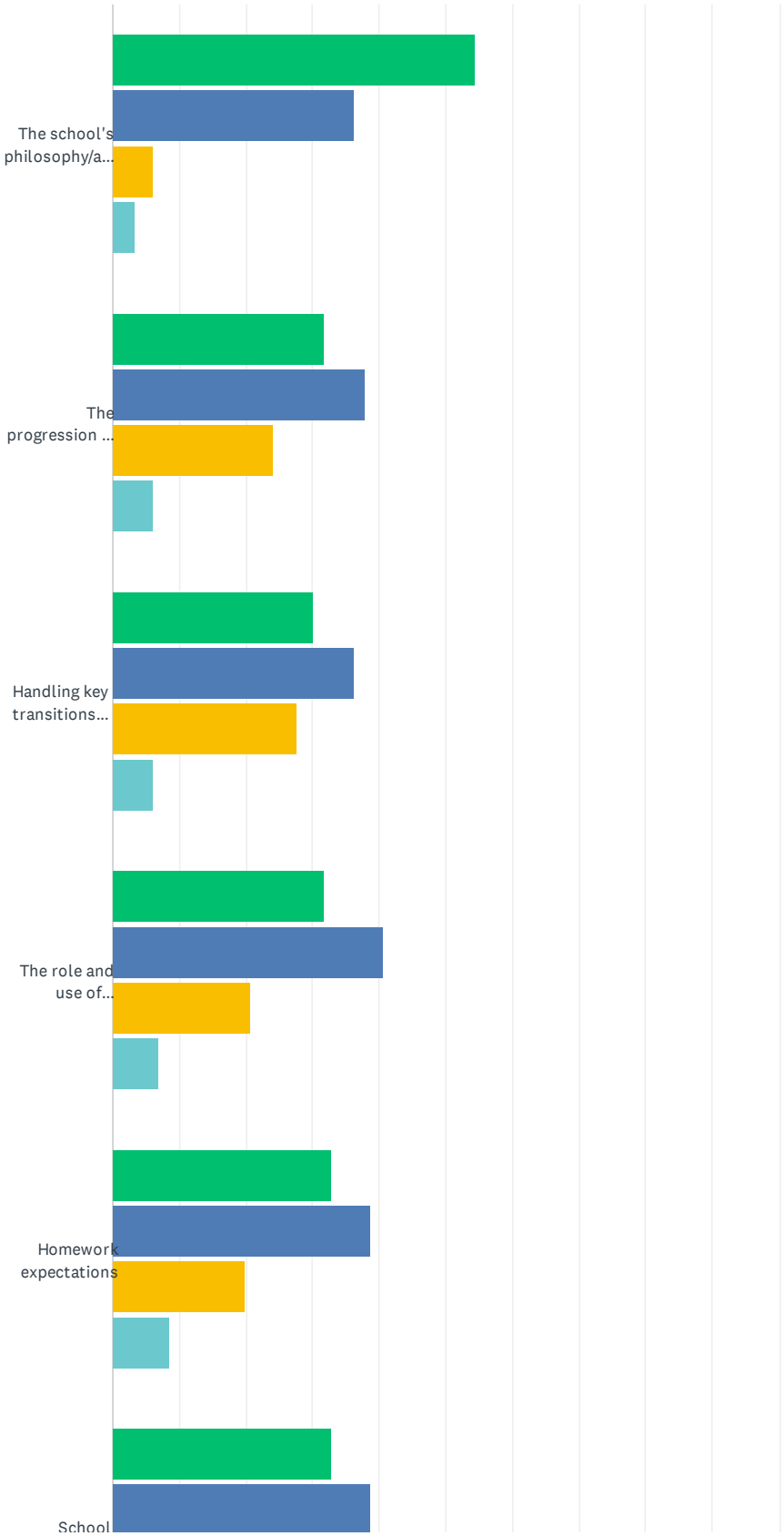
Answered: 117 Skipped: 19

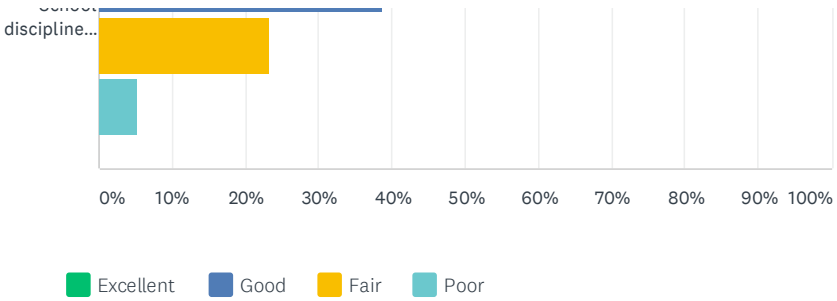

Parent/teacher conferences
Report cards
Weekly teacher emails
Parent evenings
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
Very useful
Useful
Not particularly useful
Not at all useful
Not applicable

	VERY USEFUL	USEFUL	NOT PARTICULARLY USEFUL	NOT AT ALL USEFUL	NOT APPLICABLE	TOTAL
Parent/teacher conferences	69.23% 81	24.79% 29	1.71% 2	2.56% 3	1.71% 2	117
Report cards	39.32% 46	36.75% 43	11.11% 13	2.56% 3	10.26% 12	117
Weekly teacher emails	55.56% 65	34.19% 40	5.98% 7	3.42% 4	0.85% 1	117
Parent evenings	28.21% 33	39.32% 46	23.93% 28	6.84% 8	1.71% 2	117

Q9 How would you describe your current level of understanding of the each of the following?

Answered: 116 Skipped: 20

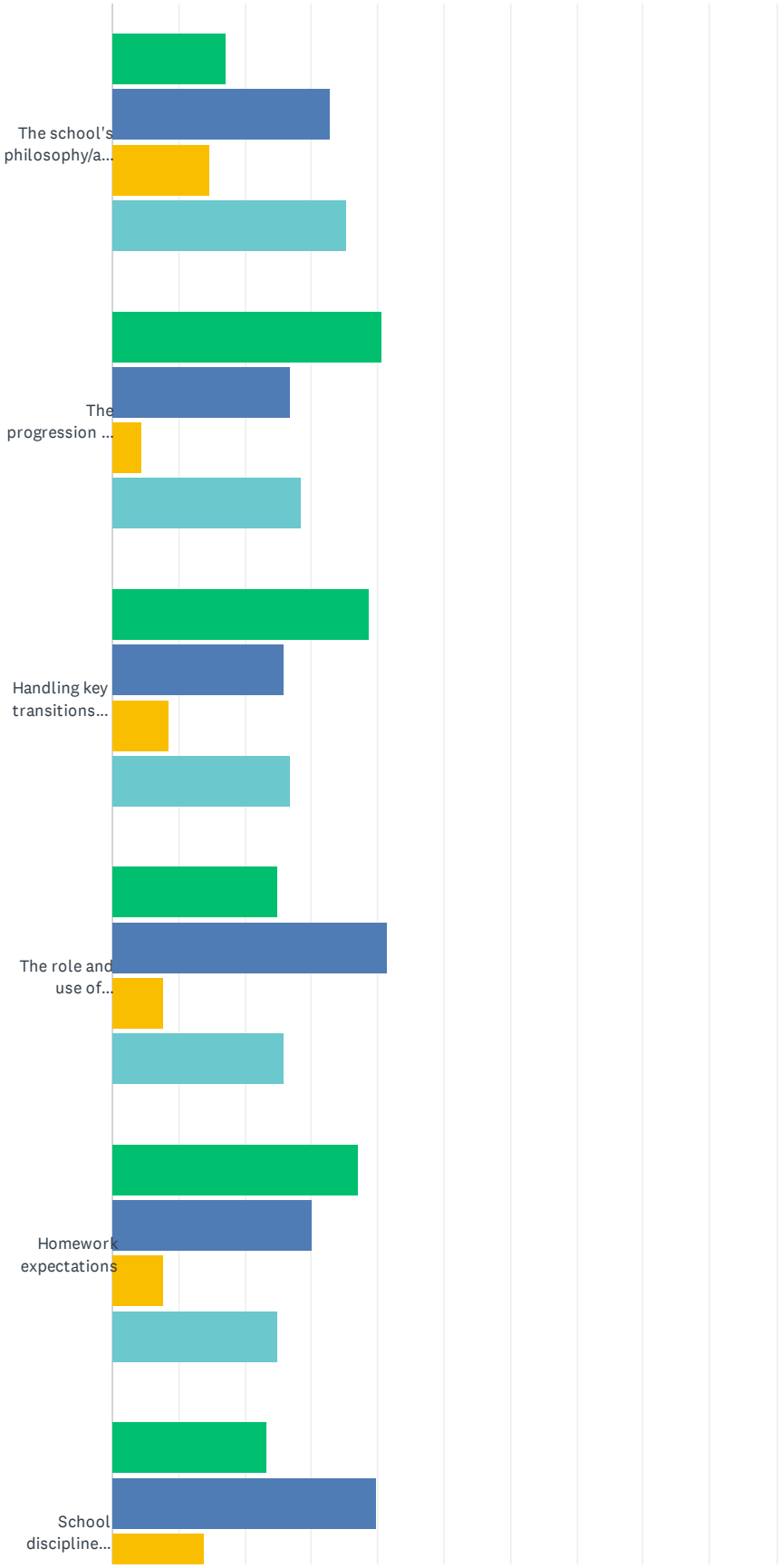


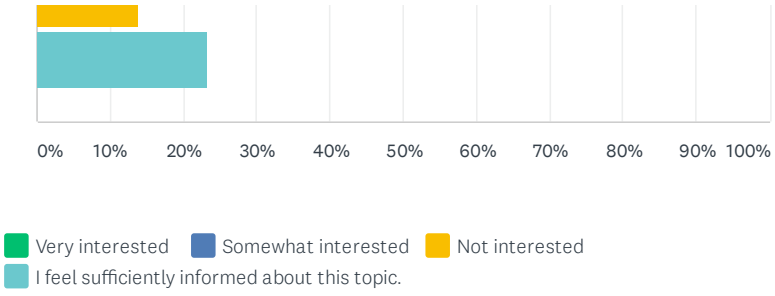


	EXCELLENT	GOOD	FAIR	POOR	TOTAL
The school's philosophy/approach to media	54.31% 63	36.21% 42	6.03% 7	3.45% 4	116
The progression of the curriculum across grades	31.90% 37	37.93% 44	24.14% 28	6.03% 7	116
Handling key transitions (e.g., Kindergarten to first grade, lower grades to middle school, preparing for high school)	30.17% 35	36.21% 42	27.59% 32	6.03% 7	116
The role and use of technology in the curriculum	31.90% 37	40.52% 47	20.69% 24	6.90% 8	116
Homework expectations	32.76% 38	38.79% 45	19.83% 23	8.62% 10	116
School discipline policies and procedures	32.76% 38	38.79% 45	23.28% 27	5.17% 6	116

Q10 How interested are you in learning more about each of the following?

Answered: 116 Skipped: 20

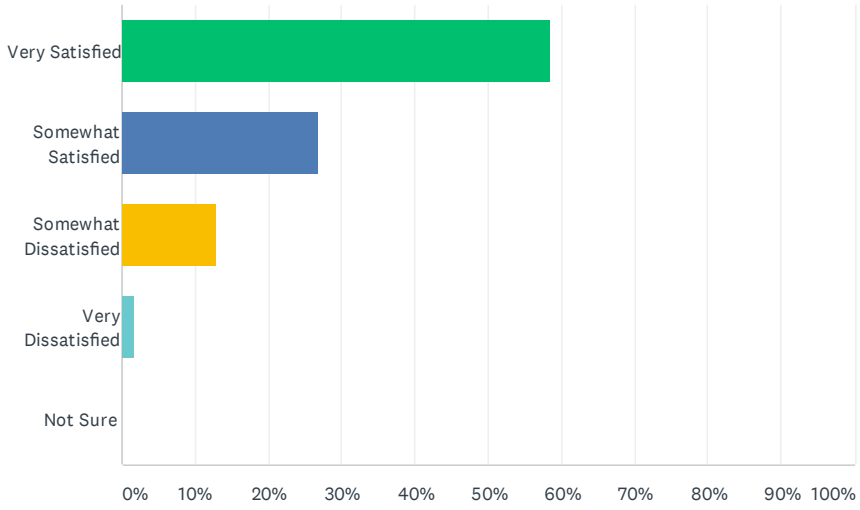




	VERY INTERESTED	SOMEWHAT INTERESTED	NOT INTERESTED	I FEEL SUFFICIENTLY INFORMED ABOUT THIS TOPIC.	TOTAL
The school's philosophy/approach to media	17.24% 20	32.76% 38	14.66% 17	35.34% 41	116
The progression of the curriculum across grades	40.52% 47	26.72% 31	4.31% 5	28.45% 33	116
Handling key transitions (e.g., Kindergarten to first grade, lower grades to middle school, preparing for high school)	38.79% 45	25.86% 30	8.62% 10	26.72% 31	116
The role and use of technology in the curriculum	25.00% 29	41.38% 48	7.76% 9	25.86% 30	116
Homework expectations	37.07% 43	30.17% 35	7.76% 9	25.00% 29	116
School discipline policies and procedures	23.28% 27	39.66% 46	13.79% 16	23.28% 27	116

Q11 Taking into account your entire experience, how satisfied would you say you are with the Novato Charter School overall?

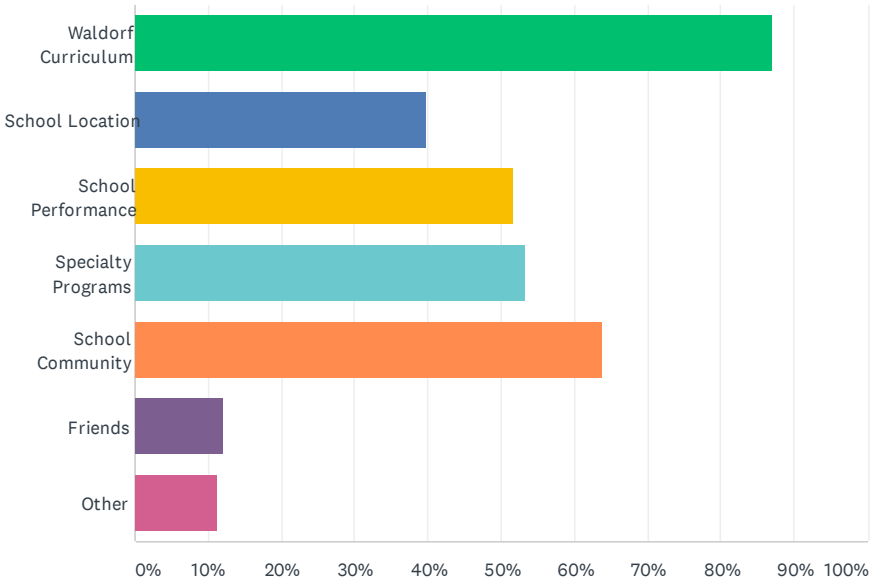
Answered: 116 Skipped: 20



ANSWER CHOICES	RESPONSES	
Very Satisfied	58.62%	68
Somewhat Satisfied	26.72%	31
Somewhat Dissatisfied	12.93%	15
Very Dissatisfied	1.72%	2
Not Sure	0.00%	0
TOTAL		116

Q12 Why have you chosen Novato Charter School? (Please check all that apply.)

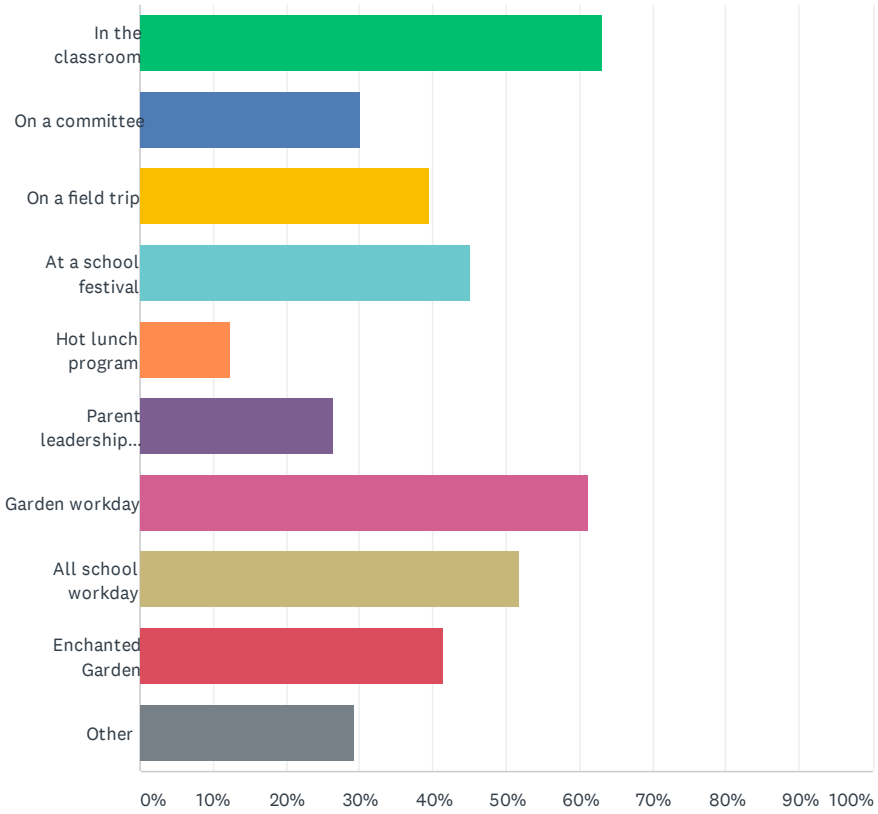
Answered: 116 Skipped: 20



ANSWER CHOICES	RESPONSES	
Waldorf Curriculum	87.07%	101
School Location	39.66%	46
School Performance	51.72%	60
Specialty Programs	53.45%	62
School Community	63.79%	74
Friends	12.07%	14
Other	11.21%	13
Total Respondents: 116		

Q13 In which ways have you volunteered at the school? (Please check all that apply.)

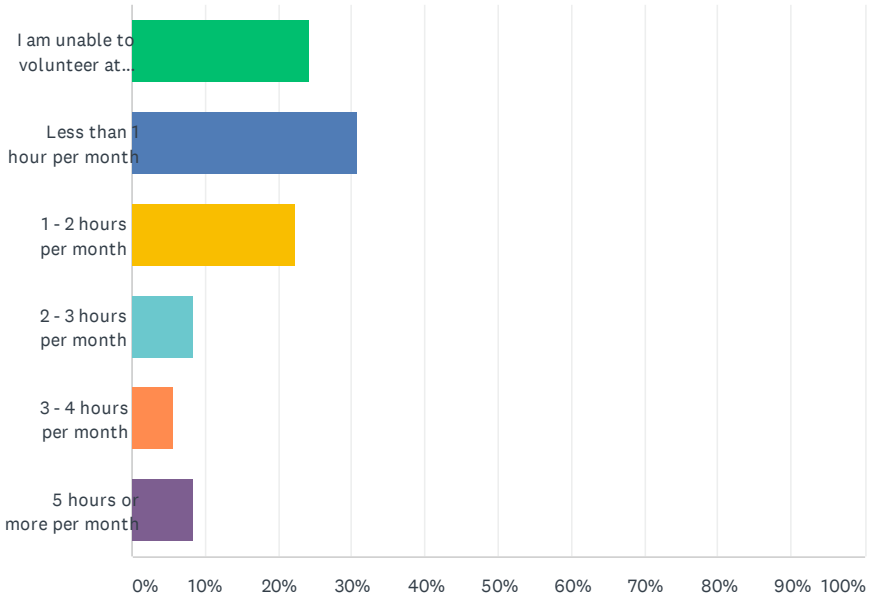
Answered: 106 Skipped: 30



ANSWER CHOICES	RESPONSES	
In the classroom	63.21%	67
On a committee	30.19%	32
On a field trip	39.62%	42
At a school festival	45.28%	48
Hot lunch program	12.26%	13
Parent leadership position (class parent, class treasurer, school rep)	26.42%	28
Garden workday	61.32%	65
All school workday	51.89%	55
Enchanted Garden	41.51%	44
Other	29.25%	31
Total Respondents: 106		

Q14 On average, how many hours per month do you typically volunteer at the school?

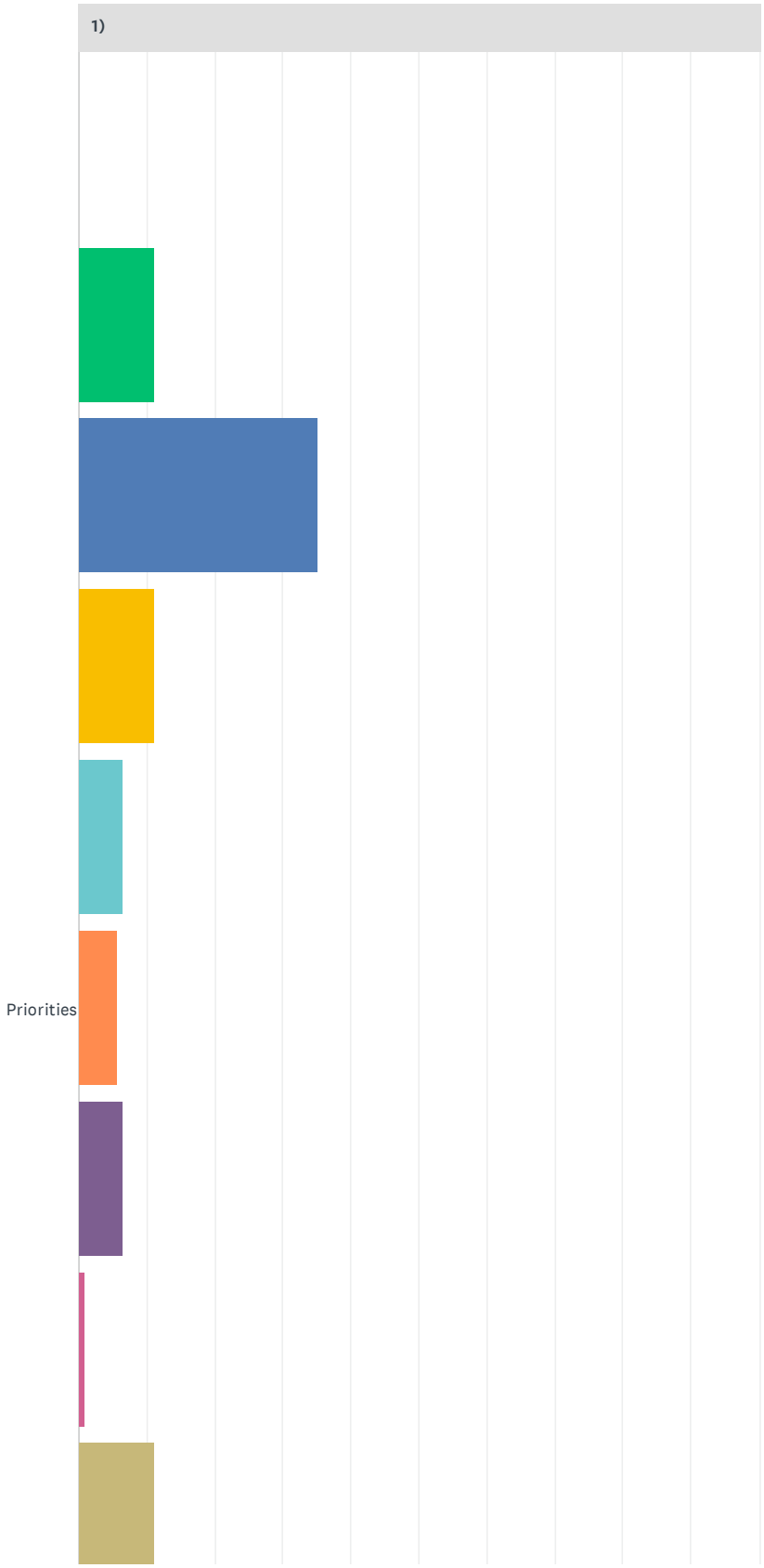
Answered: 107 Skipped: 29

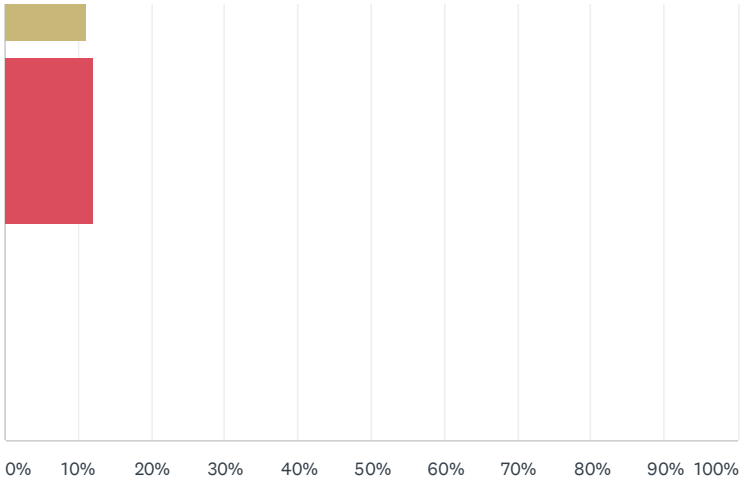


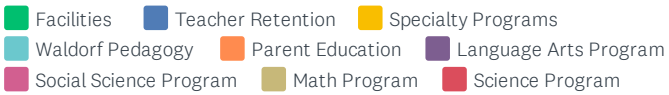
ANSWER CHOICES	RESPONSES	
I am unable to volunteer at the school	24.30%	26
Less than 1 hour per month	30.84%	33
1 - 2 hours per month	22.43%	24
2 - 3 hours per month	8.41%	9
3 - 4 hours per month	5.61%	6
5 hours or more per month	8.41%	9
TOTAL		107

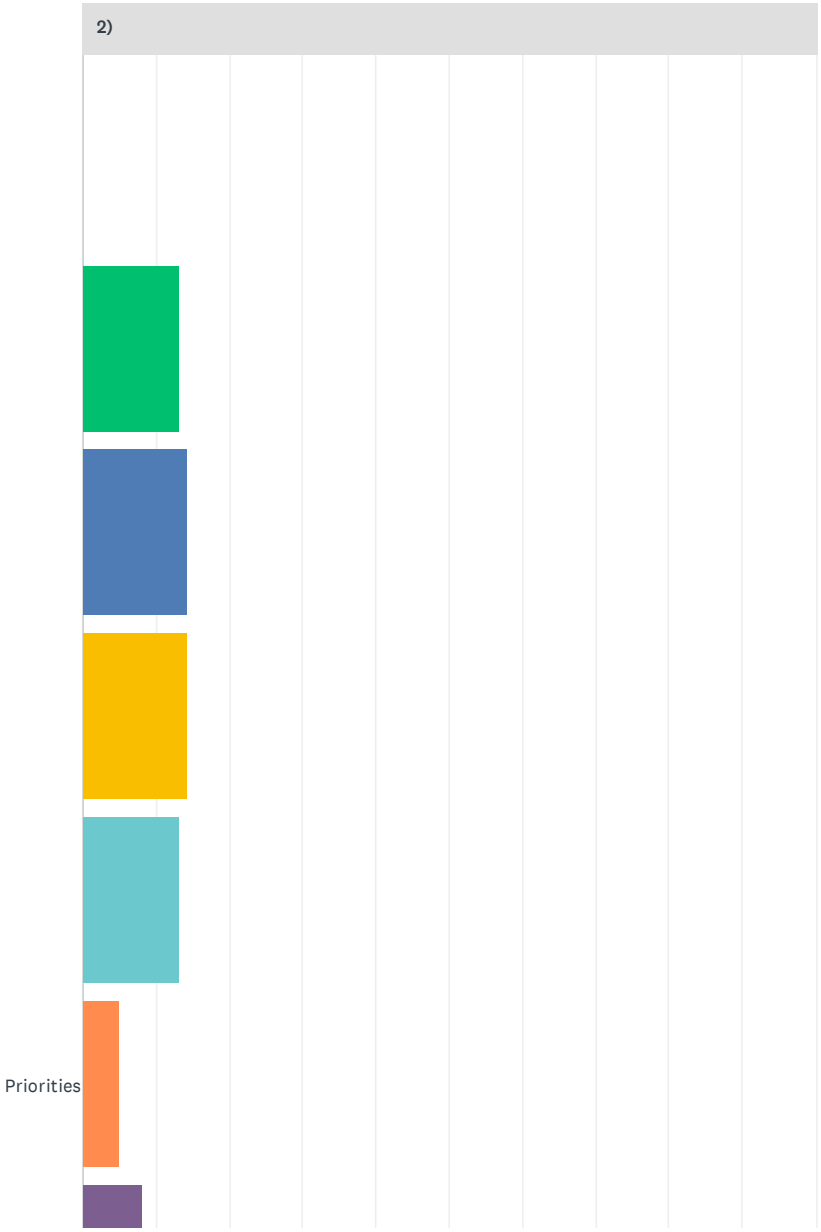
Q15 What would you say should be the top three priorities for improving the school in the coming year?

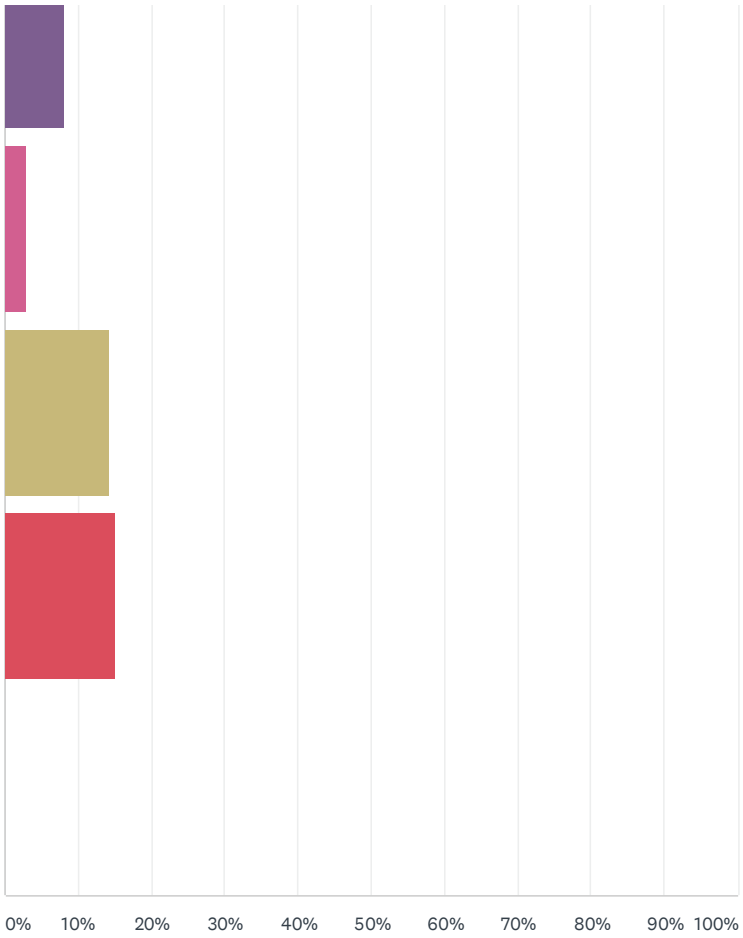
Answered: 108 Skipped: 28




0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%

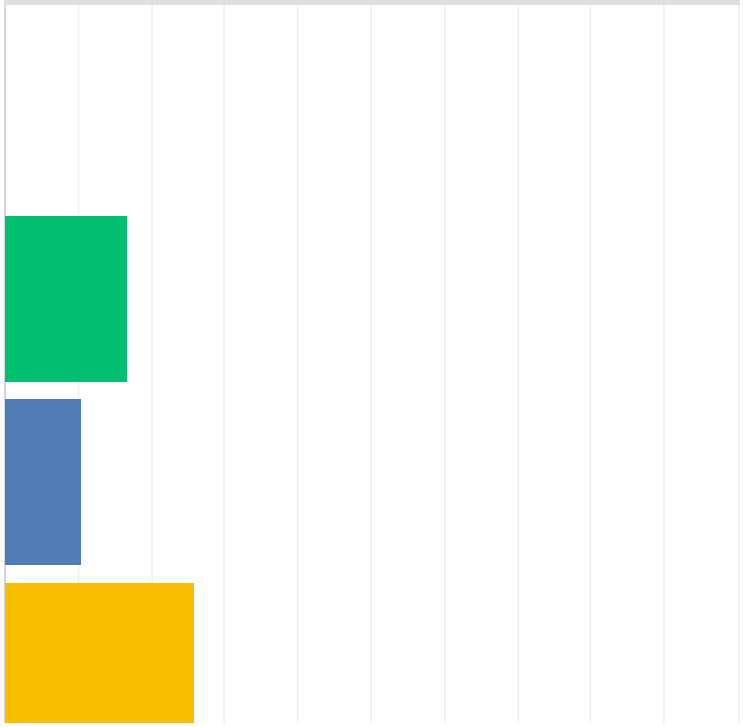

Facilities
Teacher Retention
Specialty Programs
Waldorf Pedagogy
Parent Education
Language Arts Program
Social Science Program
Math Program
Science Program

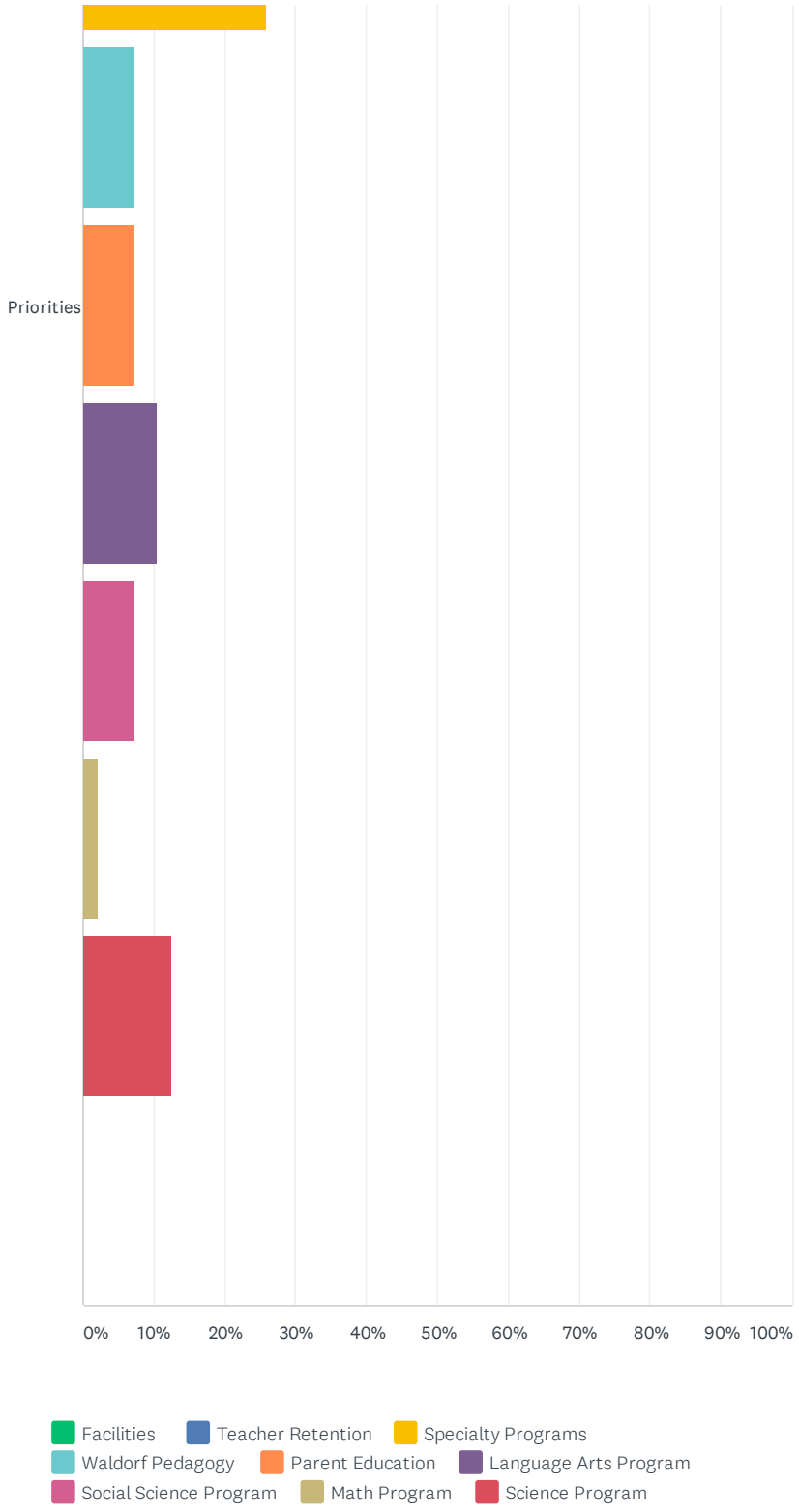

2)
Priorities



Facilities
Teacher Retention
Specialty Programs
Waldorf Pedagogy
Parent Education
Language Arts Program
Social Science Program
Math Program
Science Program

3)





1)

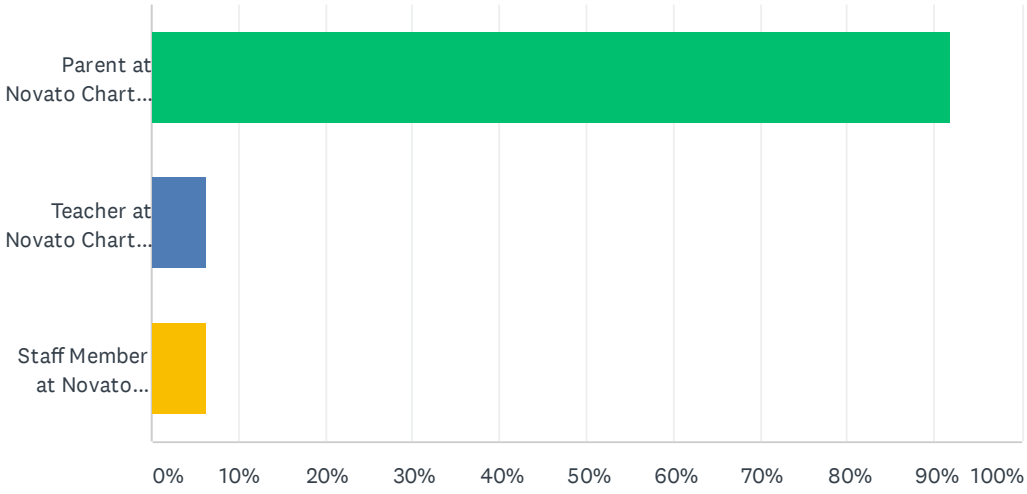
	FACILITIES	TEACHER RETENTION	SPECIALTY PROGRAMS	WALDORF PEDAGOGY	PARENT EDUCATION	LANGUAGE ARTS PROGRAM	SOCIAL SCIENCE PROGRAM	MATH PROGRAM	SCIENCE PROGRAM
Priorities	11.11% 12	35.19% 38	11.11% 12	6.48% 7	5.56% 6	6.48% 7	0.93% 1	11.11% 12	12.04% 13

2)									
	FACILITIES	**TEACHER RETENTION**	**SPECIALTY PROGRAMS**	**WALDORF PEDAGOGY**	**PARENT EDUCATION**	**LANGUAGE ARTS PROGRAM**	**SOCIAL SCIENCE PROGRAM**	**MATH PROGRAM**	**SCIENCE PROGRAM**
Priorities	13.13% 13	14.14% 14	14.14% 14	13.13% 13	5.05% 5	8.08% 8	3.03% 3	14.14% 14	15.15% 15

3)									
	FACILITIES	**TEACHER RETENTION**	**SPECIALTY PROGRAMS**	**WALDORF PEDAGOGY**	**PARENT EDUCATION**	**LANGUAGE ARTS PROGRAM**	**SOCIAL SCIENCE PROGRAM**	**MATH PROGRAM**	**SCIENCE PROGRAM**
Priorities	16.67% 16	10.42% 10	26.04% 25	7.29% 7	7.29% 7	10.42% 10	7.29% 7	2.08% 2	12.50% 12

Q1 I am a

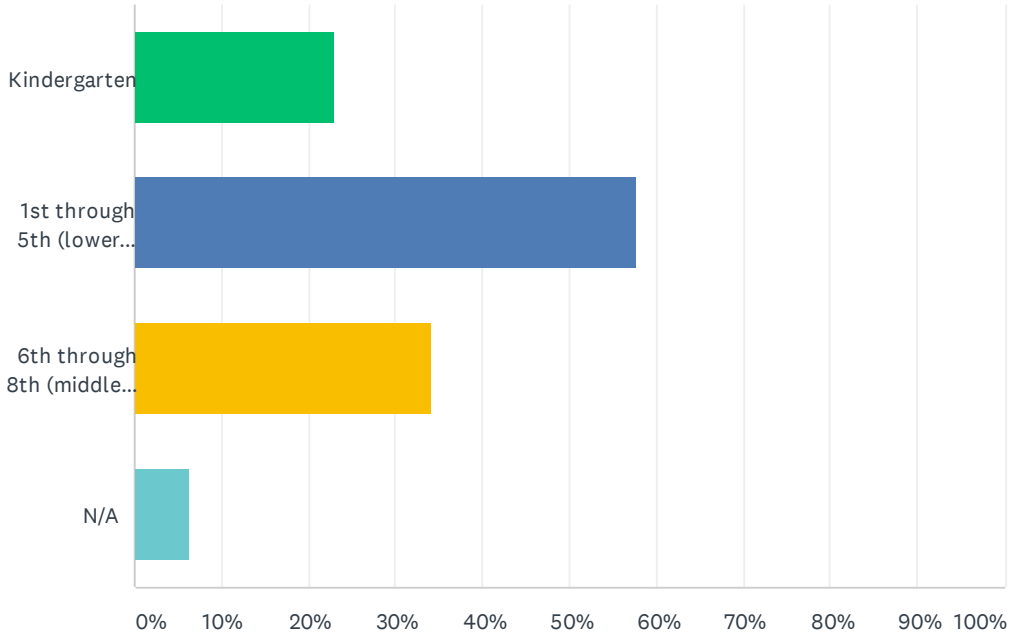
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Parent at Novato Charter School	91.93%	148
Teacher at Novato Charter School	6.21%	10
Staff Member at Novato Charter School	6.21%	10
Total Respondents: 161		

Q2 Which grade(s) are your children in at Novato Charter School?

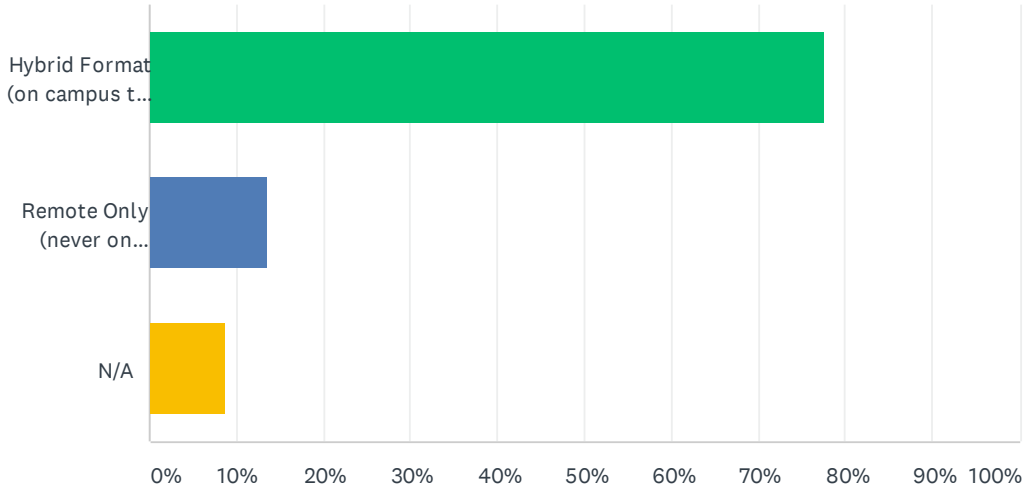
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Kindergarten	22.98%	37
1st through 5th (lower school)	57.76%	93
6th through 8th (middle school)	34.16%	55
N/A	6.21%	10
Total Respondents: 161		

Q3 Are your children attending school in hybrid format or remote only?

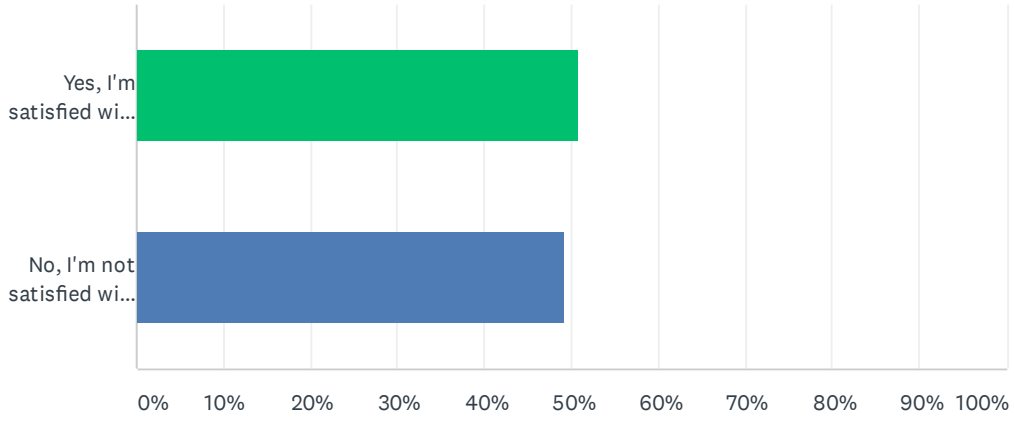
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Hybrid Format (on campus two days each week)	77.64%	125
Remote Only (never on campus)	13.66%	22
N/A	8.70%	14
TOTAL		161

Q4 How satisfied are you with the current school schedule?

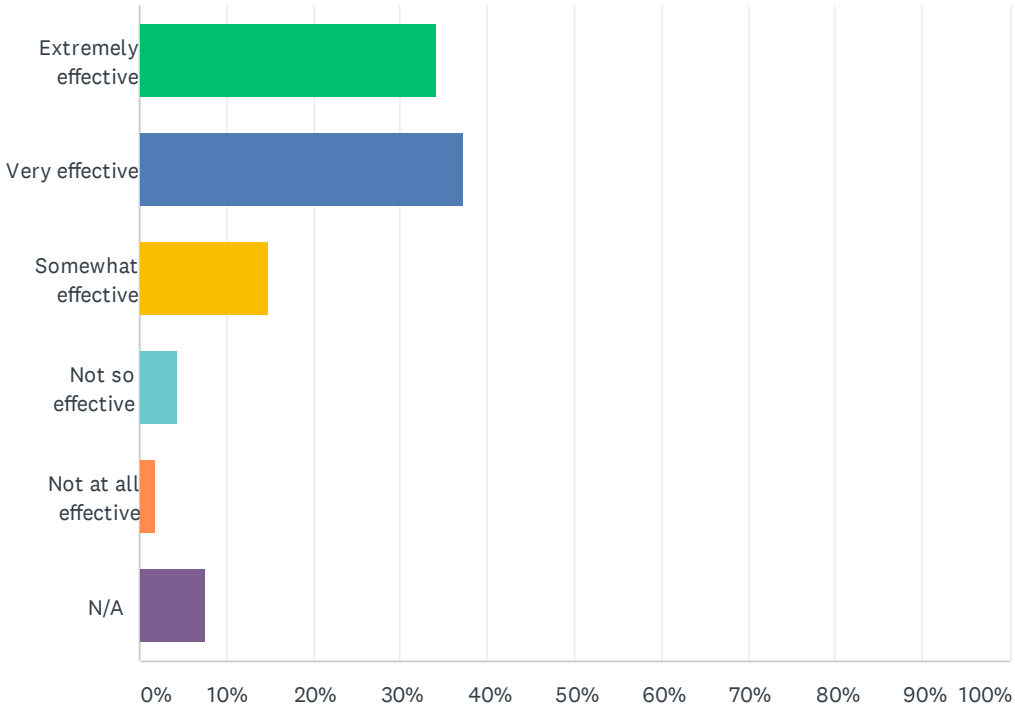
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes, I'm satisfied with the current schedule.	50.93%	82
No, I'm not satisfied with the current schedule.	49.07%	79
TOTAL		161

Q5 How effective is the current hybrid school schedule in meeting health safety needs?

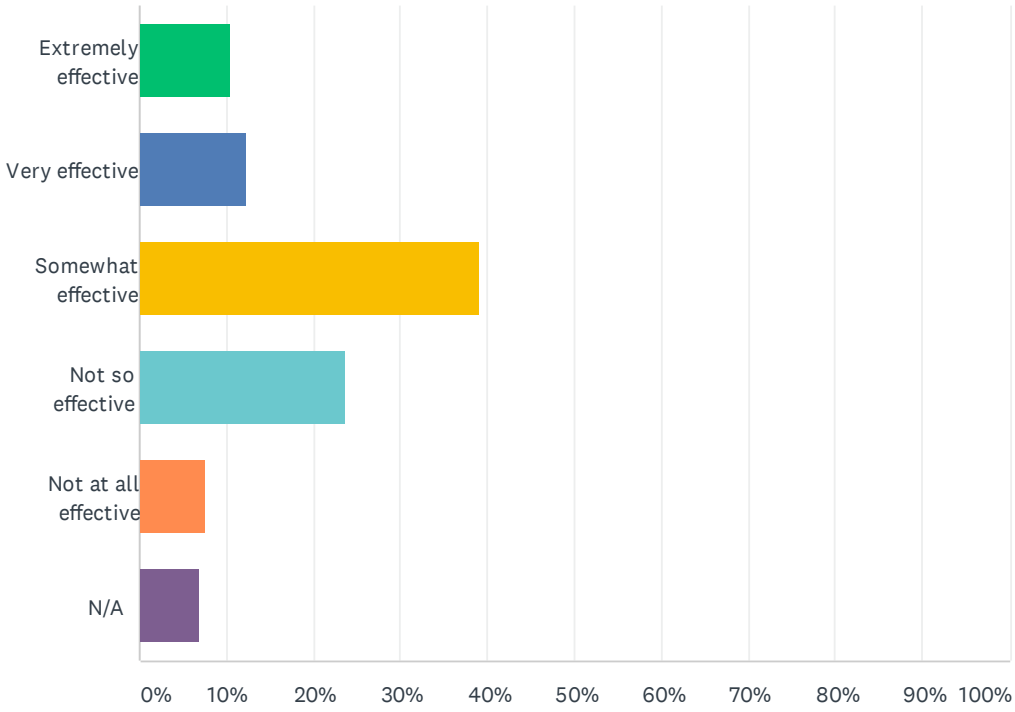
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Extremely effective	34.16%	55
Very effective	37.27%	60
Somewhat effective	14.91%	24
Not so effective	4.35%	7
Not at all effective	1.86%	3
N/A	7.45%	12
TOTAL		161

Q6 How effective is the current hybrid school schedule in meeting your student's educational needs?

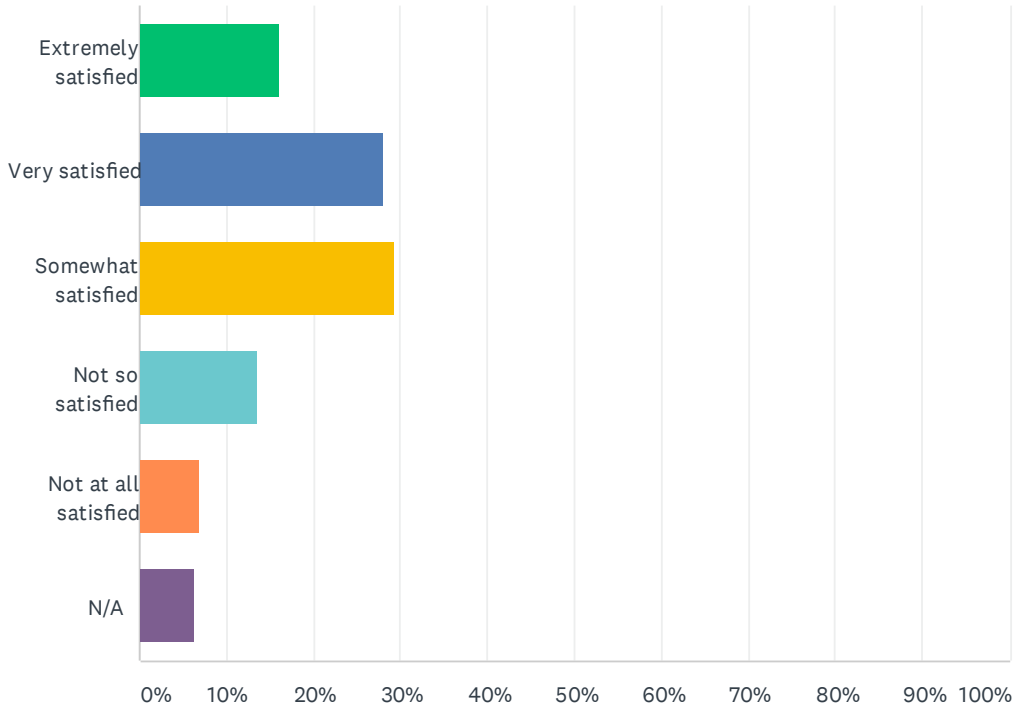
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Extremely effective	10.56%	17
Very effective	12.42%	20
Somewhat effective	39.13%	63
Not so effective	23.60%	38
Not at all effective	7.45%	12
N/A	6.83%	11
TOTAL		161

Q7 On remote learning days, how satisfied are you with the amount of synchronous learning time (Zoom sessions) included in the schedule?

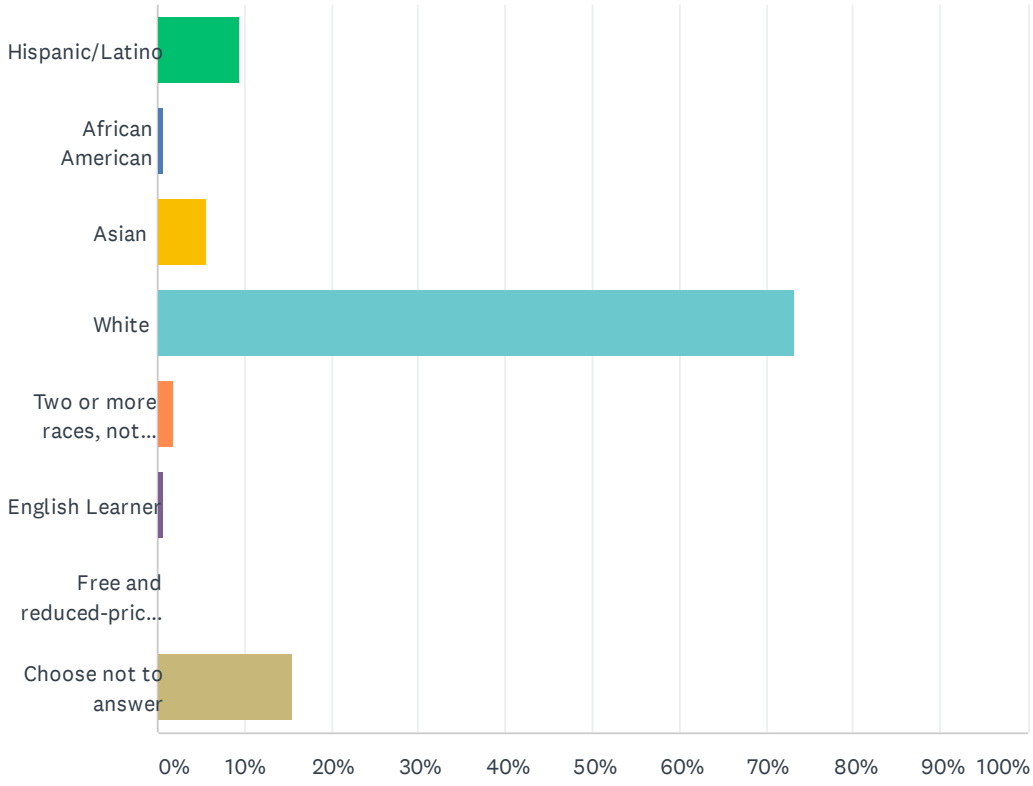
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Extremely satisfied	16.15%	26
Very satisfied	27.95%	45
Somewhat satisfied	29.19%	47
Not so satisfied	13.66%	22
Not at all satisfied	6.83%	11
N/A	6.21%	10
TOTAL		161

Q8 Please identify yourself:

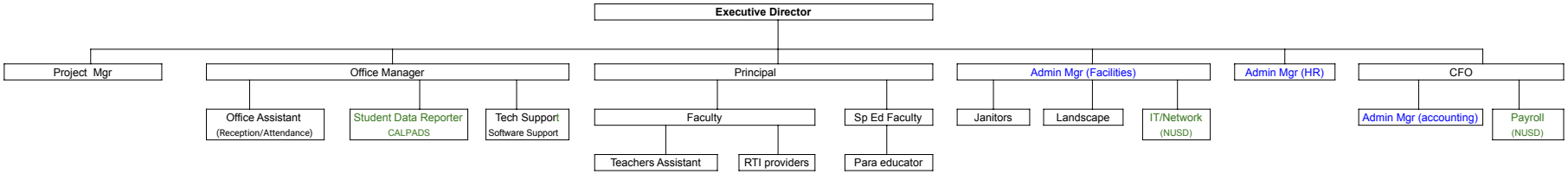
Answered: 161 Skipped: 0



ANSWER CHOICES	RESPONSES	
Hispanic/Latino	9.32%	15
African American	0.62%	1
Asian	5.59%	9
White	73.29%	118
Two or more races, not Hispanic	1.86%	3
English Learner	0.62%	1
Free and reduced-price meals	0.00%	0
Choose not to answer	15.53%	25
Total Respondents: 161		

Q9 Do you have an additional comment?

Answered: 82 Skipped: 79



2016-2017			
Certificated		Classfied	
1.0	Director	1.0	CBO
		1.0	Office Manager
		0.6	Bookkeeper
		0.5	Office Float
Total	1.0		3.1
	4.1		

2017-2020			
Certificated		Classfied	
1.0	Director	1.0	Ops Mgr
		0.33	CFO
		1.0	Office Manager
		0.6	Bookkeeper
		0.5	Office Float
Total	1.0		3.4
	4.4		

2020-2021 *year 1 of independent LEA for SpEd			
Certificated		Classfied	
1.0	Director	1.0	Ops Mgr
1.0	Student Svc Coordinator	0.33	CFO
		1.0	Office Manager
		0.6	Book keeper
		0.5	Office Float
Total	2.0		3.4
	5.4		

Proposed 2021-2022			
Certificated		Classfied	
1.0	Exec Director	0.33	CFO
1.0	Principal	1.0	Office Mgr
		1.0	Admin Mgr
		0.2	Project Manager
		0.8	Office Assistant
		0.2	Tech Support
Total	2.0		3.51
	5.5		

Proposed 2022-2023 TBD	
Certificated	Classfied
Total	

2021-2022
SCHOOL YEAR CALENDAR

July 2021

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

August 2021

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

September 2021

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

October 2021

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

November 2021

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
29	30	31				

December 2021

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

78 Student Intructions Days in 1st Semester

Legal/Local Holidays

Sep. 6	Labor Day
Nov. 11	Observe Veteran's Day
Nov. 24,25,26	Thanksgiving Holiday/Break
Dec. 24, 21	Christmas Eve & Day
Dec.31, Jan. 1	New Year's Eve & Day
Jan. 17	Martin Luther King Day
Feb. 21	President's Day
May 23	Memorial Day

Breaks

Oct. 4-8	Fall Break
Nov. 22 - 26	Thanksgiving Break
Dec. 20 - Jan. 3	Winter Recess
Feb. 21-25	Mid Winter Break
April 4-8	Spring Break

Minimum Days- dismissal at 1 pm

All Thursdays
Aug. 16-20
Sept 3
Oct. 1
Nov. 19
Dec. 17
Feb. 18
April 1
May 20
June 6-9

All School Events

	Back to School Night
	Fall Festival
Nov 19	Grandparents Day
Dec. 2	Winter Spiral
Feb. 18	Assembly
	Enchanted Garden
	Spanish Assembly
	Spring Festival
	8th Grade Project Night
June 9	Assembly
June 9	8th Grade Promotion

January 2022

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

February 2022

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

March 2022

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

April 2022

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

May 2022

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

June 2022

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

102 Student Instruction Days in 2nd Semester

Rev. 4/30/21