Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2017
Open to Public Inspection

<u>A</u>	Fort	the 2017 calendar year, or tax year beginning $07/01/17$, and ending $06/30/2$	18		
В	Check i	if applicable: C Name of organization		D Employ	er identification number
	Addres	s change Globe Charter School			
	Name o	change Doing business as			301281
	Initial re	Number and street (or P.O. box if mail is not delivered to street address) atum 3302 Alpine Place	Room/suite	710-	630-0577
	Final re			1 3. 3	030-0377
	termina			- 0	1 501 612
	Amend	ed return F Name and address of principal officer:		G Gross red	ceipts\$ 1,581,612
$\overline{\Box}$	Applica	tion pending	H(a) Is this a gro	oup return for	subordinates Yes X No
L.J	, фр.,,ос		H(b) Are all sub	ardinatas ins	Studed? Yes No
			700000000000000000000000000000000000000		. (see instructions)
_	_	V	- " ''-	ottaon a list	. (See Institutions)
1		xempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	·		
<u>J</u>	Websi		H(c) Group exe		
-	-		ear of formation: 1	993	M State of legal domicile: CO
	art				
ω	1	Briefly describe the organization's mission or most significant activities: To provide a culturally rich interdisciplinary educations and the state of the state			Hart
ü					
Governance		teaches tolerance and celebrates diversity. Students		rted	Ln
) ve		acquiring the essential academic skills needed to suc			
		Check this box if the organization discontinued its operations or disposed of more than		1 1	7
ග		Number of voting members of the governing body (Part VI, line 1a)		3	7
ë	4	Number of independent voting members of the governing body (Part VI, line 1b)		. 4	7
Activities		Total number of individuals employed in calendar year 2017 (Part V, line 2a)			31
Ac		Total number of volunteers (estimate if necessary)		. 6	101
		Total unrelated business revenue from Part VIII, column (C), line 12			0
_	b	Net unrelated business taxable income from Form 990-T, line 34	Prior Yea		Current Year
	R	Contributions and grants (Part VIII, line 1h)		,325	86,687
Jue	9	Program service revenue (Part VIII, line 2g)	1,414		1,485,845
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	T/212	6	1,486
R _e		Other revenue (Part VIII, column (A), lines 5, 4d, 8c, 9c, 10c, and 11e)	1	,476	7,594
		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,512		1,581,612
-		Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,012	, 223	1,301,012
		Benefits paid to or for members (Part IX, column (A), line 4)		-	0
10		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,826	252	2,006,594
penses	16-	Professional fundraising fees (Part IX, column (A), line 11e)	1,02.0	,036	2,000,394
oeu	h	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		ar acception	
EX		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	475	,312	417,464
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,302		2,424,058
		Revenue less expenses. Subtract line 18 from line 12		,727	-842,446
P S	13	Nevenue less expenses. Subtract line 10 from line 12	Beginning of Curr		End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2,507		2,174,932
ASS d Ba	21	Total liabilities (Part X, line 26)	5,022		5,648,607
Pur	22	Net assets or fund balances. Subtract line 21 from line 20	-2,514		-3,473,675
	art II	Signature Block	*		
Ur	nder p	enalties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to	the best of	my knowledge and belief, it is
tru	e, cor	rect, and complete. Declaration of preparer (other than officer) is based on all information of which prepared	irer has any knov	vledge.	, ,
		MARION		1//	24/19
Sig	n	Signature of officer	10	Dale	1 1
He		Charles C. Keed Jr. GILDER BOACO	X FOR	sid	PUT
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date	Check	if PTIN
Paid	t	John Cutler / Why L. Cutly	01/23/	19 self-em	ployed P00879543
Pre	oarer			m's EIN	20-2011689
Use	Only				
		Firm's address Denver, CO 80202-5428	Př	one no.	303-634-2259
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

		contains a response or note to	any line in this Part III	X
1	Briefly describe the organization's mis			
			ciplinary educational	program that
1	eaches tolerance at	nd celebrates dive	rsity.Students are su	program chac
	cquiring the essent	ial academic skil	ls needed to succeed.	P.P
•	· · · · · · · · · · · · · · · · · · ·			
2	Did the organization undertake any si	anificant program services during the	vear which were not listed on the	
~			-	Yes X No
	If "Yes," describe these new services			Tes A No
2			wit conducts and program	
3	Did the organization cease conducting		ž TŠ	
				Yes X No
	If "Yes," describe these changes on S			
4			its three largest program services, as meas	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		eport the amount of grants and allocations to	others,
	the total expenses, and revenue, if an	y, for each program service reported		
_		4 607 070		
4a	(Code:) (Expenses \$	1,625,852 including grants	of\$) (Revenue	\$
C	peration of a chart	er school.		**************************************

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4b	(Code:) (Expenses \$	including grants	of\$) (Revenue \$	(2
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40	(Code:) (Expenses \$	including grants	of\$) (Revenue \$	
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		And the second s		- SWEEK SWAIT HEECTHERE
4d	Other program services (Describe in S	chedule O.)		
	(Expenses \$	including grants of\$) (Revenue \$)
40	Total program service expenses	1,625,852		
10				

Form 990 (2017) Globe Charter School
Part IV Checklist of Required Schedules

		_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	. 1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	. 3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	. 4	_	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		3,7
	Part III	. 5		X
0	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			v
7	"Yes," complete Schedule D, Part I	. 6	_	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	. 7		X
8	complete Schedule D, Part III			v
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	. 8		<u>X</u>
3	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 temporarily restricted	. 3	-	-22
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	7,89	
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		6313	3 7
	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		1	
	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	
е	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		<u>X</u>
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		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	200 0		
4=	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			37
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	,		32
	If "Yes," complete Schedule G, Part III	19		X

Form 990 (2017) Globe Charter School

Part V: Checklist of Required Schedules (continued)

			Yes	No
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
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
	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, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):		19	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
			X	

P	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			7
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	332	層	i i
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.0		7.00
20	reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	E.W	Since.
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 31			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	120000
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20	A	Name of
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	OPE	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		- 22
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35		
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account/2	4a		X
b	If "Yes," enter the name of the foreign country:	74	SIN	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	1910		
	(FBAR).	1645	7100	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	- Anna	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	823		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1300	18	ME!
	and services provided to the payor?	7a		
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		
d	If "Yes," indicate the number of Forms 8282 filed during the year	8 - 7		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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	The same		
	sponsoring organization have excess business holdings at any time during the year?	8		225,400
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	VF 8-71	2012 B.W
0	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	100		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	- 100	麗	
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders 11a	- 83	19	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
2a	against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	420	11 200	age c
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a	E1.E0	mas
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	8.00		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	- 00	
a	Note. See the instructions for additional information the organization must report on Schedule O.	134	C Ho	III.SET
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			
С	Enter the amount of reserves on hand	158	N B	
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
h	If "Ves." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 7 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members. stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 X 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a 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? X If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 20

3302 Alpine Place

CO 80909

719-630-0577

Form 990 (2017)

Globe Charter School

Colorado Springs

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

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

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

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

Kence 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	box	c, unle	Pos heck ess pe nd a d	rson	than o	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-211099-WISC)	from the organization and related organizations
(1)Chuck Reed	2.00									
President	0.00	X		X				0	0	0
(2) Chad Wehner	2.00									
Vice President	0.00	х		X				0	0	0
(3) Pam Keith	0.00	Λ		Λ				0	0	
	2.00									
Treasurer	0.00	X		X				0	0	0
(4) Kristina Singh										
	2.00									
Secretary	0.00	X		X				0	0	0
(5) Steve Parker										
	2.00	١,,								•
Board Member (6) Scott Wardlow	0.00	X			_		_	0	0	0
(6) SCOLL WARDIOW	2.00									
Board Member	0.00	х						0	0	0
(7) Richard Weaklan		**								
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2.00									
Board Member	0.00	X						0	0	0
(8)										
(9)										
(10)										
(11)										
	Section Contracts									

(A) Name and title		(B) Average hours per week (list any hours for							(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2) 1033-MIGG)	orga and	nritation related nizations
(CO) • • •	600 1 1000 1 100 1											
70												
50:53* · ·												
	80.0000.88.000.000.00											
	00 (00000 tesa tesa)	*************										
	A . 1673	F1.53-18-1-15033-1										
C	Sub-total Total from continuation she Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from	eets to Part VII,	Sec	ted t	1 A .			▶ ▶ d ab	ove) who received more	than \$100,000 of		I Voc I No.
3 4	Did the organization list any fremployee on line 1a? If "Yes, For any individual listed on line organization and related organization and related organization and related organization and person listed on line."	" complete School 1a, is the sun inizations greate	edul n of er th	e <i>J f</i> repo an \$	or so rtab 150	le co	indiv ompe ? If '	idua ensa 'Yes	ation and other compensa s," complete Schedule J fo	tion from the or such	3	Yes No X
5 Secti	for services rendered to the o	rganization? If									5	X
1	Complete this table for your fi compensation from the organ	ve highest com	pens com	sate	d inc	lepe n fo	nder r the	nt co	ontractors that received mendar year ending with or	ore than \$100,000 of within the organization's	tax year.	
	Name and	(A) business address							Descrip	(B) tion of services	((C) Compensation
					_							
2	Total number of independent											

PartWIII Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue Unrelated business exempt function excluded from tax under sections revenue 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d Program Service Revenue Contributions, 86,687 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f: 86,687 h Total. Add lines 1a-1f Busn. Code 1,111,291 1,111,291 611710 2a Per Pupil Revenue 342,584 611710 342,584 Mill Levy Override 611710 31,970 31,970 Charges for Services f All other program service revenue 1,485,845 g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, 1,486 and other similar amounts) 1,486 Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6a Gross rents b Less: rental exps. c Rental inc. or (loss Net rental income or (loss) 7a Gross amount from (i) Securities sales of assets other than invento b Less: cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18a b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities ... 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold ____ b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 7,594 7,594 Miscellaneous Revenue d All other revenue e Total. Add lines 11a–11d 7,594 1,581,612 1,493,439 1,486

Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must of Check if Schedule O contains a response			complete column (A).	
	not include amounts reported on lines 6b, 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			通过是10V元代表 10V	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic			a ready and	
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		1		
	individuals. See Part IV, lines 15 and 16				18 (a) (A)
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	1	1		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	739,190	590,997	148,193	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,267,404	1,013,397	254,007	
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b					
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	The state of the s	建筑		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12					
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17					
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	5,624		5,624	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				Office and the
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Purchased Services	345,695	3,353	342,342	
b	Supplies and Materials	66,145	18,105	48,040	
C					
d			T.		
е	All other expenses		1 407 477		
25	Total functional expenses. Add lines 1 through 24e	2,424,058	1,625,852	798,206	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)				

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and

Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

disqualified persons. Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

of Schedule D

Total liabilities. Add lines 17 through 25

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form 990 (2017) Globe Charter School 84-1301281 Page 11 **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 533,226 672,731 1 Cash—non-interest bearing Savings and temporary cash investments 2 2 Pledges and grants receivable, net 500 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 275 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 48,944 b Less: accumulated depreciation 10b 14,263 36,113 10c Investments—publicly traded securities _____ 11 Investments—other securities. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 1,959,253 1,466,088 Other assets. See Part IV, line 11 15 15 2,507,517 1,349 2,174,932 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 2,156 17 17 Grants payable 18 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21

Organizations that follow SFAS 117 (ASC 958), check here land complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 Temporarily restricted net assets 28 Permanently restricted net assets

Organizations that do not follow SFAS 117 (ASC 958), check here ▶X and 29 complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund

> -3,473,675 2,174,932 Form 990 (2017)

-3,473,675

5,646,451

5,648,607

22

23

25

31

32

5,020,686

5,022,035

-2,514,518

-2,514,518

2,507,517

Net Assets or Fund Balances

27

32

P	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	1,58		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,42		
3	Revenue less expenses. Subtract line 2 from line 1	3	-84	12,	446
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-2,51	4,	518
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	-11	.6,	711
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	-3,47	13,6	675
Pa	art 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 X Accrual Other		1014		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.		1028		1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				7012
	reviewed on a separate basis, consolidated basis, or both:		1 2 1 2 1 2		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			130	
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis			9	135
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?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			6	-
	Schedule O.			120	
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		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	antic Ni			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

Public Charity Status and Public Support

A44 - 1-4 - F- --- 000 - - F- --- 000 F7

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Globe Charter School 84-1301281 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 X A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iv) Is the organization (iii) Type of organization (v) Amount of monetary (vi) Amount of organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

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) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2016 Schedule A, Part II, line 14 % 15 16a 33 1/3% support test—2017. 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 33 1/3% support test-2016. 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—2017. 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 10%-facts-and-circumstances test—2016. 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

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

instructions

m 990 or 990-EZ) 2017 Globe Charter School
Support Schedule for Organizations Described in Section 509(a)(2)

oupport contours for organizations problem in country contains
(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.)

	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨 📗	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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	12 8					
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						
	Add lines 7a and 7b	- ATT - AUGUS	estella Salvania			S288	
8	Public support. (Subtract line 7c from						
800	tion B. Total Support		(中華) (1976年)	Control of the	THE THE STATE OF		
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	(4) 2010	(5) 2014	(0) 2010	(4) 2010	(0) 2017	(i) rotar
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	organization's f	irst, second, third,	fourth, or fifth tax	x year as a section	n 501(c)(3)	
	organization, check this box and stop her						
Sec	tion C. Computation of Public S						
15	Public support percentage for 2017 (line 8						%_
16	Public support percentage from 2016 Sch						%
	tion D. Computation of Investme			2.55			
17	Investment income percentage for 2017 (13, column (f))			%
8	Investment income percentage from 2016						<u>%</u>
9a	33 1/3% support tests—2017. If the orga						
	17 is not more than 33 1/3%, check this b		-				▶ ⊔
b	33 1/3% support tests—2016. If the orga						
10	line 18 is not more than 33 1/3%, check the	-	_				🟅 📙

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
3		
1		
2		
2		
3a		
3b	Local Ballin	
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4a		
6		
4b		
13		
199		
4c	1 - 1/10	N-116
13	- 3	
5a		
5b	1	3.1
5c		
6		毛·斯 伊
7	65	a been
8	201	SALES OF
9a	- 10	
	S.C.	
9b		
9c	100	
10a	100	
10b	57	
וטטו		

	Supporting Organizations (continued)	-1301281		Page
1 68	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а				
	below, the governing body of a supported organization?	11a		
b	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 V	/l. 11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	43		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		墨	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		多证	
	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	1868	CO.	121-5
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	3931	
2	Did the organization operate for the benefit of any supported organization other than the supported	144		F + 3
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		100	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1000		200
C4	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
		THE SE	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	1 - 6		州主
	or management of the supporting organization was vested in the same persons that controlled or managed			
Soct	the supported organization(s). ion D. All Type III Supporting Organizations			
OCC	ion b. Air Type in oupporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Tes	NO
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	tav		
	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?		0.7	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	25.00	Thursdain'	EIL
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI ha	·w/	t	1.01
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	5. A	
3	By reason of the relationship described in (2), did the organization's supported organizations have a	N. S.		145
•	significant voice in the organization's investment policies and in directing the use of the organization's	1.515		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		177	医 小连
	supported organizations played in this regard.	3	Dist.	
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (s	see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government of	entity (see instruction	ons).	
2 A	activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		-	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			TO CORE
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	200		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of ea			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting			
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 organization	ns must co	mplete Sections A thro	ugh 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)
Aggregate fair market value of all non-exempt-use assets (see	Sir		
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			74-10-11/1/2019 (1915) (1915)
factors (explain in detail in Part VI):			
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		1-
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 in the current year is the organization.		III supporting organiza	tion (see
instructions).	,		* V222

Schedule A (Form 990 or 990-EZ) 2017

	Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	lizations (continued)	
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt			
2	Amounts paid to perform activity that directly furthers exempt pu	rposes of supported		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purposes of			
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 or			
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 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	(iii) Distributable
			Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017:			
а				
b	From 2013		唐 7 5 A 全国 医最高级 LAY	
С	From 2014			
d	From 2015			
e	From 2016	ATTACKED AS TO		
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7:			
а	Applied to underdistributions of prior years	1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	10.	
	Applied to 2017 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if	1 2011年 中文内 JEE		
Ţ.,	any. Subtract lines 3g and 4a from line 2. For result	1000年1月1日日日		
	greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h	* 7.90 4.8		The second secon
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j	and water a particular and out		
,	and 4c.			
8	Breakdown of line 7:	EGOVA DE SENSOLO		ENVE D
_	Excess from 2013		ESTABLES AND ADDRESS OF THE PARTY OF THE PAR	
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
			KIN SAINEZ AN ANTAN	
<u>e</u>	Excess from 2017	Real Print Co. Sci. 15	THE RESERVE OF THE PARTY OF THE	SHIP REPORT OF THE

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

Name of the organization **Employer identification number** Globe Charter School 84-1301281 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II-Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat 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 c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X▶ \$

P	art III Organizations Maintainir	g Collections	of Art, Historic	al Treasures	, or Other S	Simil	ar As:	sets (con	tinued)
3	Using the organization's acquisition, acces collection items (check all that apply):	sion, and other rec	cords, check any of the	ne following that	are a significa	nt use	of its		
а	Public exhibition	d	Loan or exchange p	orograms					
b	Scholarly research	е 🗌	Other				i		
С	Preservation for future generations								
4	Provide a description of the organization's	collections and exp	plain how they furthe	r the organization	on's exempt pu	rpose	in Part		
	XIII.								
5	During the year, did the organization solicit	or receive donation	ons of art, historical tr	easures, or othe	er similar				
	assets to be sold to raise funds rather than	to be maintained	as part of the organiz	ation's collectio	n?		*****	Yes	No
P	art IV Escrow and Custodial A								
	Complete if the organization 990, Part X, line 21.	on answered "Y	es" on Form 990), Part IV, lin	e 9, or repo	ted a	in am	ount on F	orm
1a	Is the organization an agent, trustee, custo		151						
	included on Form 990, Part X?		***************************************	************	55 * * 5.535 * * * 6.6356 *			Yes	No
b	If "Yes," explain the arrangement in Part XI	II and complete the	e following table:						
								Amount	
	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
	Did the organization include an amount on								No
	If "Yes," explain the arrangement in Part XI	II. Check here if th	e explanation has be	en provided on	Part XIII				
Pa	ert V Endowment Funds.								
	Complete if the organization			7					
	_	(a) Current year	(b) Prior year	(c) Two years	back (d) Th	ree year	s back	(e) Four yea	rs back
				1					
b	Contributions								
C	Net investment earnings, gains, and								
	losses								
	Grants or scholarships								
e	Other expenditures for facilities and								
	programs								
			ļ						
g	End of year balance								
2	Provide the estimated percentage of the cu		ance (line 1g, columr	n (a)) held as:					
а	Board designated or quasi-endowment	%							
	Permanent endowment > %								
C	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and 2c sh	-							
3a	Are there endowment funds not in the poss	ession of the orga	nization that are held	l and administer	ed for the				
	organization by:							Ye	s No
									-
	If "Yes" on line 3a(ii), are the related organi			R?	*********			3b	
- CONTRACTOR OF THE PERSON	Describe in Part XIII the intended uses of the		ndowment funds.						
PE	irt VI Land, Buildings, and Equ			. D . D . C . C	44 0 .		000 !	5 () ()	40
	Complete if the organization						990, F		
	Description of property	(a) Cost or other		other basis	(c) Accumulate	d		(d) Book value	Ð
		(investment	(01	her)	depreciation				
1a	Land			[2]		A TO			
	Buildings								
	Leasehold improvements			10 000	4.5	66			445
	Equipment			48,944	12	, 83:	L	36	,113
	Other					97	_		-
ota	I. Add lines 1a through 1e. (Column (d) mus	t equal Form 990,	Part X, column (B), I	ne 10c.))	K	36	,113

	Form 990) 2017 Globe Charter School	L	84-1301281	Page
Par Will	Investments—Other Securities. Complete if the organization answered "Yes"	on Form 000 Port IV	line 11h See Form 0	00 Dart V line 12
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	
(1) Financial	derivatives			
(2) Closely-h	eld equity interests			
	XXXXXXXXXXXXX			

(G)	280 000 · · · 200 · · · 100 · · · 100 · · · 100 · · · 100 · · · 100 · · · ·			
(H)	***************************************			
	nn (b) must equal Form 990, Part X, col. (B) line 12.) 🕨		1000年100日	
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11c. See Form 99	0, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
THE RESERVE OF THE PARTY OF THE	nn (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.	= 000 B / N/		
	Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11d. See Form 99	
741	Deferred Outflows - Po			(b) Book value
(1)		ension PEB		1,462,610
(2)	Deferred Outliows - O	PLD		3,478
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		•	1,466,088
Part X	Other Liabilities.			
a described poor side	Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11e or 11f. See Fe	orm 990, Part X,
	line 25.			
1.	(a) Description of liability	(b) Book value	HENRY BEING	A CANADA
(1) Federal	income taxes			
	Pension Liability	5,132,377		ASSESSED AND THE REAL PROPERTY.
(3) Defer	red Inflows - Pension	258,264		
	PEB Liability	117,203		
	ned Compensated Absences	76,848	THE RESIDENCE OF THE PARTY OF T	
1	ned Salaries and Benefits	56,937		
(7) Defer	red Inflows - OPEB	4,822		
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)	5,646,451		C. C. Phillips

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

P	Reconciliation of Revenue per Audited Financia Complete if the organization answered "Yes" on Fe		a	
1	Total revenue, gains, and other support per audited financial statements		1	1,581,612
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		100	
a	And a second discount of the second s	2a		
b		2b	0.00	
c	Recoveries of prior year grants	2c	The sale	
d		2d		
			2e	
3	Subtract line 2e from line 1		3	1,581,612
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	18.4	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5				1,581,612
Pa	rt XII Reconciliation of Expenses per Audited Financ	ial Statements With Exp	enses per Re	
W	Complete if the organization answered "Yes" on Fe	-		
1	- 1 1 19 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			2,424,058
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a	17 40 1	
b	Prior year adjustments			
	Other losses	0-1		
	Other (Describe in Part XIII.)		100	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	2,424,058
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		(See In	
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	() = ()	
a	Investment expenses not included on Form 330, Fait vin, line 70			
b	Other (Describe in Part XIII.)	4b	4c	
b c		4b		2,424,058
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, light XIII Supplemental Information.	ine 18.)	5	2,424,058
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b;	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line
b 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XI, lines 2d and 4b.	ine 18.) and 4; Part IV, lines 1b and 2b; art to provide any additional info	Part V, line 4; Part rmation.	X, line

Schedule D (F	orm 990) 2017	7 Globe	Charter	School		84-13	301281	Page 5
Part XIII	Suppleme	ental Inform	nation (contin	ued)				
							6165	55.00
. 88 683								

			in respirar establishments			ACTURED TO SERVICE AND SERVICE	***********	
		M				***************************************		

	*********	*******		***********		*****************		

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SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Part

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

Globe Charter School

Employer identification number 84-1301281

1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,		YES	146
•	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	1000
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		X	
	describe. If "No," please explain. If you need more space, use Part II This policy is available on the website.			
	$\cdot \dots \circ \cdot \circ \dots \circ \circ \dots \circ \circ \cdot \circ \circ \circ \circ \circ \circ \circ \circ $	232		
	$\cdots \cdots $			-
	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	х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	х	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4d	X	1631
	Does the organization discriminate by race in any way with respect to:		-19	
а	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		Х
С	Employment of faculty or administrative staff?	5c		Х
d	Scholarships or other financial assistance?	5d		Х
е	Educational policies?	5e		X
f	Use of facilities?	5f		х
g	Athletic programs?	5g		х
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.			
	2 · · · · · · · · · · · · · · · · · · ·			
	$ \begin{array}{llllllllllllllllllllllllllllllllllll$			
a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	х	
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.			
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through	100	1.4	2.74

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Publi

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

Globe Charter School

Open to Public Inspection
Employer identification number

84-1301281

Form 990, Part III, Line 4d - All Other Accomplishment Operation of a charter school.
Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 This form will be emailed and reviewed by all board members.
Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents available upon request.