

# **Entry 1 School Information**

Created: 06/18/2016 Last updated: 08/01/2016

Please be advised that you will need to complete this cover page (including signatures) <u>before</u> all of the other tasks assigned to you by your authorizer are visible on your task page. While completing this task, please ensure that you select the correct authorizer or you may not be assigned the correct tasks.

# Page 1

# a. SCHOOL NAME AND BEDS#

(Select name from the drop down menu)

METROPOLITAN LIGHTHOUSE CS (NYC CHANCELLOR) 320900860962

#### **b. CHARTER AUTHORIZER**

(For technical reasons, please re-select authorizer name from the drop down menu).

NYCDOE-Authorized Charter School

# c. DISTRICT / CSD OF LOCATION

NYC CSD 9

#### d1. SCHOOL INFORMATION

PRIMARY ADDRESS	PHONE NUMBER	FAX NUMBER	EMAIL ADDRESS
180 W 165th Street Bronx, NY 10452	718-893-0640	718-893-0675	malston@lhacs.org

#### d2. PHONE CONTACT NUMBER FOR AFTER HOURS EMERGENCIES

Contact Name	Melissa Alston
Title	Operations Manager

Emergency Phone Number (	###-###-###
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# e. SCHOOL WEB ADDRESS (URL)

http://www.lighthouse-academies.org/schools/metropolitan/

# f. DATE OF INITIAL CHARTER

09/2009

# g. DATE FIRST OPENED FOR INSTRUCTION

07/2020

# h1. APPROVED SCHOOL MISSION (Regents, NYCDOE, and Buffalo BOE authorized schools only)

MISSION STATEMENT

We prepare our scholars for college through a rigorous arts-infused program.

# h2. KEY DESIGN ELEMENTS (Regents, NYCDOE, and Buffalo BOE authorized schools only)

KEY DESIGN ELEMENTS (Brief description)

Variable 1	COLLEGE FOCUS Beginning in Kindergarten, the school instills in scholars and families that they can and will go to college. The school provides the knowledge and skills, coupled with Habits of Scholars that will allow scholars to not only be accepted into the four year college of their choice, but also graduate.
Variable 2	ARTS INFUSION The school encourages teachers and provides support around infusing the arts into their core content. The school employs full time specialists focusing on the arts. The school has also developed numerous partnerships throughout the city to allow for arts experiences beyond the classroom.
Variable 3	K-12 MODEL

	The school values bringing scholars into MetLCS in Kindergarten and having them through 12th grade, and this relates to our college focus above. The school believes in supporting scholars and families throughout their K - 12 educational experience in working towards and accomplishing all of their goals.
Variable 4	EXTENDED SCHOOL DAY AND SCHOOL YEAR More time on task allows for scholars to master standards and thrive in their environment.
Variable 5	PARENTS AS PARTNERS  MetLCS values its parent body and works diligently to involve them in any way possible. This comes in forms such as the Parent Association, quarterly Parent Teacher Conferences, and regular events for parents.
Variable 6	GOVERNANCE The school has a formalized governance structure. Board members meet on a monthly basis to monitor, evaluate, and provide feedback on "how well" the school is performing against its charter goals and other measures, rather than "how will". Board meeting minutes for the 2015 - 2016 school year are posted on the school's website, and all applicable rules and regulations in regards to executing a Board of Trustees meeting are adhered to on a regular basis.
Variable 7	(No response)
Variable 8	(No response)
Variable 9	(No response)
Variable 10	(No response)

# i. TOTAL ENROLLMENT ON JUNE 30, 2016

423

# j. GRADES SERVED IN SCHOOL YEAR 2015-16

Check all that apply

Grades Served	K, 1, 2, 3, 4, 5, 6, 7
---------------	------------------------

# **k1. DOES THE SCHOOL CONTRACT WITH A CHARTER OR EDUCATIONAL MANAGEMENT ORGANIZATION?**

Yes

# **k2. NAME OF CMO/EMO AND ADDRESS**

NAME OF CMO/EMO	Lighthouse Academies
PHYSICAL STREET ADDRESS	29140 Chapel Park Drive Building 5-A
CITY	Wesley Chapel, FL 33543
STATE	FL
STATE ZIP CODE	FL 33543

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# **I1. FACILITIES**

Does the school maintain or operate multiple sites?

No, just one site.
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# **12. SCHOOL SITES**

Please list the sites where the school will operate for the upcoming school year.

	Physical Address	Phone Number	District/CSD	Grades Served at Site	School at Full Capacity at Site	Facilities Agreement
Site 1 (same as primary site)	180 West 165 Street Bronx, New York 10452	718-893- 0640	BRONX (TOTAL)	K-8	No	Rent/Lease
Site 2						
Site 3						

# I2a. Please provide the contact information for Site 1.

Name	Work Phone	Alternate Phone	Email Address
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School Leader	Tyra L. Williams		
Operational Leader	Courtney Russell		
Compliance Contact	Courtney Russell		
Complaint Contact	Terri Milsap		

# m1. Is the school or are the school sites co-located?

No

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n1. Were there any revisions to the school's charter during the 2015-16 school year? (Please include approved or pending material and non-material charter revisions).

No

o. Name and Position of Individual(s) Who Completed the 2015-16 Annual Report.

Courtney Russell, Principal

p. Our signatures below attest that all of the information contained herein is truthful and accurate and that this charter school is in compliance with all aspects of its charter, and with all pertinent Federal, State, and local laws, regulations, and rules. We understand that if any information in any part of this report is found to have been deliberately misrepresented, that will constitute grounds for the revocation of our charter. Check YES if you agree and then use the mouse on your PC or the stylist on your mobile device to sign your name).

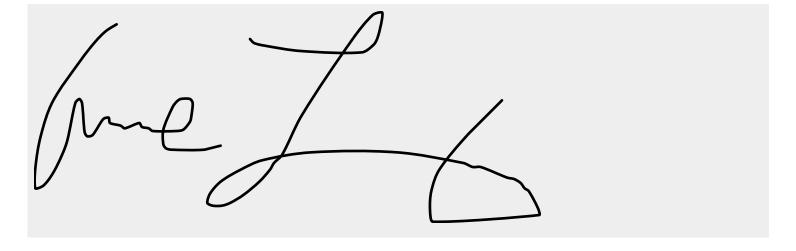
# **Responses Selected:**

Yes

# Signature, Head of Charter School



# Signature, President of the Board of Trustees



# **Date**

2016/07/21

Thank you.



Created: 07/18/2016 Last updated: 08/01/2016

# Page 1

#### 1. NEW YORK STATE REPORT CARD

Provide a direct URL or web link to the most recent New York State School Report Card for the charter school (See https://reportcards.nysed.gov/).

(Charter schools completing year one will not yet have a School Report Card or link to one. Please type "URL is not available" in the space provided).

https://data.nysed.gov/reportcard.php?

 $\frac{instid=800000067031\&year=2015\&createreport=1\&allchecked=1\&enrollment=1\&avgclasssize=1\&freelunch=1\&attendance=1\&suspensions=1\&teacherqual=1\&teacherturnover=1\&staffcounts=1\&38ELA=1\&38MATH=1\&48SCl=1\&lep=1\&naep=1\&elemELA=1\&elemMATH=1\&elemSci=1\&unweighted=1$ 



Created: 07/29/2016 Last updated: 11/01/2016

# Page 1

#### PROGRESS TOWARD CHARTER GOALS

The following tables reflect formatting in the online portal required for Board of Regents-authorized charter schools and NYCDOE-authorized charter schools only. Schools should list Progress Toward Charter Goals by August 1, 2016. If the goals are based on student performance data that the school will not have access to before August 1, 2016 (e.g., the NYS Assessment results), explain this in the "2015-2016 Progress Toward Attainment of Goal" column. The information can be updated when available. Please complete and submit no later than November 1, 2016.

#### 1. ACADEMIC STUDENT PERFORMANCE GOALS

# **2015-16 Progress Toward Attainment of Academic Goals**

	Academic Student Performance Goal	Measure sed to Evaluate Progress Toward Attainment of Goal	Goal - Met, Partially Met, or Not Met	If Not Met, Describe Efforts School Will Take
Academic Goal 1	Each year, 75% of 3rd-7th graders who have been enrolled at the school for at least two consecutive years will perform at or above Level 3 on the NYS ELA exam.	New York State 2016 English Language Arts Exam	Proficiency Rates (among students enrolled two consecutive years)  Gr. 3: 25% Gr. 4: 8% Gr. 5: 26% Gr. 6: 32% Gr. 7: 31%  Result: Not Met	While the goal was not met, there was an 11 percent positive change. MetLCS is in the second year of implementation of a rigorous ELA curriculum that has led to positive growth. Additionally, MetLCS is implementing whole school Response to Intervention blocks to provide intensive, research-based interventions

				for all scholars in need of supports.
Academic Goal 2	Each year, 75% of 3rd-6th graders who have been enrolled at the school for at least two consecutive years will perform at or above Level 3 on the NYS Math exam.	New York State 2016 Math Exam	Proficiency Rates (among students enrolled two consecutive years):  Gr. 3: 63% Gr. 4: 39% Gr. 5: 15% Gr. 6: 32% Gr. 7: 20%  Result: Not Met	While the goal was not met, there was a six percent positive change. MetLCS is in the second year of implementation of a school-wide rigorous mathematics curriculum that has led to positive growth. Additionally, MetLCS is implementing whole school Response to Intervention blocks to provide intensive, research-based interventions for all scholars in need of supports. Furthermore, the teachers of the grade level that showed the least growth were not retained for the 2016-17 school year.
Academic Goal 3	Each year, 75% of 4th graders who have been enrolled at the school for at least two consecutive years will perform at or above Level 3 on the NYS Science exam.	New York State 2016 Science Exam	Proficiency Rates (among students enrolled two consecutive years): Gr. 4: 78% Result: Met	
	Each year, the		ELA Grade MetLCS/CSD9 Gr. 3: 25%/22%	This goal was met for all grade levels with the exception of fourth grade ELA and fifth grade mathematics. In

Academic Goal 4	percent of students performing at or above Level 3 on the State ELA and Math exams in each tested grade will exceed the average performance of students tested in the same grades of the Community School District in which the school is located.	New York State 2016 English Language Arts and Mathematics Exam	Gr. 4: 8%/24% Gr. 5: 26%/18% Gr. 6: 32%/16% Gr: 7: 31%/17%  Result: Partially Met  Math Grade MetLCS CSD9 Gr. 3: 63%/23% Gr. 4: 39%/23% Gr. 5: 15%/17% Gr. 6: 32%/16% Gr. 7: 20%/14%  Result: Partially Met	both of those circumstances, our school had turnover among teachers mid-year. We are confident that our revised hiring practices have led to higher-quality teachers in the classroom. Additionally, our school's focus on integrity of the curriculum along with coaching and collaborative planning meetings will lead the same growth seen in other grade levels.
Academic Goal 5	For years 2-4 of the charter, the school will receive a "B" or higher on the Student Progress of the NYC DOE Report Card.	NYCDOE Progress Report 2015-2016	N/A  Schools are no longer receiving a letter grade via the NYC DOE Report Card.	
	For years 2 through 5 of the charter, each grade level cohort of the same students will reduce by one half the gap between the percent at or above Level 3 on the previous year's NYS ELA and Math exams (baseline) and 75% at or above Level	New York State 2016	Cohort Proficiency Rates (includes only students tested both years and promoted to next grade):  Gr. 3 to 4 ELA 2015: 11% 2016: 7% Result: Not Met  Gr. 3 to 4 Math 2015: 38% 2016: 38% Result: Not Met  Gr. 4 to 5 ELA 2015: 19% 2016: 19% Result: Not Met	In the areas where low growth occurred, MetLCS had turnover among teachers mid-year. We are confident that our revised hiring practices have led to higher-quality teachers in the

Academic Goal 6	3 on the current year's NYS. ELA and Math exams. If the number of students scoring above proficiency (Level 3) exceeded 75% of the previous year's exam, the school is expected to demonstrate growth (above75%) in the current year.	English Language Arts and Mathematics Exam	Gr. 4 to 5 Math 2015: 26% 2016: 15% Result: Not Met  Gr. 5 to 6 ELA 2015: 15% 2016: 27% Result: Not Met  Gr. 5 to 6 Math 2015: 27% 2016: 31% Result: Not Met  Gr. 6 to 7 ELA 2015: 7% 2016: 30% Result: Not Met  Gr. 6 to 7 Math 2015: 13% 2016: 16% Result: Not Met	classroom. Additionally, our school's focus on integrity of the curriculum along with coaching and collaborative planning meetings will lead the same growth seen in other grade levels.
Academic Goal 7	Each year, the school will be deemed "In Good Standing" on the NYS Report Card.	NYS Report Card	Met	
Academic Goal 8	Each year, for a grade level cohort that has been at the school for three full years, the percent at or beyond the national median in reading and math as measured by the Northwest Evaluation Assessment Measures of	NWEA Assessment	Reading Grade 2 to 3: 70% to 54% -16% - Not Met Grade 3 to 4: 47% to 30% -17% - Not Met Grade 4 to 5: 45% to 20% -25% - Not Met Grade 5 to 6: 22% to 24% +2% - Met Grade 6 to 7: 19% to 18% -1% - Not Met  Math Grade 2 to 3: 61% to 39% -21% - Not Met Grade 3 to 4: 48% to 18%	MetLCS is implementing whole school Response to Intervention to provide intensive, research-based interventions for all scholars in need of supports. Rtl is driven by NWEA performance data. Our teachers have conducted deep data dives in order

Academic Progress (NWEA MAP) assessments will increase by 10% of the cohort.	-30% - Not Met Grade 4 to 5: 31% to 14% -17% - Not Met Grade 5 to 6: 8% to 9% +1% - Met Grade 6 to 7: 9% to 4% -5% - Not Met  Result: Partially Met
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# 2. Do have more academic goals to add?

No

# 3. Do have more academic goals to add?

No

# Page 2

# 4. ORGANIZATIONAL GOALS

# **2015-16 Progress Toward Attainment of Organizational Goals**

	Organizational Goal	Measure sed to Evaluate Progress	Goal - Met, Partially Met, or Not Met	If Not Met, Describe Efforts School Will Take
Org Goal 1	Each year, the school will have an average daily student attendance rate of at least 95%.	PowerSchool, Lighthouse Academies Scholar Information System (LHA SIS), and ATS.	Result: Met	
Org Goal 2	Each year, 95% of all students enrolled on the last day of the school year	PowerSchool, Lighthouse Academies Scholar Information System (LHA	Result: Met	

	will return the following September.	SIS), and ATS.		
Org Goal 3	Each year, the school will comply with all applicable laws, rules, regulations and contract terms including, but not limited to the New York Charter Schools Act, the New York freedom of Information Law, the New York Open Meetings Law, the federal Individuals with Disabilities Education Act, and the federal Family Educational Rights and Privacy Act.	Board of Trustees Minutes, Special Education documentation, etc.	Result: Met	
Org Goal 4	Each year, the average rate of attendance at parent conferences measured quarters 1, 2, and 3 will be 80% or more.	Parent Teacher Conference Tracker	Result: Met	
Org Goal 5	In year one, student enrollment will be within 5% of full enrollment as defined in the school's contract, and in subsequent years of the charter, student enrollment will be within 2% of full enrollment.	PowerSchool, Lighthouse Academies Scholar Information System (LHA SIS), and ATS.	Result: Met	

# 5. Do you have more organizational goals to add?

Yes

# 2015-16 Progress Toward Attainment of Organizational Goals

	Organizational Goal	Measure sed to Evaluate Progress	Goal - Met, Partially Met, or Not Met	If Not Met, Describe Efforts School Will Take
Org Goal 6	Each year, parents will express satisfaction with the school's program, based on the NYCDOE Learning Environment Survey. The school will only have met this goal if 50% or more parents participate in the survey.	NYC DOE Progress Report	N/A Schools are no longer receiving NYC DOE Progress Reports.	
Org Goal 7	Each year, teachers will express satisfaction with school leadership and professional development opportunities as determined by the teachers section of the NYCDOE Learning Environment Survey. The school will only have met this goal if 50% or more teachers participate in the survey.	NYC DOE Progress Report	N/A Schools are no longer receiving NYC DOE Progress Reports.	
	Each year, students will express satisfaction with			

Org Goal 8	the school as determined by the student section of the NYCDOE Learning Environment Survey. The school will only have met this goal if 50% or more of students enrolled participate in the survey.	NYC DOE Progress Report	N/A Schools are no longer receiving NYC DOE Progress Reports.	
Org Goal 9				
Org Goal 10				
Org Goal 11				
Org Goal 12				
Org Goal 13				
Org Goal 14				
Org Goal 15				

# **6. FINANCIAL GOALS**

# **2015-16 Progress Toward Attainment of Financial Goals**

	Financial Goals	Measure sed to Evaluate Progress	Goal - Met, Partially Met, or Not Met	If Not Met, Describe Efforts School Will Take
Financial Goal 1	For each year of the charter renewal term, the school will undergo an independent financial audit that will result in an unqualified opinion and no major findings.	Independent Audit	Result: Met	
	Each year, the school will operate			

Financial Goal 2	on a balanced budget and maintain a stable cash flow.	Quickbooks Reports	Result: Met	
Financial Goal 3				
Financial Goal 4				
Financial Goal 5				



# **Entry 4 Expenditures per Child**

Created: 07/18/2016 Last updated: 07/28/2016

# Page 1

#### **Financial Information**

This information is required of ALL charter schools. Provide the following measures of fiscal performance of the charter school in Appendix B (Total Expenditures and Administrative Expenditures Per Child):

# 1. Total Expenditures Per Child

To calculate **'Total Expenditures per Child'** take <u>total expenditures</u> (from the unaudited 2015-16 Schedule of Functional Expenses) and <u>divide by</u> the year end FTE student enrollment. (Integers Only. No dollar signs or commas).

Note: The information on the Schedule of Functional Expenses on pages 41-43 of the Audit Guide can help schools locate the amounts to use in the two per pupil calculations: <a href="http://www.p12.nysed.gov/psc/AuditGuide.html">http://www.p12.nysed.gov/psc/AuditGuide.html</a>

Line 1: Total Expenditures	6344942
Line 2: Year End FTE student enrollment	423
Line 3: Divide Line 1 by Line 2	14999

# 2. Administrative Expenditures per Child

To calculate 'Administrative Expenditures per Child' To calculate "Administrative Expenditures per Child" first add together the following:

- 1. Take the <u>relevant portion</u> from the 'personnel services cost' <u>row</u> and the 'management and general' <u>column</u> (from the unaudited 2015-16 Schedule of Functional Expenses)
- 2. Any contracted administrative/management fee paid to other organizations or corporations
- 3. Take the total from above and divide it by the year-end FTE enrollment. The relevant portion that

must be included in this calculation is defined as follows:

Administrative Expenditures: Administration and management of the charter school includes the activities and personnel of the offices of the chief school officer, the finance or business offices, school operations personnel, data management and reporting, human resources, technology, etc. It also includes those administrative and management services provided by other organizations or corporations on behalf of the charter school for which the charter school pays a fee or other compensation. Do not include the FTE of personnel whose role is to directly support the instructional program.

#### Notes:

The information on the Schedule of Functional Expenses on pages 41-43 of the Audit Guide can help schools locate the amounts to use in the two per pupil calculations: <a href="http://www.p12.nysed.gov/psc/AuditGuide.html">http://www.p12.nysed.gov/psc/AuditGuide.html</a>.

Employee benefit costs or expenditures should not be reported in the above calculations.

Line 1: Relevant Personnel Services Cost (Row)	721016
Line 2: Management and General Cost (Column)	605616
Line 3: Sum of Line 1 and Line 2	1326632
Line 5: Divide Line 3 by the Year End FTE student enrollment	3136

# Thank you.



# **Entry 6a Audited Statements**

Created: 07/28/2016 Last updated: 01/06/2017

Regents, NYCDOE and Buffalo BOE authorized schools should enter the financial contact information requested and upload the independent auditor's report and internal controls reports as <u>one combined file</u>.

# Page 1

# **School Based Fiscal Contact Information**

School Based Fiscal	School Based Fiscal	School Based Fiscal
Contact Name	Contact Email	Contact Phone
Mary Beth Rousseau		

# **Audit Firm Contact Information**

School Audit	School Audit	School Audit	Years Working With
Contact Name	Contact Email	Contact Phone	This Audit Firm
Anthony J Tempesta, CPA			

# If Applicable:

Outsourced Financial Services Firm Name	Outsourced Financial Services Contact	Outsourced Financial Services Email	Outsourced Financial Services Phone	Years Working With This Firm

# Please upload as <u>one combined</u> file:

a. the independent auditor's report on financial statements and notes; andb. reports on internal controls over financial reporting and compliance

https://nysed-cso-reports.fluidreview.com/media/assets/survey-uploads/84001/6272844-F7wWrRhhE3/Met%20-%202016%20audit%20report%20and%20mgmt%20letter%20FINAL.pdf

# Metropolitan Lighthouse Charter School, Inc.

# **Financial Statements**

(Together with Independent Auditors' Report)

Years Ended June 30, 2016 and 2015

# METROPOLITAN LIGHTHOUSE CHARTER SCHOOL, INC.

# FINANCIAL STATEMENTS

# (Together with Independent Auditors' Report)

# YEARS ENDED JUNE 30, 2016 AND 2015

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Independent Auditors' Report on Internal Control Over Financial Report And Other Matters Based on an Audit of Financial Statements  Performed in Accordance with Government Auditing Standards	

Marks Paneth LLP 4 Manhattanville Rd, 4th Floor, Suite 402 Purchase, NY 10577 P 914.524.9000 F 914.524.9185 markspaneth.com New York New Jersey Pennsylvania Washington, DC



#### INDEPENDENT AUDITORS' REPORT

The Board of Trustees Metropolitan Lighthouse Charter School, Inc. Bronx, New York

#### Report on the Financial Statements

We have audited the accompanying financial statements of Metropolitan Lighthouse Charter School, Inc. ("the School") which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.





#### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the School as of June 30, 2016 and 2015, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

## Other Reporting Required by Government Auditing Standards

Marks Kaneth HP

In accordance with *Government Auditing Standards*, we have also issued our report dated November xx, 2016, on our consideration of the School's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of this report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the School's internal control over financial reporting and compliance.

Purchase, New York December 28, 2016

# METROPOLITAN LIGHTHOUSE CHARTER SCHOOL, INC. STATEMENTS OF FINANCIAL POSITION AS OF JUNE 30, 2016 AND 2015

	2016	Restated 2015
ASSETS	2010	
Cash	\$ 3,534,651	\$ 2,849,835
Receivables (Note 4)	232,385	368,444
Prepaid expenses	37,563	E
Security deposits (Note 6)	1,023,749	1,023,749
Fixed assets - net (Note 5)	18,655,439	19,386,223
Other asset - escrow account (Note 3)	70,155	70,155
TOTAL ASSETS	\$ 23,553,942	\$ 23,698,406
LIABILITIES		
Accounts payable and accrued expenses	\$ 140,528	\$ 152,994
Accrued payroll and payroll taxes	301,580	245,051
Accrued compensated absences	42,072	35,847
Deferred revenue	-	6,089
Capital leases (Note 6)	21,496,750	20,598,268
TOTAL LIABILITIES	21,980,930	21,038,249
COMMITMENTS AND CONTINGENCIES (Note 10)		
NET ASSETS (Note 2B)		
Unrestricted	1,573,012	2,660,157
TOTAL NET ASSETS	1,573,012	2,660,157
TOTAL LIABILITIES AND NET ASSETS	\$ 23,553,942	\$ 23,698,406

# METROPOLITAN LIGHTHOUSE CHARTER SCHOOL, INC. STATEMENTS OF ACTIVITIES FOR THE YEARS ENDED JUNE 30, 2016 AND 2015

DEVENUE AND CURRORS.	2016	Restated 2015
REVENUE AND SUPPORT:		
Student enrollment fees (Note 2E) Federal grants NYC rent support and other income	\$ 6,304,979 341,270 315,074	\$ 5,419,265 266,951 158,827
In-kind contributions (Note 9)	33,542	28,213
Total revenue and support	6,994,865	5,873,256
EXPENSES:		
Program services:	7 479 903	F 776 204
Educational services Total program services	7,478,893 7,478,893	5,776,394 5,776,394
Total program services	7,410,000	0,770,004
Supporting services:		
Management and general	603,116	564,114
Total supporting services	603,116	564,114
Total expenses	8,082,009	6,340,508
CHANGE IN UNRESTRICTED NET ASSETS	(1,087,144)	(467,252)
NET ASSETS - Beginning of Year	2,660,157	3,127,409
NET ASSETS - End of Year	\$ 1,573,012	\$ 2,660,157

# METROPOLITAN LIGHTHOUSE CHARTER SCHOOL, INC. STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED JUNE 30, 2016

	UCATIONAL SERVICES		GENERAL	 TOTAL
Salaries	\$ 2,937,638	\$	120,058	\$ 3,057,696
Payroll taxes and fringe benefits	664,676		29,078	693,754
<b>Total Salaries and Related Costs</b>	 3,602,314	12-1-1-1-1	149,136	3,751,450
Professional fees and consultants	32,856		3,651	36,507
Management fees (Note 7)	•		309,827	309,827
Contracted services - other	171,911		3,078	174,989
Supplies and equipment purchases	310,968		6,700	317,668
Depreciation and amortization (Note 2D)	783,065		7.7	783,065
Food	10,169		? <b>-</b>	10,169
Insurance			36,853	36,853
Interest	1,950,586		-	1,950,586
Occupancy and utilities	290,879		3.5	290,879
Cleaning services	224,137		174	224,137
Printing	12,269		16,945	29,214
Staff development and recruitment	13,428		2,558	15,986
Telephone	33,764		3,751	37,515
In-kind contribution - textbooks (Note 9)	33,542		12	33,542
Other	9,005		70,617	79,622
<b>Total Other Expenses</b>	3,876,579		453,980	4,330,559
Total Expenses	\$ 7,478,893	\$	603,116	\$ 8,082,009

# METROPOLITAN LIGHTHOUSE CHARTER SCHOOL, INC. STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED JUNE 30, 2015

	UCATIONAL SERVICES	GENERAL		Restated TOTAL
Salaries	\$ 2,391,796	\$ 98,200	\$	2,489,996
Payroll taxes and fringe benefits	601,578	26,524		628,102
<b>Total Salaries and Related Costs</b>	 2,993,374	124,724		3,118,098
Professional fees and consultants	66,101	7,345		73,446
Management fees (Note 7)	-	212,698		212,698
Contracted services - other	96,258	43,246		139,504
Supplies and equipment purchases	127,870	15,804		143,674
Advertising	-	2,403		2,403
Depreciation and amortization (Note 2D)	567,955	3350		567,955
Food	6,639	-		6,639
Insurance	-	51,868		51,868
Interest	1,490,983	-		1,490,983
Occupancy and utilities	137,318	-		137,318
Cleaning services	115,992	-		115,992
Printing	15,915	21,979		37,894
Staff development and recruitment	95,691	18,227		113,918
Telephone	26,060	2,896		28,956
In-kind contribution - textbooks (Note 9)	28,213			28,213
Other	8,024	62,925		70,949
Total Other Expenses	2,783,020	 439,390	_	3,222,410
Total Expenses	\$ 5,776,394	\$ 564,114	\$	6,340,508

# METROPOLITAN LIGHTHOUSE CHARTER SCHOOL, INC. STATEMENT OF CASH FLOWS FOR THE YEARS ENDED JUNE 30, 2016 AND 2015

		2016		Restated 2015
CASH FLOWS FROM OPERATING ACTIVITIES: Change in net assets Adjustments to reconcile change in net assets to net cash used in operating activities:	\$	(1,087,144)	\$	(467,252)
Depreciation and amortization		783,065		567,955
Changes in operating assets and liabilities:				
Receivables		136,059		(234,001)
Prepaid expenses		(37,563)		40,707
Security deposits		n <u>u</u>		(1,019,294)
Accounts payable and accrued expenses		(12,465)		(46,536)
Accrued payroll and payroll taxes		56,529		114,738
Accrued compensated absences		6,225		17,975
Deferred revenues		(6,089)		(34,832)
Net Cash Used in Operating Activities		(161,383)		(1,060,540)
CASH FLOWS FROM INVESTING ACTIVITIES:				
Purchase of fixed assets	-	(52,282)		(59,225)
Net Cash Used In Investing Activities		(52,282)		(59,225)
CASH FLOWS FROM FINANCING ACTIVITIES:				
Increase in present value of capital lease	_	898,482	-	735,293
Net Cash Provided by Financing Activities	_	898,482	-	735,293
NET INCREASE (DECREASE) IN CASH		684,817		(384,472)
CASH, Beginning of Year	10-	2,849,835		3,234,307
CASH, End of Year	\$	3,534,651	\$	2,849,835
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION				
Cash paid during the year for interest	\$	945,252	\$	618,750
SUPPLEMENTAL SCHEDULE OF NONCASH INVESTING AND FINANCING ACTIVITIES:				
Capital lease - building and equipment	\$	_	\$	19,600,000
Capital lease obligations	\$		\$	20,372,185

#### **NOTE 1 - ORGANIZATION**

Metropolitan Lighthouse Charter School, Inc. (the "School"), a New York not-for-profit Education Corporation, is a charter school incorporated on June 24, 2009, pursuant to the New York Charter School Act of 1998. The School is located in the Bronx, New York, and offers classes from kindergarten through eighth grade. The School's major source of revenue is provided by the New York City Department of Education (NYC DOE).

The School qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code, and accordingly, is not subject to federal and state income taxes.

#### NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

- A) Basis of Accounting The accompanying financial statements are prepared on the accrual basis of accounting, in accordance with accounting principles generally accepted in the United States of America.
- B) Financial Statement Presentation The School reports its financial position and operating activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. The classification of net assets and related support, revenue and expenses is based on the presence or absence of donor-imposed restrictions.

These classifications are defined as follows:

<u>Permanently Restricted</u> – net assets, generally of an endowment nature, resulting from contributions and other inflows of assets whose use by the recipient is limited by donor-imposed stipulation that neither expire by passage of time nor can be fulfilled or otherwise removed by actions of the recipient. The School has no permanently restricted net assets.

<u>Temporarily Restricted</u> - net assets resulting from contributions and other inflows of assets whose use by the recipient is limited by donor-imposed stipulations that either expire by passage of time or can be fulfilled and removed by actions taken pursuant to those stipulations. When stipulations terminate or are fulfilled, the amounts involved are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. The School has no temporarily restricted net assets.

<u>Unrestricted</u> – unexpended net assets that are neither permanently nor temporarily restricted by donor-imposed stipulations.

C) Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

- D) Fixed Assets Fixed assets such as furniture and equipment are carried at cost less accumulated depreciation, which is provided on the straight-line method over the estimated useful lives of the respective assets (3 7 years). Building and building improvements are depreciated over 29 years. Leasehold improvements are capitalized at cost and amortized over the lesser of the term of the lease or the estimated useful life of the improvement. It is the School's policy to capitalize property, plant and equipment and leasehold improvements in excess of \$1,000. Expenditures for repairs and maintenance are expensed as incurred.
- E) Revenue The School is funded by the NYC DOE based on the approved per pupil operating expenses of the public school district in which the pupil resides. The amount received each year from the resident district is the product of the approved per pupil operating expenses and the full time equivalent student enrollment of the School. The School is also the recipient of awards from other various government entities. The awards are subject to compliance requirements and financial audits by the funding source. The accompanying financial statements make no provision for possible disallowances.

Student enrollment fees received for future years are deferred to the applicable year and are shown as deferred revenue on the Statement of Financial Position. As of June 30, 2016 and 2015, deferred revenue totaled \$0 and \$6,089, respectively.

In-kind contributions are reflected as contributions at their fair value at the date of the donation and are reported as unrestricted support unless explicit donor stipulations specify how donated assets must be used.

- F) Functional Allocation of Expenses The direct costs of providing educational programs and other activities have been summarized on a functional basis in the Statement of Financial Position. In addition, certain indirect costs have been allocated among the programs.
- G) *Reclassifications* Certain line items in the June 30, 2015 financial statements have been reclassified to conform to the June 30, 2016 presentation.
- H) **Advertising** Advertising costs are expensed as incurred. Advertising expense for the years ended June 30, 2016 and 2015 amounted to \$0 and \$2,403, respectively.

#### NOTE 3 - OTHER ASSET - ESCROW ACCOUNT

At the request of the NYC DOE, the School is required to establish a dissolution escrow fund in the amount of \$70,000 as a contingency fund for dissolution expenses. As of June 30, 2016 and 2015, the balance of the account was \$70,155 and \$70,155, respectively.

#### **NOTE 4 - RECEIVABLES**

Receivables consist of the following:

	2016	2015
New York State Education Department New York City Department of Education	\$ 221,958	\$ 215,281 140,950
Other	10,427	12,213
	\$ 232,385	\$ 368,444
NOTE 5 - FIXED ASSETS		
Fixed assets consist of the following:	2016	Restated 2015
Furniture and equipment Construction in progress	\$ 132,343 24,000	\$ 104,063
Capital lease – equipment Capital lease - building	262,976 19,600,000 20,019,319	262,976 <u>19,600,000</u> 19,967,039
Less: accumulated depreciation and amortization	_(1,363,880)	(580,817)
Net book value	\$ 18,655,439	\$ 19,386,222

Depreciation expense for the years ending June 30, 2016 and 2015 was \$783,065 and \$567,955, respectively.

## **NOTE 6 - CAPITAL LEASES**

During 2014, the School acquired various equipment totaling \$262,976 under multiple capital lease agreements. Accumulated depreciation in the statements of financial position includes \$112,949 and \$48,406 related to the equipment as of June 30, 2016 and 2015, respectively. Amortization of the asset included in depreciation and amortization expenses amounted to \$64,542 and \$48,406 for the years ended June 30, 2016 and 2015, respectively. The leases call for thirty-six to forty eight monthly payments with an interest rate varying from 7.5% to 8.4%. As of June 30, 2016 and 2015, the outstanding balance was \$144,532 and \$226,083, respectively. The lease obligation is as follows:

For the Years Ending June 30,		Amount
2017 2018	\$	107,000 53,000
Total obligation		160,000
Less: amount representing interest	100	16,000
Present value of minimum payments	\$_	144,000

#### NOTE 6 - CAPITAL LEASES (Continued)

On September 1, 2014, the School lease arrangement to occupy a new facility commenced with the opening of the 2014/2015 school year. The lease expires on August 31, 2043. The School has an option to buy the building in any of the 37<sup>th</sup> through 48th calendar months of the term of the lease for \$23.9 million. The price increases to \$24.4 million if the option is exercised in any of the 49<sup>th</sup> to 60<sup>th</sup> calendar months of the lease. The School is responsible for all expenses, such as real estate taxes, utilities, water, etc. to maintain the building. The lease also requires the School to make a \$1,000,000 security deposit. This lease met the requirements to be treated as a capital lease. The \$19,600,000 present value of the fixed payments under the lease at a 9.25% imputed interest rate was recorded as the initial carrying value of the asset. The appraised value of the building is \$19,800,000 (see note 5). The 9.25% was an estimate of the overall rate at which the School could borrow the funds to have purchased the building outright with 100% debt financing. The initial carrying value is lower than the appraised value as the building will revert to the owner at the lease expiration date.

Accumulated depreciation in the statements of financial position includes \$1,182,759 and \$506,897 related to the space as of June 30, 2016 and 2015, respectively. Amortization of the building included in depreciation and amortization expenses amounted to \$675,862 and \$506,897 for the years ended June 30, 2016 and 2015, respectively. As of June 30, 2016 and 2015 the outstanding balance was \$21,352,218 and \$20,372,185, respectively. The lease obligation is as follows:

For the Years Ending June 30,	Amount
2017	\$ 1,168,000
2018	1,191,000
2019	1,860,000
2020	2,040,000
2021	2,086,000
Thereafter	59,858,000
Total obligation	68,203,000
Less: amount representing interest	46,850,000
Present value of minimum payments	\$21,353,000

The lease obligation includes much lower payments in the first 48 months than in the later periods in order to reduce the School's cash obligations while it establishes itself. As a result, the interest expense recorded on the lease obligation during this period will exceed the cash paid causing the lease obligation amount to increase in the early years.

Interest expense for the years ended June 30, 2016 and 2015 was \$1,950,586 and \$1,490,983, respectively.

#### NOTE 7 - MANAGEMENT FEES

The School contracted the management of certain academic and business operations to Lighthouse Academies, Inc. The contract calls for an annual fee, a bonus provision for meeting certain milestones, and reimbursed expenses. For the years ended June 30, 2016 and 2015, total expenses was \$309,827 and \$212,698, respectively.

#### **NOTE 8 – RETIREMENT PLAN**

The School has a 401(k) Plan for employees who are at least 21 years old and have completed one month of service. The plan includes a safe harbor employer matching provision. The employer must match employee contributions dollar for dollar, not to exceed 4% of compensation. Safe harbor contributions are immediately vested with the participants. At June 30, 2016 and 2015, the school had a safe harbor matching employer contribution liability of \$4,903 and \$21,740, respectively. For the years ended June 30, 2016 and 2015, employer contributions totaled \$42,933 and \$38,219, respectively.

#### NOTE 9 - IN-KIND CONTRIBUTIONS

The School received donated textbooks and other technology related donations throughout the year. The fair market value of these donations was \$33,542 and \$28,213 for the years ended June 30, 2016 and 2015, respectively.

#### NOTE 10 - COMMITMENTS AND CONTINGENCIES

Financial instruments that potentially subjects the School to a concentration of credit risk includes cash accounts with banks that exceed the Federal Deposit Insurance Corporation ("FDIC") insurance limits. The FDIC insures deposits up to \$250,000 per depositor per insured bank. As of June 30, 2016 and 2015, the School had cash accounts that from time to time could have exceeded the FDIC insurance limits. Management believes that these financial institutions have strong credit ratings and that credit risk to these accounts is minimal.

Concentration of risk also exists between the School and the New York City Department of Education. For the years ended June 30, 2016 and 2015, the School received 90% and 92%, respectively, of its funding from the New York City Department of Education in the form of student enrollment fees.

The School has no uncertain tax positions as of June 30, 2016 and 2015 in accordance with Accounting Standards Codification ("ASC") Topic 740, "Income Taxes," which provides standards for establishing and classifying any tax provisions for uncertain tax positions.

#### NOTE 11 - RELATED-PARTY TRANSACTIONS

- A) The School has a management fee arrangement with Lighthouse Academies, Inc., to provide educational and business services (See Note 7). A Regional Vice President and a board member of Lighthouse Academies, Inc. are also board members of the School.
- B) The School received reimbursement for certain expenses shared with another charter school, which also has a management service agreement with Lighthouse Academies, Inc. In 2016 and 2015, the reimbursements totaled \$9,259 and \$0, respectively.

# NOTE 12 - PRIOR PERIOD ADJUSTMENTS

The School recorded prior period adjustments to correct the appraised value of the new building and the capital lease obligation value, based on an updated amortization schedule, as follows:

	ORIGINAL 2015	ADJUSTMENT	RESTATED 2015
Fixed assets	\$ 18,261,512	\$ 1,124,711	\$ 19,386,223
Capital lease	18,038,583	2,559,685	20,598,268
Net assets	4,097,131	(1,436,974)	2,660,157
Depreciation and amortization	592,667	(24,712)	567,955
Interest expense	29,297	1,461,686	1,490,983

# NOTE 13 - SUBSEQUENT EVENTS

Management has reviewed subsequent events and transactions that occurred after the date of the Statement of Financial Position through December 28, 2016, the date the financial statements are available to be issued.

Marks Paneth LLP 4 Manhattanville Rd, 4th Floor, Suite 402 Purchase, NY 10577 P 914.524.9000 F 914.524.9185 markspaneth.com New York New Jersey Pennsylvania Washington, DC



INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING
AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL
STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

The Board of Trustees Metropolitan Lighthouse Charter School, Inc. Bronx, New York

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the Metropolitan Lighthouse Charter School, Inc. (the "School"), which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements, and have issued our report thereon dated December 28, 2016.

#### Internal Control Over Financial Reporting

In planning and performing our audits of the financial statements, we considered the School's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the School's internal control. Accordingly, we do not express an opinion on the effectiveness of the School's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect, and correct misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.





#### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the School's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

#### Purpose of This Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Purchase, New York December 28, 2016

Mark Breth LLP

Metropolitan Lighthouse Charter School, Inc.

**Communicating Internal Control Related Matters** 

(Under AICPA AU-C Section 265)

For the Year Ended June 30, 2016

Marks Paneth LLP 4 Manhattanville Rd, 4th Floor Washington, DC Purchase, NY 10577 P 914.524.9000 F 914.524.9185 www.markspaneth.com

New York City New Jersey Long Island Westchester



December 19, 2016

To the Board of Trustees of Metropolitan Lighthouse Charter School, Inc. Bronx, New York

In planning and performing our audit of the financial statements of Metropolitan Lighthouse Charter School, Inc. (the "School") as of and for the year ended June 30, 2016, in accordance with auditing standards generally accepted in the United States of America, we considered the School's internal control over financial reporting (internal control) as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the School's internal control. Accordingly, we do not express an opinion on the effectiveness of the School's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency or combination of deficiencies in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

Our consideration of the internal control was for the limited purpose described in the first paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

If matters do come to our attention between the date of this letter and the date of our audit report on School's financial statements, we will communicate them to you separately.

This report is intended solely for the information and use of the Board of Trustees and management of the School, and is not intended to be and should not be used by anyone other than these specified parties, unless permission is granted.

Very truly yours,

Marks Paneth LLP



Marker Paneth LLP



# **Entry 6b Additional Financial Docs**

Last updated: 07/28/2016

The additional items listed below should be uploaded <u>if applicable</u>. Please explain the reason(s) if the items are not included. Examples might include: a written management letter was not issued; the school did not expend federal funds in excess of the Single Audit Threshold of \$750,000; the corrective action plan will be submitted by the following date (should be no later than 30 days from the submission of the report); etc.

# Page 1

# 1. Management Letter

https://nysed-cso-reports.fluidreview.com/media/assets/survey-uploads/84010/6272849-8mMlunnVv3/MLCS%20-%202015%20AU-C%20265%20(no%20material%20weakness)%20letter.pdf

# **Explanation for not uploading the Management Letter.**

(No response)

### 2. Form 990

https://nysed-cso-reports.fluidreview.com/media/assets/survey-uploads/84010/6272849-FINDqRIBTE/MetLCS%20-%202014%20Form%20990.PDF

# Explanation for not uploading the Form 990.

(No response)

# 3. Federal Single Audit

Note: A copy of the Federal Single Audit must be filed with the Federal Audit Clearinghouse. Please refer to OMB Uniform Guidelines for the federal filing requirements.

(No response)

Explanation for not uploading the rederal Single Addit.
Not required to file Federal Single Audit
4. CSP Agreed Upon Procedure Report
(No response)
Explanation for not uploading the procedure report.
Not a CSP Grant recipient
5. Evidence of Required Escrow Account
(No response)
Explanation for not uploading the Escrow evidence.
Not applicable
6. Corrective Action Plan
A <b>Corrective Action Plan</b> for Audit Findings and Management Letter Recommendations, which must include:
a. The person responsible
b. The date action was taken, or will be taken
<ul><li>c. Description of the action taken</li><li>d. Evidence of implementation (if available)</li></ul>
a. Evidence of implementation (if available)

(No response)

**Explanation for not uploading the Corrective Action Plan.** 

No Audit Findings or Management Letter Recommendations

Marks Paneth LLP 660 White Plains Road Long Island
Tarrytown, NY 10591-5139 Westchester P 914.524.9000 F 914.524.9185 www.markspaneth.com

Manhattan Cayman Islands



October 29, 2015

To the Board of Trustees of Metropolitan Lighthouse Charter School, Inc. Bronx, New York

In planning and performing our audit of the financial statements of Metropolitan Lighthouse Charter School, Inc. (the "School") as of and for the year ended June 30, 2015, in accordance with auditing standards generally accepted in the United States of America, we considered the School's internal control over financial reporting (internal control) as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the School's internal control. Accordingly, we do not express an opinion on the effectiveness of the School's internal control

Our consideration of internal control was for the limited purpose described in the first paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, there can be no assurance that all such deficiencies have been identified. However, as discussed below, we identified a deficiency in internal control that we consider to be a significant deficiency.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency or combination of deficiencies in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. We did not identify any deficiencies in internal control that we consider to be material weaknesses.

A significant deficiency is a deficiency, or combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance. We consider the following deficiency in the School's internal control to be a significant deficiency.

Capital Leases - During the audit, it was noted that the School signed a twenty-nine year lease that was improperly recorded as an operating lease, which resulted in the School not recording fixed assets of \$18.5 million and the corresponding liability. We recommend that the School ensure that all transactions are recorded in accordance with generally accepted accounting principles (GAAP).

This report is intended solely for the information and use of the Board of Trustees and management of the School, and is not intended to be and should not be used by anyone other than these specified parties, unless permission is granted.

Very truly yours,

Marks Paneth LLP



arks Panoth HP

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)

OMB No. 1545-0047

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

► Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Tax vear beginning JUL 1, 2014 and ending JUN 30, 2015

Open to Public Inspection

Α	For the	2014 calendar year, or tax year beginning $$	g Jt	JN 30,	2015	
	Check if applicable			D Employer	dentific	cation number
	Addres change Name	METROPOLITAN LIGHTHOUSE CHARTER SCHOOL				
Ļ	change	8				
	Initial return Final return/	Number and street (or P.0. box if mail is not delivered to street address)  180 WEST 165TH STREET	/suite	E Telephone	e number	
_	termin- ated Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipt		5,873,256.
F	⊥return Applica  tion	BRONX, NI 10452		H(a) Is this a		
	⊥ltiòh pendin				ordinates	
		SAME AS C ABOVE				cluded? Yes No
<u>L</u>	Tax-exe	mpt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 4947(a)(1)	<u> 527</u>			list. (see instructions)
		WWW.LIGHTHOUSE-ACADEMIES.ORG		H(c) Group e		
			Year of	f formation: 4	009 M	State of legal domicile: <b>NY</b>
P		Summary	CCI	TOT ADC	EOD (	מר ז פרפ
Se	1 1	Briefly describe the organization's mission or most significant activities: PREPARE GRADUATION THROUGH A RIGOROUS ARTS-INFUSED 1	DROC	MAGE	FOR (	COULEGE
Activities & Governance	-	Check this box  if the organization discontinued its operations or disposed of			ita nat aa	
Ver		-			1 1	seis. 7
ၓၟ		Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)				7
<b>ფ</b>		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			···· <del>                                 </del>	57
iţi					···· ⊢ →	11
÷		Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), line 12			···· ⊢ →	0.
ĕ		Net unrelated business taxable income from Form 990-T, line 34			···· +	0.
_	<del> </del>	Tet amounted business taxable mount from one 1, miles 1	<u> </u>	Prior Year		Current Year
•	8 (	Contributions and grants (Part VIII, line 1h)			714.	295,164.
Revenue		Program service revenue (Part VIII, line 2g)		4,510,		5,578,092.
eve		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			0.	0.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	0.
		Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,698,	5,873,256.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,357,	841.	3,118,098.
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.
xpe	b -	Total fundraising expenses (Part IX, column (D), line 25)				
Ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,456,	023.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,813,	864.	4,905,534.
	19	Revenue less expenses. Subtract line 18 from line 12		884,	333.	967,722.
Net Assets or Find Balances			Beg	inning of Curre		End of Year
Sset	20	Total assets (Part X, line 16)		3,516,		22,573,695.
at Ag	21	Total liabilities (Part X, line 26)		388,		18,478,564.
	22	Net assets or fund balances. Subtract line 21 from line 20		3,127,	409.	4,095,131.
		Signature Block				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	-	ties of perjury, I declare that I have examined this return, including accompanying schedules and s			-	knowledge and belief, it is
true	, correct	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	ерагег п	las ally knowle	uge.	
e:		Signature of officer		I Date		
Sig He	I	ANNE LARAWAY, BOARD PRESIDENT				
пе		Type or print name and title				
		Print/Type preparer's name Preparer's signature	Da	ate	Check	PTIN
Pai		ANTHONY TEMPESTA			if	
		Firm's name MARKS PANETH LLP		Firm's	self-employe	u
	+	Firm's address		1 11111		
	_ [			Phon	e no.	
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)				X Yes No

Pa	rt III	Statement of Program Service Accomplishments
		Check if Schedule O contains a response or note to any line in this Part III
1	PRE	y describe the organization's mission: EPARE STUDENTS THROUGH RIGOROUS PROGRAMS THAT PROVIDE THEM WITH A
		JNDATION THAT WILL ALLOW THEM TO SUCCEED IN AND GRADUATE FROM
	COI	LLEGE.
2	Did th	he organization undertake any significant program services during the year which were not listed on
		rior Form 990 or 990-EZ?
•		es," describe these new services on Schedule O.  the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
3		he organization cease conducting, or make significant changes in how it conducts, any program services?
4		ribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
		on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4a	rever (Code:	nue, if any, for each program service reported.  (Expenses \$ 4,339,420 • including grants of \$ 0 • ) (Revenue \$ 5,578,092 • )
<del>4</del> a	THE	PROGRAM PROVIDES EDUCATIONAL SERVICES IN CLASSES FROM KINDERGARTEN
		ROUGH EIGTH GRADE. THE SCHOOL HAD 366 STUDENTS DURING THE FISCAL YEAR
	ENL	DED JUNE 30, 2015.
4b	(Code:	) (Expenses \$
4c	(Code:	) (Expenses \$
4d		r program services (Describe in Schedule O.)
46	(Expen	
4e	ıulal	program service expenses 4,339,420.

# Form 990 (2014) METROPOLITAN Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	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			v
_	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	_		Х
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
•	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 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 of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	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	44.1		Х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e	Х	
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	1 ie	21	
•	the organization's separate of consolidated financial statements for the tax year include a footnote that addresses  the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- "		
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	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,	4-		х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		Х
19	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
IJ	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	, , , , , , , , , , , , , , , , , , , ,			

# Form 990 (2014) METROPOLITAN LIGHT Part IV Checklist of Required Schedules (continued)

			Yes	No
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	Х	
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
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		х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			3,7
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	37	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			<b> </b> ₩
0.4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Calcadyda N. Dart II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<del></del>
33	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			
٠.	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	Х	

# Form 990 (2014) METROPOLITAN LIGHTHOUSE CHARTER SCHOOL 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					Ш
			1.3		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	13			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	(gambling) winnings to prize winners?	 I		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		E 7			
	filed for the calendar year ending with or within the year covered by this return		57		37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				37
				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					٠,,
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	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 A					37
_	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 trans-			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					X
	any contributions that were not tax deductible as charitable contributions?			6a		<u> </u>
D	If "Yes," did the organization include with every solicitation an express statement that such contribu		-	6b		
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).			OD		
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvicae r	rovided to the navor?	7a		Х
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<del></del>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v			7.0		
·	to file Form 8282?			7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		7.0		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		ct?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	sponsoring organization have excess business holdings at any time during the year?			8		
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		
10	Section 501(c)(7) organizations. Enter:					
а	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:					
а	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	າ 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.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
_	<b>Note.</b> 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	l				
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand			4.6		v
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ю U		14b		I

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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	7		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	7		
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	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)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	MANSOOR MUSTAFA C/O LIGHTHOUSE ACADEMIES INC			

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### Page 7

# 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 currenthighest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization		orga T	anıza			пре	nsat			(F)	
(A)	(B)		<b>(C)</b> Position					(D)	(E)	(F)	
Name and Title	Average		not c	check	more	than		Reportable	Reportable	Estimated amount of other	
	hours per week	box	t, unle cer ar	ess pe nd a d	rson irecto	is bot or/trus	h an tee)	compensation from	compensation from related		
	(list any	ro						the	organizations	compensation	
	hours for	direct				p		organization	(W-2/1099-MISC)	from the	
	related	ee or	stee			nsate		(W-2/1099-MISC)	(,,	organization	
	organizations	trust	al tru		yee	ompe		,		and related	
	below	Individual trustee or director	Institutional trustee	er	Key employee	est c	ner			organizations	
	line)	Indi	Insti	Officer	Key	Highest compensated employee	Forn				
(1) ANNE LARAWAY	1.00										
TRUSTEE/PRESIDENT		Х		Х				0.	0.	0.	
(2) YAROJIN ROBINSON	1.00										
TRUSTEE/TREASURER		Х		Х				0.	0.	0.	
(3) JESSICA HABER	1.00										
TRUSTEE/SECRETARY		X		X				0.	0.	0.	
(4) JANICE LEE	1.00										
TRUSTEE		Х						0.	0.	0.	
(5) JASON RAWLINS	1.00										
TRUSTEE		X						0.	0.	0.	
(6) GENAI GOLDSMITH	1.00										
TRUSTEE		X						0.	0.	0.	
(7) TIM BRYAN	1.00										
TRUSTEE		X						0.	0.	0.	
(8) COURTNEY RUSSELL	40.00										
PRINCIPAL						Х		136,420.	0.	14,967.	
		1									
		1									
			T	$\vdash$							
		1									
			T	$\vdash$							
		1									
		1									
	1		1		1				1		

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			•	C)			(D)	(E)			(F)	
Name and title	Average		not c		more	than		Reportable	Reportable			timate	-
	hours per week					is bot or/trus		compensation	compensation	ו		ount (	of
	(list any	tor						from the	from related organizations	.		other oensa	tion
	hours for	direc.				pa			(W-2/1099-MIS			om the	
	related	tee or	ustee			ensat		(W-2/1099-MISC)	,		orga	anizati	ion
	organizations	al trus	onal tr		loyee	comb						l relate	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	rmer			'	orga	nizatio	ons
		드	드	οť	<u>\$</u>	± 5	요						
						_							
										_			
										-			
1b Sub-total							<b></b>	136,420.		0.	14	4,9	
c Total from continuation sheets to Part VI								0.		0.	1	4 0	0.
d Total (add lines 1b and 1c)							<u> </u>	136,420.		0.	14	4,9	0/.
<ul><li>Total number of individuals (including but n compensation from the organization</li></ul>	ot limited to th	ose	liste	ed al	bove	e) wh	no r	received more than \$100	0,000 of reportable	•			1
compensation from the organization												Yes	No
3 Did the organization list any <b>former</b> officer,	director, or tru	uste	e. ke	ev er	olam	ovee	. or	highest compensated e	mplovee on				
line 1a? If "Yes," complete Schedule J for s	,		,	,	•	,	•	•	' '		3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J i	for such individual		<u>L</u>	4	Х	
5 Did any person listed on line 1a receive or a	•				-			ted organization or indiv	idual for services				
rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	uch ,	pers	son .					5		X
Section B. Independent Contractors									<b>*</b>				
1 Complete this table for your five highest co the organization. Report compensation for										oensati	ion ti	rom	
(A)	trio odioridar y	cui	criai	ng v	VICII	01 11		(B)	your.		(C	)	
Name and business	address							Description of s	services	Con		, isatio	n
LIGHTHOUSE ACADEMIES, INC	-												
PARK DR., BLDG 5A, WESLEY	Y CHAPE	<u>ا</u> ,	FI	<u>. :</u>	33!	543	3	MANAGEMENT F	EES		23'	7,2	34.

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2014) METROPO Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any lin	ne in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts str	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
S, G		Fundraising events						
ar,		Related organizations						
s, ( imi		Government grants (contribut		266,951.				
Sign		All other contributions, gifts, gran	· ·					
盲		similar amounts not included above		28,213.				
	g	Noncash contributions included in lines		28,213.				
g g	h	Total. Add lines 1a-1f		<b>&gt;</b>	295,164.			
				Business Code				
မွ					5,419,265.	5,419,265.		
e Ž			611110	158,827.	158,827.			
Program Service Revenue	c							
eve	d							
Б	е							
ح	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f		<b>&gt;</b>	5,578,092.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		<b>&gt;</b>				
	4	Income from investment of tax	x-exempt bond p	oroceeds <b>&gt;</b>				
	5	Royalties		<u>,</u>				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<u></u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
	d	Net gain or (loss)		<u></u>				
anı	8 a	Gross income from fundraising	•					
		including \$	of					
Other Rever		contributions reported on line	-					
ē		Part IV, line 18						
₹		Less: direct expenses						
		Net income or (loss) from fund		<b>_</b>				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam		······ <b>P</b>				
	и а	Gross sales of inventory, less						
	<b>L</b>	and allowances						
		Less: cost of goods sold						
-	- 6	Net income or (loss) from sale		Business Code				
ŀ	11 a	Miscellaneous Revenu		Dusiness Code				
	ii a b							
	C							
		All other revenue						
		Total. Add lines 11a-11d						
		Total revenue. See instructions.			5,873,256.	5,578,092.	0.	0.

## 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).

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon			, , ,	
	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	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·	ğ i	·
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	137,054.	131,649.	5,405.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		0 060 445	00 505	
	persons described in section 4958(c)(3)(B)	2,352,942.	2,260,147.	92,795.	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include	20 010	36 605	1 (1 )	
	section 401(k) and 403(b) employer contributions)	38,219.	36,605.	1,614.	
9	Other employee benefits	353,900.	338,955.	14,945.	
10	Payroll taxes	235,983.	226,018.	9,965.	
11	Fees for services (non-employees):	010 600		010 600	
а	Management	212,698.		212,698.	
	Legal				
	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	212 050	160 250	E0 E01	
	column (A) amount, list line 11g expenses on Sch O.)	212,950.	162,359.	50,591.	
12	Advertising and promotion	2,403.		2,403.	
13	Office expenses				
14	Information technology				
15	Royalties	253,310.	253,310.		
16	Occupancy	253,310.	253,310.		
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	29,297.	29,297.		
20	Interest Payments to effiliates	49,4910	49,491•		
21	Payments to affiliates  Depreciation, depletion, and amortization	592,667.	592,667.		
22	Inquirence	51,868.	332,007.	51,868.	
23 24	Insurance Other expenses. Itemize expenses not covered	31,000.		31,000.	
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) SUPPLIES AND EQUIPMENT	171,887.	156,083.	15,804.	0.
a L	STAFF DEVELOPMENT	113,918.	95,691.	18,227.	0.
a	FOOD AND OTHER EXPENSES	79,589.	14,664.	64,925.	0.
c d	PRINTING	37,894.	15,915.	21,979.	0.
-	All other expenses	28,955.	26,060.	2,895.	
	Total functional expenses. Add lines 1 through 24e	4,905,534.	4,339,420.	566,114.	0.
<u>25</u> 26	Joint costs.Complete this line only if the organization	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,333,420.	300,114	<u> </u>
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	(ASC 938-720)				F 000 (004.4)

Form 990 (2014)
Part X Balance Sheet

Ра	πX	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part X			
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			81,583.	1	200,245.
	2	Savings and temporary cash investments			3,152,724.	2	2,649,590.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		134,443.	4	368,444.	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		Г		7	
Ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	40,707.	9	0.		
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	18,867,039.			
	b	Less: accumulated depreciation		605,527.	31,978.	10c	18,261,512.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	74,610.	15	1,093,904.		
	16	Total assets. Add lines 1 through 15 (must equa			3,516,045.	16	22,573,695.
	17	Accounts payable and accrued expenses	347,715.	17	433,892.		
	18	Grants payable				18	
	19	Deferred revenue			40,921.	19	6,089.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former	office	rs, directors, trustees,			
≅		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24	). Complete Part X of	0		10 020 502
		Schedule D			0.	25	18,038,583.
	26	Total liabilities. Add lines 17 through 25			388,636.	26	18,478,564.
		Organizations that follow SFAS 117 (ASC 958		ck here LX and			
Ses		complete lines 27 through 29, and lines 33 an			2 127 400		4 005 131
Fund Balances	27	Unrestricted net assets		3,127,409.	27	4,095,131.	
Ba	28	Temporarily restricted net assets		·····		28	
nd	29					29	
		Organizations that do not follow SFAS 117 (A	SC 95	8), check here ▶ ☐ ☐			
S		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or	32	Retained earnings, endowment, accumulated in			3,127,409.	32	/ NOE 121
_	33	Total net assets or fund balances				33	4,095,131.
	34	Total liabilities and net assets/fund balances			3,516,045.	34	22,573,695.

Form **990** (2014)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5	Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Net unrealized gains (losses) on investments	1 2 3 4 5	5,87 4,90 96 3,12	5,5 7,7	34. 22.
6 7 8	Donated services and use of facilities  Investment expenses  Prior period adjustments	6 7 8			<u> </u>
9 10	Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	9 10	4,09	5,1	0. 31.
Pa	rt XII Financial Statements and Reporting				$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part XII				X
1	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.		Yes	No
2a	7 1		2a		X
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  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 consolidated basis, or both:		2b	Х	
	X Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 in Sch	edule O.	2c	Х	
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Act and OMB Circular A-133?  If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?		3a		Х
	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

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

Name of the organization

METROPOLITAN LIGHTHOUSE CHARTER SCHOOL

Pa	art I	Reason for Public 0	Charity Status (	All organizations must co	omplete th	is part.) Se	ee instructions.	
The	orgar	nization is not a private found	lation because it is: (	(For lines 1 through 11, o	check only	one box.)		
1		A church, convention of ch	urches, or association	on of churches describe	d in <b>sectio</b>	n 170(b)(	I)(A)(i).	
2	X	A school described in section 170(b)(1)(A)(ii).(Attach Schedule E.)						
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4		A medical research organiz					•	the hospital's name.
		city, and state:	·	,			(	,
5		An organization operated for	or the benefit of a co	ollege or university owner	d or opera	ted by a g	overnmental unit describ	ned in
·		section 170(b)(1)(A)(iv). (C			a o. opo.a	, 9		
6		A federal, state, or local gov		nental unit described in	section 1	70/h)/1\/A)	(v)	
7	Ħ	An organization that norma	-					nublic described in
'		•	•	initial part of its support i	iioiii a gov	eninentai	unit of from the general	public described in
۰		section 170(b)(1)(A)(vi).(Co		(1)(A)(vi) (Complete Der	<b>+</b> 11 \			
8	H	A community trust describe			-			and an analysis for an
9	ш	An organization that norma	•	•	•			
		activities related to its exen						
		income and unrelated busin		(less section 511 tax) fr	om busine	esses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2).(Con						
10	H	An organization organized a	•	•				_
11		An organization organized a	•	•	-		· · · · · · · · · · · · · · · · · · ·	
		more publicly supported or	-					heck the box in
		lines 11a through 11d that ∈	* *			-		
a	ı		•	•				•
		the supported organization			a majority	of the dire	ctors or trustees of the s	supporting
		organization. <b>You must c</b>	complete Part IV, Se	ections A and B.				
k	) <u> </u>	☐ Type II.A supporting organization.	anization supervised	or controlled in connect	tion with it	s supporte	ed organization(s), by ha	ving
		control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
C	;	$oldsymbol{ol}}}}}}}}}} $	<b>grated.</b> A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,
	_	_ its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.	
C	i L		y integrated.A supp	orting organization opera	ated in cor	nnection w	rith its supported organiz	zation(s)
		that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and an attent	iveness
		requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	s A and D	and Part	V.	
e	, L	☐ Check this box if the orga	anization received a	written determination fro	om the IRS	that it is a	a Type I, Type II, Type III	
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organi	zation.		
1	Ente	er the number of supported o	organizations					
		vide the following information	about the supporte	ed organization(s).				
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization in your	(v) Amount of monetary	(vi) Amount of
		organization		(described on lines 1-9 above or IRC section	governing	document?	support (see	other support (see
				(see instructions))	Yes	No	Instructions)	Instructions)
_								

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	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,						
	(6)						
6	Public support. Subtract line 5 from line 4.						
	etion B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	(4) 2010	(6) 2011	(0) 2012	(4) 2010	(6) 2014	(i) rotai
	Gross income from interest,						
Ü	dividends, payments received on						
	* * *						
	securities loans, rents, royalties						
•	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on			-			
10	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					40	
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	-			-		. □
Sec	organization, check this box and stop ction C. Computation of Publi	c Support Pe	rcentage				<u></u>
	Public support percentage for 2014 (li			column (f))		14	%
	Public support percentage from 2013						
	33 1/3% support test - 2014. If the o						
	stop here. The organization qualifies a	•		•		•	
h	<b>33 1/3% support test - 2013.</b> If the o						
_	and <b>stop here.</b> The organization quali						<b>▶</b>
17a	10% -facts-and-circumstances test						or more.
	and if the organization meets the "fact						
	meets the "facts-and-circumstances"					~	
h	10% -facts-and-circumstances test						
J	more, and if the organization meets th	-					
	organization meets the "facts-and-circ				-		
18	<b>Private foundation.</b> If the organization						
		. s.a not oncor a	20% On mio 10, 10	, 100, 17u, 01 17	2, 3110011 tillo DOX t		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	siow, picase com	piete i dit ii.)				
	endar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and	(-,,	(-,	(-,	(=, ==:	(-,	(-)
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
_	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support					•	
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
	check this box and stop here						<b>_</b>
	ction C. Computation of Publi						
	Public support percentage for 2014 (li					15	%
	Public support percentage from 2013					16	%
	ction D. Computation of Inves					1 1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
19	a 33 1/3% support tests - 2014. If the						
	more than 33 1/3%, check this box ar						
ł	o 33 1/3% support tests - 2013. If the	•			•	•	
	line 18 is not more than 33 1/3%, che						'
20	Private foundation. If the organization	n did not check a	box on line 14 19	ia or 19b. check t	his box and see ir	estructions	

# Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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 11a or 11b 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 (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- **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).
- **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 9(a)) 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 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
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	3a		
	Ju		
	3b		
	ວນ		
	0-		
	3c		
	4a		
	4b		
	4c		
	5a		
	Ju		
	5b		
-	5c		
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	9a		
	9b		
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1 99(	or 99	∪-⊑∠)	<b>2</b> 014

Sche	edule A (Form 990 or 990-EZ) 2014 METROPOLITAN LIGHTHOUSE CHARTER SCHOOL		Pa	age <b>5</b>
Pa	rt IV   Supporting Organizations <sub>(continued)</sub>			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
000	nion b. Type reapporting enganizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		103	110
•	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		
Sec	ction 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		
Sec	ction D. 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, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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	2		
3	the organization maintained a close and continuous working relationship with the supported organization(s).  By reason of the relationship described in (2), did the organization's supported organizations have a			
Ū	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):	,		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	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	,			
	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	<b>A</b> 1		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
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 <i>Part VI</i> .	3a		
b		Ja		
	of its supported organizations? If "Yes " describe in party, the role played by the organization in this regard	3h		

	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. See instructions. All					
	other Type III non-functionally integrated supporting organizations must co	mplete	Sections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income(subtract lines 5, 6 and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discountclaimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount.Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional		ated Type III supporting ord	anization (see		
	instructions).	. 3		,		

Schedule A (Form 990 or 990-EZ) 2014

	dule A (Form 990 or 990-EZ) 2014 METROPOLITAN			Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	Э	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	:	(i)	(ii)	(iii)
Sacti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
Jecu	on E - Distribution Anocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.  Also complete this part for any additional information. (See instructions).					

#### 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.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Employer identification number

# METROPOLITAN LIGHTHOUSE CHARTER SCHOOL Organization type (check one):

organization type (check one).						
Filers of	:	Section:				
Form 99	0 or 990-EZ	X 501(c)( 3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
		covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \ \rightarrow \ \cdot \cdot \cdot \cdot \cdot \ \cdot \cdot \ \cdot \ \cdot \ \cdot \ \cdot \cd						
but it mu	taution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), ut 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 ertify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization Employer identification number

## METROPOLITAN LIGHTHOUSE CHARTER SCHOOL

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STATE EDUCATION DEPARTMENT - UNIV. NY PASS THROUGH OF FEDERAL AWARDS ALBANY, NY 12234	\$8	Person X Payroll
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP + 4  CHANCELLOR OF THE BOARD OF ED - NYC  52 CHAMBER STREET  NEW YORK, NY 10007	\$ 28,213.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	rumo, uuur 000, unu En TT	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140.	Mairie, audiess, and ZIF + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

## METROPOLITAN LIGHTHOUSE CHARTER SCHOOL

i ait ii	(See instructions). Ose duplicate copies of Fart in	additional space is necded.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	SCHOOL TEXTBOOKS	-	
		\$ 28,213.	07/01/14
(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
		-	
		-   \$	

	POLITAN LIGHTHOUSE CHAR  Exclusively religious, charitable, etc., cont the year from any one contributor. Complete to	ributions to organizations described i	in section 501(c)(7), (8), or (10) that total more than \$1,000 ring line entry. For organizations		
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. once.)		
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I					
		(e) Transfer of gift			
L	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
) No.		<u> </u>			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of gift			
		(c) Transier or gire			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	.,,,	(,, -	(, ,		
			<u> </u>		
		(e) Transfer of gift			
_	Transferee's name, address, a	( )			
-	Transferee's name, address, a	( )	Relationship of transferor to transferee		
-	Transferee's name, address, a	( )			
- No.	Transferee's name, address, a	( )			
a) No. From	Transferee's name, address, a	( )			
a) No. from Part I		nd ZIP + 4	Relationship of transferor to transferee		
a) No. from Part I		nd ZIP + 4	Relationship of transferor to transferee		
a) No. from Part I		(c) Use of gift	(d) Description of how gift is held		
a) No. from Part I		nd ZIP + 4	(d) Description of how gift is held		
a) No. from Part I		(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held		

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

METROPOLITAN LIGHTHOUSE CHARTER SCHOOL

**Employer identification number** 

Pai	t I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 v		ed funds
_	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor o		
Pai			
1	Purpose(s) of conservation easements held by the organization	·	· · · · · · · · · · · · · · · · · · ·
	Preservation of land for public use (e.g., recreation or e	`	rically important land area
	Protection of natural habitat	Preservation of a certif	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			2.
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel		
	year▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	ring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements during t	he year <b>&gt;</b> \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes the	ne organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtheran	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items:		
	(i) Revenue included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treatments		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

Temporarily restricted endowment

The percentages in 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

Yes No bv: (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

#### Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to 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>b</b> Buildings				
c Leasehold improvements				
<b>d</b> Equipment		367,039.		367,039.
e Other		18,500,000.	605,527.	17,894,473.
Total. Add lines 1a through 1e. (Column (d) must equa	18,261,512.			

Schedule D (Form 990) 2014

Part VII Investments - Other Securities.			J
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	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"  (a) Description of investment	(b) Book value	ne 11c. See Form 990, Part X, line 13.  (c) Method of valuation: Cost or	and of year market value
	(b) Book value	(c) Method of Valuation. Cost of	end-or-year market value
<u>(1)</u>			
(2)			
(3)			
(4)		<del> </del>	
(5)		+	
<u>(6)</u>			
(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"	to Form 990. Part IV. li	ne 11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)	<u> </u>		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		<b>&gt;</b>
Part X Other Liabilities.			
Complete if the organization answered "Yes"	to Form 990, Part IV, li	ne 11e or 11f. See Form 990, Part X, line	e 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) CAPITAL LEASES		18,038,583.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.) ▶	18,038,583.	

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 X

Sche	edule D (Form 990) 2014 METROPOLITAN LIGHTHOUSE	CHARLER SCHOOL		Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stat	ements With Reven	ue per Return	
	Complete if the organization answered "Yes" to Form 990, Part IV, line	12a.		
1	Total revenue, gains, and other support per audited financial statements		1	5,873,256
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			5,873,256
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5,873,256
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expe	nses per Retu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line	12a.		
1	Total expenses and losses per audited financial statements		1	4,905,534
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	4,905,534
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.

#### Part XIII Supplemental Information.

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

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:

FIN 48 DISCLOSURE - THE ORGANIZATION ADOPTED THE PROVISIONS OF FASB INTERPRETATION NO. 48 ("FIN 48"), ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN INTERPRETATION OF FASB STATEMENT NO. 109" NOW INCORPORATED IN ASC 740, WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISION FOR UNCERTAIN TAX PROVISIONS AND RECOGNIZING ANY INTEREST AND PENALTIES. THE ADOPTION OF FIN 48 DID NOT HAVE A MATERIAL EFFECT ON THE ORGANIZATION'S FINANCIAL POSITION AS OF JULY 1, 2014 OR THE RESULTS OF OPERATIONS AND CASH FLOWS FOR THE YEAR ENDED JUNE 30, 2015. AS OF JUNE 30, 2015, THE ORGANIZATION HAS DETERMINED THAT NO TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS ARE NEEDED.

4,905,534

Schedule D	(Form 990) 2014	METROPOLITAN	LIGHTHOUSE	CHARTER	SCHOOL	Page <b>5</b>
Part XIII	Supplemental Ir	METROPOLITAN  formation (continued)				i age c
		,				

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Schools**

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

### METROPOLITAN LIGHTHOUSE CHARTER SCHOOL

			YES	N
	organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	erning instrument, or in a resolution of its governing body?	1	X	
	organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	s, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
Has the o	rganization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
=	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.			
If you nee	d more space, use Part II CHOOL RECRUITS BY WORD OF MOUTH IN THE COMMUNITY AND	3	X	
	GH THE DISTRIBUTION OF FLYERS IN THE NEIGHBORHOOD, WHICH			
INCLU	DES THE RACIALLY NONDISCRIMINATORY POLICY.			
	organization maintain the following?		77	
	ndicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
	documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	
	all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	ns, programs, and scholarships?	4c	X	
	all material used by the organization or on its behalf to solicit contributions?	4d	X	
	organization discriminate by race in any way with respect to:			Ļ
	rights or privileges?	5a		2
<b>b</b> Admission	ns policies?	5b		2
	ent of faculty or administrative staff?	5c		2
	nips or other financial assistance?	5d		2
	nal policies?	5e		2
	cilities?	5f		2
	rograms?	5g		2
If you ans	racurricular activities? wered "Yes" to any of the above, please explain. If you need more space, use Part II.	5h		
			-	
	organization receive any financial aid or assistance from a governmental agency?	6a	X	_
	rganization's right to such aid ever been revoked or suspended?	6b		2
•	wered "Yes" to either line 6a or line 6b, explain on Part II.			
	announced to a country that it has a country of country that has a country to be a country of a country of the form of the country of the cou			
	organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of . 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	Х	

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

Schedule E (Form 990 or 990-EZ) (2014)

Page  Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.	<u>2</u>
<b>Part II</b> 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:	
FEDERAL AND NEW YORK STATE GOVERNMENT GRANTS ARE RECEIVED TO ENHANCE	
TEACHERS' SKILLS AND IMPROVE TECHNOLOGY.	

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

**Compensation Information** 

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

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

Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. **Employer identification number** 

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

METROPOLITAN LIGHTHOUSE CHARTER SCHOOL

Pa	art I Questions Regarding Compensation						
	<del></del>		Yes	No			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,						
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel Housing allowance or residence for personal use						
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees						
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)						
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or						
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2					
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to						
	establish compensation of the CEO/Executive Director, but explain in Part III.						
	Compensation committee Written employment contract						
	Independent compensation consultant Compensation survey or study						
	X Form 990 of other organizations X Approval by the board or compensation committee						
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a related organization:			7.7			
	Receive a severance payment or change-of-control payment?	4a		X			
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X			
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х			
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the revenues of:	_		v			
	The organization?	5a		X			
b	Any related organization?	5b					
_	If "Yes" to line 5a or 5b, describe in Part III.						
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the net earnings of:			v			
	The organization?	6a		X			
b	Any related organization?	6b		_^			
_	If "Yes" to line 6a or 6b, describe in Part III.						
1	7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments						
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X			
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х			
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		$\vdash$			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in						
	Regulations section 53.4958-6(c)?	9		1			

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

Schedule J (Form 990) 2014

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred benefits		(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
(1) COURTNEY RUSSELL	(i)	136,420.	0.	0.	5,536.	9,431.	151,387.	0.
PRINCIPAL	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							ļ
	(i)							
	(ii) (i)							<del> </del>
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	(ii)							
	(i)							
	(ii)							
	(i)							ļ
	(ii)							

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

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

**Noncash Contributions** 

OMB No. 1545-0047

**Open To Public** Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

	METROPOLITAN	LIGHT	HOUSE CHA	RTER SCHOOL					
Pai	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribut amounts reported Form 990, Part VIII, lii	on	(d) Method of de noncash contribu		_	:s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications	X		28,21	3. FM	J			
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other • ()								
26	Other								
27	Other ( )								
28	Other ( )								
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for o	contributions					
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29	)				
								Yes	No
30a	During the year, did the organization receive b	y contribution	on any property rep	oorted in Part I, lines 1	through 28	3, that it			
	must hold for at least three years from the dat	e of the initia	al contribution, and	d which is not required	to be used	l for			
	exempt purposes for the entire holding period	?					30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance	policy that re	equires the review	of any non-standard of	ontribution	s?	31		Х
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell no	ncash				
	contributions?						32a		Х
b	If "Yes," describe in Part II.								
33	If the organization did not report an amount in	column (c) 1	for a type of prope	rty for which column (a	a) is checke	ed,			
	describe in Part II.								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2014)

Schedule M	(Form 990) (2014) METROPOLITAN LIGHTHOUSE CHARTER SCHOOL Pag	je <b>2</b>
Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.	

#### 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.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

**Employer identification number** 

METROPOLITAN LIGHTHOUSE CHARTER SCHOOL

FORM 990, PART VI, SECTION A, LINE 3:

THE SCHOOL REQUIRES ALL BOARD MEMBERS TO FORMALLY DISCLOSE IN WRITING ANY CONFLICT OF INTEREST MATTERS. BOARD MEMBERS SUBMIT UPDATES TO THE CONFLICT OF INTEREST DECLARATION ON AN ANNUAL BASIS.

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

THE FORM 990 IS REVIEWED BY THE CONTROLLER OF LIGHTHOUSE ACADEMIES, INC AND WITH HER APPROVAL IS FORWARDED TO THE SCHOOL'S FINANCE COMMITTEE AND IS THEN REVIEWED BY THE FULL BOARD PRIOR TO FILING.

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

THE EXECUTIVE DIRECTOR REVIEWS THE SIGNED CONFLICT OF INTEREST STATEMENTS ON AN ANNUAL BASIS OR MORE OFTEN AS DEEMED NECESSARY.

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

DETERMINING THE COMPENSATION OF THE ORGANIZATION'S EXECUTIVE DIRECTOR INCLUDED REVIEW, DELIBERATION AND APPROVAL OF THE BOARD OF DIRECTORS, WITH COMPARISIONS TO OTHER NON-PROFIT ORGANIZATIONS.

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

THE FINANCIAL STATEMENTS, EMPLOYEE HANDBOOK, FINANCIAL POLICIES AND PROCEDURES GUIDE, METROPOLITAN LIGHTHOUSE CHARTER SCHOOL MANUAL AND OTHER POLICIES (INVESTMENT, CONFLICT OF INTEREST, ETC.) ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

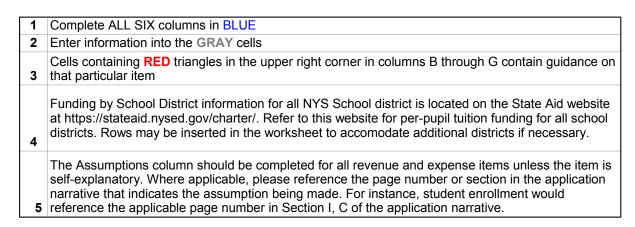
Name of the organization  METROPOLITAN LIGHTHOUSE CHARTER SCHOOL	Employer identification number
METROPOLITAN LIGHTHOUSE CHARTER SCHOOL INC.FINANCIAL STAT	EMENTS WERE
AUDITED BY MARKS PANETH LLP. THE ORGANIZATION'S AUDIT CO	MMITTEE
ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS	FINANCIAL
STATEMENTS AND SELECTION OF AN INDEPENDENT AUDITOR.	

# New York State Education Department

Request for Proposals to Establish Charter Schools Authorized by the Board of Regents

## 2015-16 Budget & Cash Flow Template

#### General Instructions and Notes for New Application Budgets and Cash Flows Templates



### Metropolitan Lighthouse Charter School

		ED BUDGET F	OR 2016-2017					Assumptions
								DESCRIPTION OF ASSUMPTIONS - Please note assumptions when applicate
Please Note: The student en		I, 2016 to June		row 155. This wi	Il nonulato the data in	row 10		DESCRIPTION OF ASSUMPTIONS - Flease note assumptions when applicat
	Total Revenue Total Expenses Net Income al Student Enrollment	REGULAR EDUCATION 7,258,693 4,571,983 2,686,710 428	SPECIAL EDUCATION 448,797 408,844 39,953 31	OTHER	FUNDRAISING	MANAGEMENT & GENERAL 30,010 2,601,765 (2,571,755)	TOTAL 7,737,500 7,582,592 154,908	
Total Pa	id Student Enrollment	-	-				-	
		Р	ROGRAM SERVICES		SUPPORT	SERVICES		
		REGULAR EDUCATION	SPECIAL EDUCATION	OTHER	FUNDRAISING	MANAGEMENT & GENERAL	TOTAL	
REVENUE REVENUES FROM STATE SOURCES Per Pupil Revenue	CY Per Pupil Rate							
District of Location School District 2 (Enter Name)	\$14,027.00	6,433,343	-	-		-	6,433,343	
School District 3 (Enter Name)		-	-	-	-	-	-	
School District 4 (Enter Name) School District 5 (Enter Name)		-	-	-	-	-	-	
		6,433,343					6,433,343	
Special Education Revenue		-	416,961				416,961	
Grants		-	410,901	-	-	-	410,901	
Stimulus		-	-	-	-	-	-	
Other Other State Revenue		437,643	-	-	-	-	437.643	Rent support revenue
TOTAL REVENUE FROM STATE SOURCES		6,870,986	416,961				7,287,947	
REVENUE FROM FEDERAL FUNDING IDEA Special Needs		-	31,836	-		-	31,836	
Title I Title Funding - Other		316,039 39,455	-	-			316,039 39,455	
School Food Service (Free Lunch) Grants		-	-	-			-	
Charter School Program (CSP) Planning & Implementation Other		-	-	-		-	-	
Other Federal Revenue		-	-	-	-	-	-	
TOTAL REVENUE FROM FEDERAL SOURCES		355,494	31,836				387,330	
LOCAL and OTHER REVENUE  Contributions and Donations, Fundraising		-	-	-	-	-	-	
Erate Reimbursement Interest Income, Earnings on Investments,		-	-	-		26,010 4,000	4,000	85% of telecomm
NYC-DYCD (Department of Youth and Community Development	i.)	-	-	-		-	-	
Food Service (Income from meals) Text Book		4,000 28,213	-	-		-	4,000 28,213	collected from parents
Other Local Revenue		20,213	-				-	
TOTAL REVENUE FROM LOCAL and OTHER SOURCES		32,213				30,010	62,223	
TOTAL REVENUE		7,258,693	448,797			30,010	7,737,500	
EXPENSES	No. of PostWood							List exact titles and staff FTE"s (Full time eqiuilivalent)
ADMINISTRATIVE STAFF PERSONNEL COSTS  Executive Management	No. of Positions		-	-	_	140,000	140,000	Principal
Instructional Management	2.00	-	-	-	-	197,600	197,600	Directors of Leadership
Deans, Directors & Coordinators CFO / Director of Finance	4.00	-	-	<u>-</u>		248,680	248,680	Directors of College Transitions, Student Services, School Culture and a Fam C
Operation / Business Manager	1.00	-		-		88,400		Business Manager
Administrative Staff	3.00	-	-	-	-	- 1		Manager of Operations, Operations Associates
TOTAL ADMINISTRATIVE STAFF INSTRUCTIONAL PERSONNEL COSTS	11					866,892	866,892	
Teachers - Regular	18.00	1,152,000	-	-	-	-	1,152,000	
Teachers - SPED Substitute Teachers	5.00	20,000	315,564	-		-	315,564 20,000	
Teaching Assistants	9.00	486,000	-	-			486,000	

#### **Metropolitan Lighthouse Charter School**

	·		Charter School					
	PROJECTI	ED BUDGET F	JK 2016-2017					<u>Assumptions</u>
		, 2016 to June						DESCRIPTION OF ASSUMPTIONS - Please note assumptions when applicable
Please Note: The	e student enrollment data is entered b			row 155. This wil	I populate the data in			
		REGULAR EDUCATION	SPECIAL EDUCATION	OTHER	FUNDRAISING	MANAGEMENT & GENERAL	TOTAL	
	Total Revenue	7,258,693	448,797	-	-	30,010	7,737,500	
	Total Expenses	4,571,983	408,844	•	-	2,601,765	7,582,592	
	Net Income	2,686,710	39,953	•	-	(2,571,755)	154,908	
	Actual Student Enrollment Total Paid Student Enrollment	428	31					
	Total Faid Stadent Emolinient						-	
		PI	ROGRAM SERVICES		SUPPORT	SERVICES		
		REGULAR EDUCATION	SPECIAL EDUCATION	OTHER	FUNDRAISING	MANAGEMENT & GENERAL	TOTAL	
Specialty Teachers	8.00	516,242	-		-	-	516,242	Specialists and Title I Interventionists
Aides	2.00	61,069	-	-	-	-	61,069	
Therapists & Counselors	1.00	63,000	-	-	-	-		Counselor
Other	1.00	110,983	-		-	-		includes paraprofessional, teacher stipends, afterschool and summer school
TOTAL INSTRUCTIONAL	44	2,409,294	315,564				2,724,858	
NON-INSTRUCTIONAL PERSONNEL COSTS								
Nurse	-	-	-	-	-	-	-	
Librarian	-	-	-	-	-	-	-	
Custodian	-	-	-	-	-	-	-	
Security Other	-	-	-	-	-	15,000	15,000	IT staff shared with another school
TOTAL NON-INSTRUCTIONAL						15,000	15,000	11 Stall Shared with allother School
SUBTOTAL PERSONNEL SERVICE COSTS	55	2,409,294	315,564			881,892	3,606,750	
PAYROLL TAXES AND BENEFITS								
Payroll Taxes		212,904	27,886	-	-	77,931	318,720	
Fringe / Employee Benefits		428,310	56,099	-	-		641,186	
Retirement / Pension		70,968	9,295	-	-		106,240	
TOTAL PAYROLL TAXES AND BENEFITS		712,181	93,280			260,685	1,066,146	
TOTAL PERSONNEL SERVICE COSTS		3,121,475	408,844			1,142,577	4,672,896	
CONTRACTED SERVICES								
Accounting / Audit		-	-	-		17,000	17,000	
Legal		-	-	-	-	4,000	4,000	040 (
Management Company Fee Nurse Services		-		-	-	337,694	337,694	CMO fee and travel
Food Service / School Lunch		-	-	<u>-</u>		-		
Payroll Services		-	-	-	-	18,999	18,999	
Special Ed Services		-	-	-	-	-	=	
Titlement Services (i.e. Title I)		15,802	-	-	-	-	15,802	
Other Purchased / Professional / Consulting		15,000 30,802	-	-	-	37,000 414,693	52,000 445,495	computer support, translations, supplemental tutoring
TOTAL CONTRACTED SERVICES		30,802				414,693	445,495	
SCHOOL OPERATIONS								
Board Expenses		70,000	-	-	-	-	70,000	
Classroom / Teaching Supplies & Materials Special Ed Supplies & Materials		70,000	-	-	-	-	70,000	
Textbooks / Workbooks		82,500	-		-	-	82,500	
Supplies & Materials other		-	-	-	-	-	-	
Equipment / Furniture		-	-	-	-	-	-	
Telephone		27,540	-	-	-	3,060	30,600	
Technology		07.057	-	-	-	-	07.057	
Student Testing & Assessment Field Trips		27,857 7,000	-	-	-	-	27,857 7,000	
Transportation (student)		56,000	-	-		-	56,000	
Student Services - other		-	-	-		-	-	
Office Expense		-	-	-	-	73,150		copy, print, postage, supplies
Staff Development		27,500	-	-	-	-	27,500	
Staff Recruitment		65,000	-	-	-	-		Staff and Teacher Recruiting fees
Student Recruitment / Marketing		2,500	-	-	-		2,500	
School Meals / Lunch		7,500	-	-	-	2,000	7,500 2,000	
Travel (Staff) Fundraising		-	-	-		2,000	2,000	
i dildidising								

#### **Metropolitan Lighthouse Charter School**

PROJECT	ED BUDGET F	OR 2016-2017					<u>Assumptions</u>
July <sup>1</sup>	DESCRIPTION OF ASSUMPTIONS - Please note assumptions when applications						
Please Note: The student enrollment data is entered to	elow in the Enrollme	nt Section beginning	in row 155. This wil	populate the data in	n row 10.		
	REGULAR EDUCATION	SPECIAL EDUCATION	OTHER	FUNDRAISING	MANAGEMENT & GENERAL	TOTAL	
Total Revenue	7,258,693	448,797		-	30,010	7,737,500	
Total Expenses	4,571,983	408,844	•	-	2,601,765	7,582,592	
Net Income	2,686,710	39,953	•	-	(2,571,755)	154,908	
Actual Student Enrollment	428	31				-	
Total Paid Student Enrollment	-	-				-	
	F	PROGRAM SERVICES		SUPPORT	SERVICES		
	REGULAR EDUCATION	SPECIAL EDUCATION	OTHER	FUNDRAISING	MANAGEMENT & GENERAL	TOTAL	
Other	19,000	-		-	30,500	49,500	bank charges, staff parking, staff appreciation, dues, misc
TOTAL SCHOOL OPERATIONS	392,397				108,710	501,107	
FACILITY OPERATION & MAINTENANCE							
Insurance	-	-	-	-	50,000	50,000	
Janitorial	-	-	-	-	226,620	226,620	
Building and Land Rent / Lease	1,027,309	-	-	-	114,145	1,141,454	
Repairs & Maintenance	-	-	-	-		65,000	
Equipment / Furniture	-	-	-	-		196,853	
Security	-	-	-	-	4,500	4,500	
Utilities	-	-	-	-	150,000	150,000	
TOTAL FACILITY OPERATION & MAINTENANCE	1,027,309				807,118	1,834,427	
DEPRECIATION & AMORTIZATION	-	-	-	-	-	_	
DISSOLUTION ESCROW & RESERVES / CONTIGENCY	-	-	-	-	128,667	128,667	
TOTAL EXPENSES	4,571,983	408,844			2,601,765	7,582,592	
NET INCOME	2,686,710	39,953	-	-	(2,571,755)	154,908	
ENROLLMENT - "School Districts Are Linked To Above Entries"	REGULAR	SPECIAL	TOTAL				
	EDUCATION	EDUCATION	ENROLLED				
District of Location	428	31	459				
School District 2 (Enter Name)			-				
School District 3 (Enter Name)							
School District 4 (Enter Name) School District 5 (Enter Name)							
TOTAL ENROLLMENT	428	31	459				
			455	1			
REVENUE PER PUPIL	16,960	14,477	-	I			
EXPENSES PER PUPIL	10,682	13,189		1			<u> </u>

Tr	ustee Name:
	Tim Bryan
	ame of Charter School Education Corporation (for an unmerged school, this is e Charter School Name):
	Metropolitan Lighthouse Charter School
1.	List all positions held on the education corporation board (e.g., president, treasurer, parent representative).
_	Trustee
2.	Is the trustee an employee of any school operated by the Education Corporation? Yes _xNo
	If <b>Yes</b> , for each school, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.
3.	Is the trustee an employee or agent of the management company or institutional partner of the charter school(s) governed by the Education Corporation?
	Yes <u>X</u> No
	If <b>Yes</b> , for each school, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.
1.	Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members or any persons who live with you in your house have held or engaged in with the charter school(s) governed by the Education Corporation during the time you have served on the board, and in the six-month period prior to such service. If there has been no such financial interest or transaction, write <b>None</b> . Please note that if you answered <b>Yes</b> to Questions 2-4 above, you need not disclose again your employment status, salary, etc.
Г	late(s) Nature of Financial Stone taken to avoid Name of nevern

Date(s)	Nature of Financial Interest/Transaction	Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)	Name of person holding interest or engaging in transaction and relationship to yourself
---------	---	--	---

Please writ	e "None" if applicat	ple. Do not leave th	is space blank.
None			

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
Please None	e write "No	ne" if applica	ble. Do not leave this s <sub>k</sub>	ace blank.

Clan Bulh	July 16, 2016
Signature //	Date

Please note that this document is considered a public record and as such, may be made available to members of the public upon request under the Freedom of Information Law. Personal contact information provided below will be redacted.

<b>Business Telephone</b>	
Business Address: _	
E-mail Address:	
Home Telephone:	
Home Address:	

Tr	ustee Name: Genai Goldsmith
	Ame of Charter School Education Corporation (for an unmerged school, this is e Charter School Name):  1 etropolitan Lighthouse Charter School
1.	List all positions held on the education corporation board (e.g., president, treasurer, parent representative). Parent Representative
2.	Is the trustee an employee of any school operated by the Education Corporation?  YesNo
3.	If Yes, for each school, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.  at Date 8/15/15° 42,000°, Parent Coordinator facilitator for facilitator for farent to partner of the charter school(s) governed by the Education Corporation?  Yes X No  Concerns.
	If <b>Yes</b> , for each school, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.
4.	Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members or any persons who live with you in your house have held or engaged in with the charter school(s) governed by the Education

4.	identify each interestrualisaction (and provide the requested information) that you or
	any of your immediate family members or any persons who live with you in your
	house have held or engaged in with the charter school(s) governed by the Education
	Corporation during the time you have served on the board, and in the six-month
	period prior to such service. If there has been no such financial interest or
	transaction, write None. Please note that if you answered Yes to Questions 2-4
	above, you need not disclose again your employment status, salary, etc.

Date(s)	Nature of Financial Interest/Transaction	Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)	Name of person holding interest or engaging in transaction and relationship to yourself
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. Please writ	e "None" if applica	able. Do not leave th	is, space blank.
None	None	None	Vone

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
	None	, , ,	ble. Do not leave this sp None	None

Finaire Signature Date

Please note that this document is considered a public record and as such, may be made available to members of the public upon request under the Freedom of Information Law. Personal contact information provided below will be redested.

Business Teleph			
Business Addre			
E-mail Address:			
Home Telephone			
Home Address:			

Trustee Name:				
Anne Lava	way			
Name of Charter School I the Charter School Name		poration (for an unmer	ged school, this is	
Met LCS			***************************************	
List all positions held o parent representative).	n the education	, ' -	., president, treasurer,	
2. Is the trustee an emplo	oyee of any so	chool operated by the Ed	ducation Corporation?	
If <b>Yes</b> , for each school, responsibilities, your sa	please provide lary and your s	a description of the posi tart date.	tion(s) you hold, your	
3. Is the trustee an employantner of the charter soYesNo		of the management cored by the Education Core		
If Yes, for each school, responsibilities, your sal	please provide ary and your s	a description of the positart date.	tion(s) you hold, your	
4. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members or any persons who live with you in your house have held or engaged in with the charter school(s) governed by the Education Corporation during the time you have served on the board, and in the six-month period prior to such service. If there has been no such financial interest or transaction, write None. Please note that if you answered Yes to Questions 2-4 above, you need not disclose again your employment status, salary, etc.				
	of Financial Transaction	Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)	Name of person holding interest or engaging in transaction and relationship to yourself	

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
Please M C	write "Noi	ne" if applica	ble. Do not leave this sp	ace blank.

Ahm	Jan	7/21/16	
Signature		Date <sup>f</sup>	

Please note that this document is considered a public record and as such, may be made available to members of the public upon request under the Freedom of Information Law. Personal contact information provided below will be redacted.

<b>Business Telephon</b>	<b>-</b>	
Business Address:		
E-mail Address:		
Home Telephone:		<del>~~~</del>
Home Address:		

		, 1		
Tr	ustee Name:	0.00		g in the state of
	Catherine C	orrigan		
	all Some Law	Remarks of the rest of		
	ime of Charte e Charter Sch	r School Education Cor ool Name):	poration (for an unmero	ged school, this is
	Metropolitar	1 Lighthouse Charter Scho	ool	Superior
	- Br., etgl II.J.		as a constant	
1.	List all position	ons held on the education entative).	n corporation board (e.g.	, president, treasurer,
	erroles I forto	trustee, treas	surer	na di Roma.
2.	Is the trustee	an employee of any sc _No	hool operated by the Ed	ducation Corporation?
		ch school, please provide es, your salary and your s		tion(s) you hold, your
3.		e an employee or agent charter school(s) govern No		
		ch school, please provide s, your salary and your st		tion(s) you hold, your
4.	any of your in house have have have have have have have hav	interest/transaction (and mmediate family membe eld or engaged in with the during the time you have to such service. If the vrite <b>None</b> . Please note eed not disclose again you	ers or any persons who e charter school(s) gover served on the board, re has been no such that if you answered Y	live with you in your med by the Education and in the six-month financial interest or <b>'es</b> to Questions 2-4
	Date(s)	Nature of Financial Interest/Transaction	Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)	Name of person holding interest or engaging in transaction and relationship to yourself

				• • •		•	
Please write	"None"	if applica	ple. Do	not leave	this	space	blank.
	None	•					

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
Please	e write "No	ne" if applica	ble. Do not leave this sp	ace blank.
	· .	None		
	. •			

N - - - Dog Assign

· Catherine Macornigan	July 12, 2016	
Signature	Date	
. Please note that this document is considered a public members of the public upon request under the Freedo. provided below will be redacted.	record and as such, may be made available to m of Information Law. Personal contact inform	ation
Business Telephone: _		
Business Address:	<u>.                                     </u>	
E-mail Address:		·
Home Telephone:		
Home Address:		

Trustee Name:			
Aryana	e Ferranti		
1			
Name of Charte the Charter Sci	er School Education Cor nool Name):	poration (for an unmer	ged school, this is
Metropol	litan Lighthon	use Charter	r School
List all positi parent repre-	ons held on the educatio sentative).	n corporation board (e.g.	., president, treasurer,
Finance	+ Education	Committee Men	ber
2. Is the trustedYes	e an employee of any so <b>No</b>	chool operated by the Ed	ducation Corporation?
	ch school, please provide es, your salary and your s		tion(s) you hold, your
	e an employee or agent e charter school(s) govern No		
	ch school, please provide es, your salary and your s		tion(s) you hold, your
any of your house have house have house house house house hours of transaction, we have any of the house hours of the house hours of the house hours of the house hours of the hours of the hours of the house house house house house house house house house hours of the house hours house house house house house house hours house hours hours house hours hour	interest/transaction (and immediate family member neld or engaged in with the during the time you have to such service. If the write <b>None</b> . Please note need not disclose again you	ers or any persons who e charter school(s) gover e served on the board, are has been no such that if you answered Y	live with you in your rned by the Education and in the six-month financial interest or es to Questions 2-4
Date(s)	Nature of Financial Interest/Transaction	Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)	Name of person holding interest or engaging in transaction and relationship to yourself

. Please writ	e "None" if applica	ole. Do not leave th	is space blank.
Nove	Nac	Nhe	Nine

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
Please	e write "No	ne" if applica	ble. Do not leave this sp	ace blank.
Nme	None	por	Nove	None

Signature Date

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Business Telephone

Business Add

E-mail Addres

Home Telepho

Home Address

T	rustee Name:	Janice	Cee						
th	Name of Charter School Education Corporation (for an unmerged school, this is the Charter School Name):  Metropolitan Lighthouse Charter School								
1.	List all positi parent repres	ons held on the educatio sentative).		., president, treasurer,					
2.	Yes <u>//</u> If Yes, for ea	an employee of any some No  Ch school, please provide es, your salary and your s	e a description of the posi						
3.	3. Is the trustee an employee or agent of the management company or institutional partner of the charter school(s) governed by the Education Corporation? YesNo  If Yes, for each school, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.								
4. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members or any persons who live with you in your house have held or engaged in with the charter school(s) governed by the Education Corporation during the time you have served on the board, and in the six-month period prior to such service. If there has been no such financial interest or transaction, write None. Please note that if you answered Yes to Questions 2-4 above, you need not disclose again your employment status, salary, etc.									
1	Date(s)	Nature of Financial Interest/Transaction	Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)	Name of person holding interest or engaging in transaction and relationship to yourself					

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
Please	e write "No	ie" if applica	ble. Do not leave this s	ace blank.

	7/12/16
Signature	Date

Please note that this document is considered a public record and as such, may be made available to members of the public upon request under the Freedom of Information Law. Personal contact information provided below will be redacted.

Business Telephone:		
Business Address:		
E-mail Address:		
Home Telephone:		
Home Address:		

Tr	ustee Name:			
	Clessic	a Haben		
			Name very distribution	
	ame of Charte e Charter Sch	er School Education Cor nool Name):	poration (for an unmer	ged school, this is
1	Metropol	itan Lightha	use Charter	r School
1.	List all position	ons held on the education sentative).		., president, treasurer,
2.	Is the trustee	e an employee of any so	chool operated by the E	ducation Corporation?
		ch school, please provide es, your salary and your s		ition(s) you hold, your
3.	Is the trustee partner of theYes	e an employee or agent charter school(s) govern _No	of the management co ed by the Education Cor	mpany or institutional poration?
		ch school, please provide es, your salary and your s		tion(s) you hold, your
4.	any of your i house have h Corporation of period prior transaction, v	interest/transaction (and mmediate family membereld or engaged in with the during the time you have to such service. If the vrite <b>None</b> . Please note the deed not disclose again you	ers or any persons who e charter school(s) gove e served on the board, ere has been no such that if you answered \	live with you in your rned by the Education and in the six-month financial interest or /es to Questions 2-4
	Date(s)	Nature of Financial Interest/Transaction	Steps taken to avoid	Name of person
		meresurransaction	a conflict of interest, (e.g., did not vote, did not participate in discussion)	holding interest or engaging in transaction and relationship to
				yourself

Please write "None" if applicable. Do not leave this space blank.

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
Please	e write "Noi	ne" if applica	ble. Do not leave this sp	ace blank.

Signature 7/13/16
Date

Please note that this document is considered a public record and as such, may be made available to members of the public upon request under the Freedom of Information Law. Personal contact information provided below will be

Business Teleph
Business Addres
E-mail Address:
Home Telephone
Home Address:

Trustee Name:						
Jillian Roland						
Name of Charter School Education Cothe Charter School Name):		- ,				
Metropolitan Lightha	use Charter	r School				
<b>)</b>						
1. List all positions held on the education parent representative).	n corporation board (e.g.	., president, treasurer,				
2. Is the trustee an employee of any soYes _X_No	chool operated by the Ed	ducation Corporation?				
If <b>Yes</b> , for each school, please provide responsibilities, your salary and your s		tion(s) you hold, your				
<ol> <li>Is the trustee an employee or agent partner of the charter school(s) govern</li> <li>Yes  No</li> </ol>	of the management con ned by the Education Corp	mpany or institutional poration?				
If <b>Yes</b> , for each school, please provide responsibilities, your salary and your s		tion(s) you hold, your				
4. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members or any persons who live with you in your house have held or engaged in with the charter school(s) governed by the Education Corporation during the time you have served on the board, and in the six-month period prior to such service. If there has been no such financial interest or transaction, write None. Please note that if you answered Yes to Questions 2-4 above, you need not disclose again your employment status, salary, etc.						
Date(s) Nature of Financial Interest/Transaction	Steps taken to avoid a conflict of interest,	Name of person holding interest or				
interest transaction	(e.g., did not vote, did not participate in discussion)	engaging in transaction and relationship to				
		yourself				

None

5. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, franchise holding company, joint stock company, business or real estate trust, non-profit organization, or other organization or group of people doing business with the school(s) governed by the Education Corporation and in which such entity, during the time of your tenure as a trustee, you and/or your immediate family member(s) or person(s) living in your house had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the school(s) that is/are doing business with the school(s) through a management or services agreement, please identify only the name of the organization, your position in the organization, and the relationship between such organization and the school(s). If there was no financial interest, write None.

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps Taken to Avoid Conflict of Interest
Please	e write "No	ne" if applica	ble. Do not leave this sp	ace blank.
	Λ'	one		
				· ·

5	7/12/16
Signature	Date

Please note that this document is considered a public record and as such, may be made available to members of the public upon request under the Freedom of Information Law. Personal contact information provided below will be redacted.

Business Telephone:	n/a
Business Addre	
E-mail Address:	
Home Telephon	
Home Address:	



# **Entry 9 BOT Table**

Created: 07/21/2016 Last updated: 07/25/2016

# Page 1

## 1. Current Board Member Information

	Trustee Name	Email Address	Position on the Board	Committee Affiliations	Voting Member? (Y/N)	Area of Expertise, and/or Additional Role at School (parent, staff member, etc.)	Number of Terms Served and Length of Each (Include election date and term expiration)
1	Anne Laraway		Chair/Boar d President		Yes		Member since 09/11/2014
2	Janice Lee		Trustee/Me mber	Academic	Yes		Member since 06/01/2013
3	Jessica Haber		Secretary		Yes		Member since 08/01/2011
4	Tim Bryan		Trustee/Me mber	Financial	Yes		Member since 08/11/2014
5	Genai Goldsmith		Parent Representa tive		Yes		Member since 10/14/2014
6	Catherine M. Corrigan		Trustee/Me mber	Financial	Yes		Member since 01/07/2016
7	Aryanne Feranti		Trustee/Me mber	Education	Yes		Member since 03/03/2016
8	Jillian		Trustee/Me	Education	Yes		Member since

	Roland		mber				02/04/2016
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
2. Total No	umber of N	1embers o	n June 30,	2015			
3. Total No	umber of N	1embers Jo	ining the	Board 201	5-16 Schoo	l Year	
4. Total Number of Members Departing the Board during the 2015-16 School Year							
5. Number of Voting Members 2015-16, as set by the by-laws, resolution or minutes							
7	7						

6. Number of Board Meetings Conducted in the 2015-16 School Year

12

# 7. Number of Board Meetings Scheduled for the 2016-17 School Year

12

Thank you.

## http://www.lighthouse-academies.org/schools/metropolitan/#docs

Document Archive

**Board of Trustees** 

2015-2016

## MetLCS Annual Report Enrollment and Retention Efforts

In 2015-16, Metropolitan Lighthouse Charter School made a good faith effort to attract and retain a greater enrollment of scholars with disabilities, English Language Learners, and scholars who are eligible applicants for the free and reduced price lunch program. The following list summarizes the actions taken.

### **Scholars with Special Needs**

• Outreach to specialized feeder schools and programs

### **English Language Learners**

- Direct mail advertising in languages other than English
- Other advertising (e.g. radio, TV, flyer) in languages other than English
- Outreach by multi-lingual staff
- Outreach to immigrant community/ies
- Outreach to specialized feeder schools and programs
- Advertising and school materials are translated as needed

### **Scholars Eligible for Free and Reduced Lunch Programs**

- Meal program was covered at school open house, on application and during tours
- Support is offered to assist families in completing all necessary paperwork to
- Ensure eligible scholars participate in the lunch program
- Recruitment occurred throughout neighborhoods surrounding the school and in the local district

## Going forward in 2016-17, the school plans to utilize additional measures.

- All school brochures, mailings and application will mention that the school accommodates scholars with disabilities, English language learners and participates in the free and reduced lunch program
- A Google language translator dropdown will be maintained to the school website
- School information session(s) will be held in trusted cultural centers in the
- community to attract more families who speak a language other than English
- Advertising materials will be distributed in the primary languages other than English spoken in the area
- With notice, translators will be made available for families at school events, such as Parent Teacher Conferences



# **Entry 12 Teacher and Administrator Attrition**

Created: 07/18/2016 Last updated: 07/29/2016

Report changes in teacher and administrator staffing.

# Page 1

## Instructions for completing the Teacher and Administrator Attrition Tables

The following tables reflect formatting in the online portal required for Regents authorized charter schools. Schools should provide, for teachers and administrators only, the full time equivalent (FTE) of staff on June 30, 2015; the FTE for added staff from July 1, 2015 through June 30, 2016; and the FTE for any departed staff from July 1, 2015 through June 30, 2016 using the two tables provided.

### 2015-16 Teacher Attrition Table

FTE Teachers on June 30, 2015	FTE Teachers Departed 7/1/15 - 6/30/16	FTE Teachers Filling Vacant Positions 7/1/15 - 6/30/16	FTE Teachers Added in New Positions 7/1/15-6/30/16	FTE of Teachers on June 30, 2016
20	17	17	16	21

#### 2015-16 Administrator Position Attrition Table

FTE Administrative Positions on June 30, 2015	FTE Administrators Departed 7/1/15 - 6/30/16	FTE Administrators Filling Vacant Positions 7/1/15 - 6/30/16	FTE Administrators Added in New Positions 7/1/15-6/30/16	FTE Administrative Positions on June 30, 2016
12	1	1	1	12

## Thank you



# **Entry 13 Uncertified Teachers**

Created: 07/25/2016 Last updated: 07/29/2016

## Page 1

The table below is reflective of the information collected through the online portal for compliance with New York State Education Law 2854(3)(a-1) for teaching staff qualifications. Enter the relevant full time equivalent (FTE) count of teachers in each column. For example, a school with 20 full time teachers and 5 half time teachers would have an FTE count of 22.5. If more than one column applies to a particular teacher, please select one column for the FTE count.

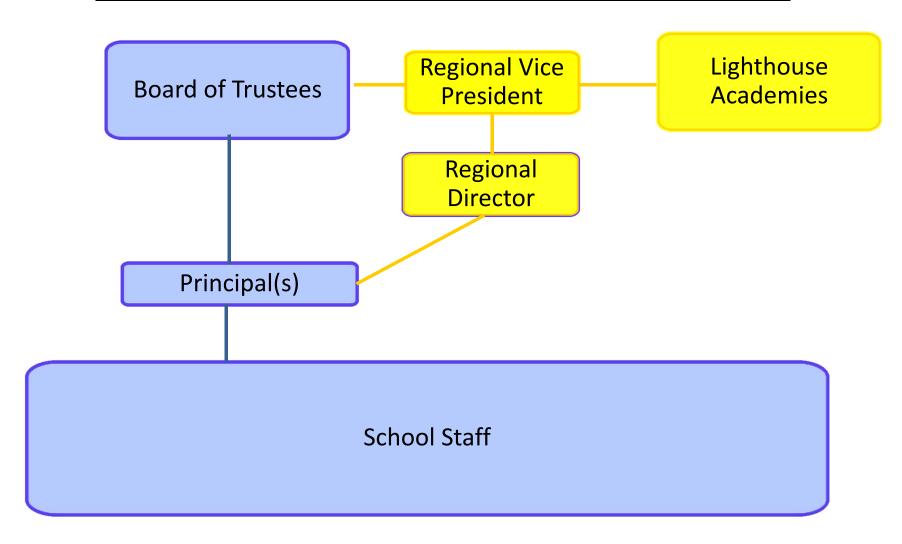
## Staff Qualifications (June 30, 2016)

Note: Columns should sum to the FTE count of Teachers on June 30, 2016, and each teacher should be in only one column.

1. Total FTE Count of Uncertified Teachers (6-30-16)	6
2. FTE count of uncertified teacher with at least three years of elementary, middle or secondary classroom teaching experience (6-30-16)	1
3. FTE count of uncertified teachers who are tenured or tenure track college faculty (6-30-16)	0
4. FTE count of uncertified teachers with two years of Teach for America experience (6-30-16)	2
5. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (6-30-16)	0
6. FTE count of uncertified teachers who do not fit into any of the prior four categories (6-30-16)	0

### Thank you.

# **BLCS & MetLCS Organizational Structure**



## 2016 - 2017 MetLCS Calendar Updated 8.17.16

		Jι	ıly 20	16			
Su	М	Tu	W	Th	F	Sa	
					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 2016						
Su	М	Tu	w	Th	F	Sa	

# July

4 Independence day 11 to 28 Summer SHINE (Mon - Thurs)

August 2016						
Su	М	Tu	W	Th	F	Sa
	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

8 to 26 Professional Development Institute

24 Met Welcome Night (5:00 - 7:00pm)

29 First Day of School

29 Early Dismissal for K (1:00 p.m.)

30 Early Dismissal for K (1:00 p.m.)

31 Early Dismissal begins for all scholars (1:00 p.m.)

September 2016						
Su	М	Tu	W	Th	F	Sa
				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	

#### September

5 Labor Day - MetLCS is closed

12 Eid al-Adha - MetLCS is closed

October 2016							
Su	М	Tu	W	Th	F	Sa	
						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						

#### October

5 to 6 Quarter 1 PTCs (1:00 Dismissal Weds and Thurs)

10 Columbus Day - MetLCS is closed

	November 2016							
Su	М	Tu	W	Th	F	Sa		
		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					

#### November

4 Quarter 1 Ends

8 Election Day - No School for Scholars

11 Veterans Day - MetLCS is closed

24 to 25 Thanksgiving - MetLCS is closed

December 2016						
Su	M	Tu	W	Th	F	Sa
				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

#### December

14 to 15 Quarter 2 PTCs (1:00 Dismissal Weds and Thurs)

23 Winter Break Early Dismissal (1:00 Dismissal)

26 to 30 Winter Break (No School for Scholars)

January 2017						
Su	М	Tu	W	Th	F	Sa
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 2017

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15 16

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Su

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27 28

#### January

2 Winter Break (No School for Scholars)

3 Staff and Scholars Return

16 Martin Luther King Jr. Day - MetLCS is closed

27 Quarter 2 Ends

#### **February**

Sa

3 4

10 11

**17** 18

20 to 24 Winter Break (No School for Scholars)

		Ma	rch 2	017		
Su	М	Tu	W	Th	F	Sa
			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	

#### March

1 to 2 Quarter 3 PTCs (1:00 Dismissal Weds and Thurs)

13	20	21		23	27	23		
26	27	28	29	30	31			
	April 2017							
Su	M	Tu	W	Th	F	Sa		
						1		
2	3	4	5	6	7	8		
9	10	11	12	13	14	15		

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May 2017

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June 2017

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**23** 24

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**17** 18

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#### April

7 Quarter 3 Ends

10 to14 Spring Break (No School for Scholars)

17 PD Day (No School for Scholars)

May

17 to 18 Quarter 4 PTCs (1:00 Dismissal Weds and Thurs)

29 Memorial Day - MetLCS is closed

23 Quarter 4 Ends

26 Eid el-Fitr - MetLCS is closed

28 Last Day of School (Family Fun Day 9 - 1, Dismissa