Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047 Inspection

<u>A F</u>	or the	2016 calendar year, or tax year beginning $$ JUL $1,$ 2016 and er	nding J	<u>UN 30, 2017</u>	
B c	Check if pplicable:	LAUNCH EXPEDITIONARY LEARNING		D Employer identifie	cation number
L	_change _Name	CHARTER SCHOOL			
L	change	Doing business as		442373	
	return Final return/	Number and street (or P.0. box if mail is not delivered to street address) 1580 DEAN STREET	E Telephone number (718)604-6910	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	5,968,103.
	Amende return	BROOKLIN, NI 11213		H(a) Is this a group re	
	Applica-	F Name and address of principal officer: GEOFFREY ROEHM		for subordinates	? Yes X No
	pending	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		mpt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)
		E ► WWW.LAUNCHSCHOOL.ORG		H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Year o	of formation: 2010 $ m N$	A State of legal domicile: NY
Pa		Summary	~		
Ð	1 E	Briefly describe the organization's mission or most significant activities: THE SO	CHOOL	IS BUILT OF	N TEN
Activities & Governance	-	DESIGN PRINCIPLES THAT REFLECT THE EDUCATI			
ern	1	Check this box if the organization discontinued its operations or disposed		1	
Š	1			3	<u>8</u>
<u>«</u>		lumber of independent voting members of the governing body (Part VI, line 1b)			<u>8</u> 77
ies		otal number of individuals employed in calendar year 2016 (Part V, line 2a)			9
Ĭ		otal number of volunteers (estimate if necessary)			0.
Aci		otal unrelated business revenue from Part VIII, column (C), line 12			0.
	DI	let unrelated business taxable income from Form 990-T, line 34			
ne		Contributions and grants (Port VIII, line 1b)		Prior Year 299,990.	Current Year 305,823.
		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		5,264,890.	5,661,281.
Revenue		Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,077.	999.
Re	1	Other revenue (Part VIII, column (A), lines 5, 4, and 7d)		0.	0.
	l	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,565,957.	5,968,103.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	45 0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,368,089.	4,201,921.
ses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b T	otal fundraising expenses (Part IX, column (D), line 25)	1.		
ŭ	17 C	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,264,536.	1,380,219.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,632,625.	5,582,140.
	19 F	Revenue less expenses. Subtract line 18 from line 12		-66,668.	385,963.
Net Assets or			Beg	ginning of Current Year	End of Year
sets	20 T	otal assets (Part X, line 16)		2,672,175.	3,052,702.
L Ass	21 T	otal liabilities (Part X, line 26)		348,713.	351,036.
<u>E</u>	22 \	let assets or fund balances. Subtract line 21 from line 20		2,323,462.	2,701,666.
	art II	Signature Block			
		ies of perjury, I declare that I have examined this return, including accompanying schedules a			knowledge and belief, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of whic	ch preparer l	has any knowledge.	
		Signature of officer		 Date	
Sigi		,	DDTMT		
Her	e	GEOFFREY ROEHM, EXECUTIVE DIRECTOR AND Type or print name and title	PKINI	CIPAL	
			ΙD	Date Check	T PTIN
Daid		Print/Type preparer's name SARRETT M. HIGGINS GARRETT M. HIGGIN	1	5/15/18 of self-employ	
Paid		Firm's name PKF O'CONNOR DAVIES, LLP	מיי	Firm's EIN	27-1728945
-		Firm's address 665 FIFTH AVENUE		FIIIII S EIIV	2, 1/20/40
-556	Jy	NEW YORK, NY 10022		Phone no 21	2-286-2600
Mav	the IR			Trilone no. 22	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	X
1	Briefly describe the organization's mission:	
	LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL (THE "SCHOOL") IS BUILT	
	ON TEN DESIGN PRINCIPLES THAT REFLECT THE EDUCATIONAL VALUES AND	
	BELIEFS OF NEW YORK CITY OUTWARD BOUND. THESE PRINCIPLES ALSO REFLECT	r
	THE DESIGN'S CONNECTION TO OTHER RELATED THINKING ABOUT TEACHING,	
2	Did the organization undertake any significant program services during the year which were not listed on the	
		X No
	If "Yes," describe these new services on Schedule O.	
3	·	X No
3	· / / · · · · · · · · · · · · · · · · ·	_2 <u>1</u> NO
_	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, an	d
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$5, 103, 476. including grants of \$) (Revenue \$5, 661, 500)	
	EXPENSES DIRECTLY ASSOCIATED WITH THE OPERATIONS OF THE CHARTER SCHOOL	<u>) L</u>
	AND THE RELATED CURRICULUM COSTS. FOR THE 2016-2017 SCHOOL YEAR, WE	
	SERVED APPROXIMATELY 302 STUDENTS IN SIXTH THROUGH EIGHTH GRADES.	
4b	(Code:) (Expenses \$)
_		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
	Other program conjects (Decaribe in Schedule O.)	
4d	Other program services (Describe in Schedule O.)	
_	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ► 5,103,476.	00 /27
	Form 9	90 (2016)

LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Form 990 (2016) CHARTER SCHO
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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	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? <i>If</i> "Yes," <i>complete</i>			
	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, VII, 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		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	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		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		Х

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LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Form 990 (2016)

Part IV Checklist of Required Schedules (continued)

			Yes	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			,,
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No", go to line 25a	24a		<u> </u>
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	040		
a	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		_
2 3a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	250		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."			
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			\ _{3,7}
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			, v
•	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			_V
25-	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
		35a		<u> </u>
D	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" appropriate School to B. Part V. Vino 3	35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		\vdash
55		36		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		<u></u>
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
			000	

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LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Form 990 (2016)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	le gaming			
	(gambling) winnings to prize winners?			1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	77			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		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)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	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 Advanced in the Financi	ccount	s (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	$\vdash \vdash \vdash$	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b	$\vdash \vdash \vdash$	<u> </u>
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	$\vdash \vdash \vdash$	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization solicit			٦,
	any contributions that were not tax deductible as charitable contributions?			6a	$\vdash \vdash \vdash$	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions and express statement that such contributions are such as the such contribution and express statement that such contributions are such as the such as			۵.		
_	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).	:				Х
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a 7b	\vdash	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		irod	76	\vdash	
C	to file Form 8282?	is requ	illed	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	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:					
	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:	ı				
	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				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	ı	, 	12a		
	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.			40-		
а	•			13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.					
D	Enter the amount of reserves the organization is required to maintain by the states in which the	13b				
^	organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13b				
	Did the organization receive any payments for indoor tanning services during the tax year?	100	ı	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule			14b		
		,			990	(2016)
						/

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	3						
	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	3						
2								
	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	X					
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.)							
	(mile doctor) Division and a section of the first terms of the first t		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	Х					
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	Х					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х					
	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	Х					
14	Did the organization have a written document retention and destruction policy?	14	Х					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Х					
	Other officers or key employees of the organization	15b	Х					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		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)	available						
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website Another's website X Upon request Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d financ	ial					
	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:							
	GEOFFREY ROEHM - (718)604-6910							
	1580 DEAN STREET, BROOKLYN, NY 11213							

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per	box	not c , unle:	Pos heck ss per	more rson i	than o	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	lnstitutional trustee	Officer	Key employee	Highest compensated subject on pensated subject subjec		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JONATHAN HARBER	4.00	.,		,,					0	
CHAIRMAN	4 00	Х		Х				0.	0.	0.
(2) JONATHAN LATIMER	4.00	37		37					0	_
VICE CHAIR (3) GRACE LEE	4 00	Х		Х				0.	0.	0.
TREASURER	4.00	Х		х				0.	0.	0.
(4) DARRYL HAZELWOOD	4.00								•	
SECRETARY		Х		х				0.	0.	0.
(5) NICOLE LEMEROND	4.00							-	-	
TRUSTEE		Х						0.	0.	0.
(6) DAN GINSBURG	4.00									
TRUSTEE (THROUGH 6/1/2017)		Х						0.	0.	0.
(7) NICOLAS LIRETTE	4.00									
TRUSTEE		Х						0.	0.	0.
(8) ANTHONY CONELLI	4.00									
TRUSTEE (THROUGH 12/31/2017)		Х						0.	0.	0.
(9) ROSS MCINTYRE	4.00									
TRUSTEE		Х						0.	0.	0.
(10) GEOFFREY ROEHM - EXEC. DIR	40.00									
PRINCIPAL THROUGH 6/30/2017				X				121,536.	0.	15,480.
(11) RACHEL ROCKER	35.00								_	
DIRECTOR OF FINANCE				X				81,813.	0.	15,467.
(12) EVAN KILGORE	40.00									
ASSISTANT PRINCIPAL	 			Х				124,925.	0.	527.
(13) EFRAT KUSSELL	40.00	ļ						115 050		6 550
ASSISTANT PRINCIPAL	40.00		_	Х		_		115,969.	0.	6,753.
(14) CAMILLE AVENA	40.00							00 505		
DIRECTOR OF OPERATIONS	40.00			Х				92,727.	0.	6,462.
(15) ALEXIS RUBIN	40.00	l		\ \ \				01 545	^	15 427
DIRECTOR OF OUTREACH				Х				91,547.	0.	15,437.
		I		I	l		l			Form 990 (2016)

CHARTER SCHOOL 45-2442373 Page 8 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (E) (F) Position Average Reportable Name and title Reportable **Estimated** (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations ndividual trustee or director the compensation hours for organization (W-2/1099-MISC) from the Highest compensated related (W-2/1099-MISC) nstitutional trustee organization organizations and related below organizations line) 628,517. 1b Sub-total 0. 0. c Total from continuation sheets to Part VII, Section A 628,517. 0. 60.126. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on 3 Х line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Description of services Name and business address Compensation NONE

Form 990 (2016)

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

\$100,000 of compensation from the organization

Part VIII Statement of Revenue

		Check if Schedule O contains a resp	onse or note to any	/ line in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
လ လ	1 a	Federated campaigns	1a				J.2 J.1
ant			1b				
2 8		· · · · · · · · · · · · · · · · · · ·	1c				
ifts ir A			1d				
nik G			1e 275,768	3.			
Sig		All other contributions, gifts, grants, and	·				
outi her			ıf 30,05!	5.			
	а	Noncash contributions included in lines 1a-1f: \$	<u> </u>				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		305,823.			
			Business Co				
ø	2 a	GOV'T PER-PUPIL REV.	61160	5,661,281.	5,661,281.		
Program Service Revenue	b						
Ser	С						
am	d						
Be	е						
Pre	f	All other program service revenue					
	g	Total. Add lines 2a-2f		▶ 5,661,281.			
	3	Investment income (including dividends	, interest, and				
		other similar amounts)		▶ 999.			999.
	4	Income from investment of tax-exempt by	oond proceeds				
	5	Royalties		>			
		(i) Re	eal (ii) Persona	<u>al</u>			
	6 a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)		>			
	7 a	Gross amount from sales of (i) Secu	rities (ii) Other				
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)]	>			
Φ	8 a	Gross income from fundraising events (not				
nue		including \$ of					
Other Reven		contributions reported on line 1c). See					
무		Part IV, line 18	a	_			
Ě		Less: direct expenses					
٦		Net income or (loss) from fundraising ev		>			
	9 a	Gross income from gaming activities. Se					
		Part IV, line 19					
		Less: direct expenses					
		Net income or (loss) from gaming activit	ies	>			
	10 a	Gross sales of inventory, less returns					
		and allowances					
		Less: cost of goods sold					
}	С	Net income or (loss) from sales of invent		<u> </u>			
}		Miscellaneous Revenue	Business Co	ode			
	11 a						+
	b						+
	С						
		All other revenue					
		Total. Add lines 11a-11d Total revenue. See instructions.		5 060 102	5 661 201	0	. 999.
l	12	iotal revenue. See instructions.		▶ ₽,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D,001,401.	U	• 333•

LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Form 990 (2016)

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons	e or note to any line in t	(B)	(C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22 Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	701,324.	652,461.	47,611.	1,252
	Compensation not included above, to disqualified	-	-		-
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	2,789,700.	2,595,336.	189,383.	4,981
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	11,385.	10,588.	777. 24,398.	20 628
9	Other employee benefits	364,254.	339,228.		628
0	Payroll taxes	335,258.	311,810.	22,847.	601
	Fees for services (non-employees):				
а	Management	77,839.		77,839.	
b	Legal	13,953.		13,953.	
С	Accounting	22,250.		22,250.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	293,782.	252,079.	41,618.	85 s
	Advertising and promotion	5,429.	5,129.	295.	
	Office expenses	101,667.	96,831.	4,751.	85
	Information technology	89,459.	86,430.	2,982.	47
	Royalties				
	Occupancy				
	Travel				
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates	294,086.	277 021	15 067	200
	Depreciation, depletion, and amortization	30,141.	277,831. 28,702.	15,967.	288 28
	Insurance	30,141.	20,702.	1,411.	20
	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
	CLASSROOM SUPPLIES	254,829.	254,829.		
	STUDENT SERVICES	114,247.	114,247.		
	RECRUITMENT	82,537.	77,975.	4,481.	81
d		,	,	-/	32
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	5,582,140.	5,103,476.	470,563.	8,101
	Joint costs. Complete this line only if the organization	, ,		,	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2016)

Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or not	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			446,907.	1	814,637
	2	Savings and temporary cash investments			1,203,409.	2	1,204,930
	3	Pledges and grants receivable, net			137,934.	3	235,148
	4	Accounts receivable, net		4	-		
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
	Ū	section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instr).		· ·		6	
Assets	7	Notes and loans receivable, net				7	
Ass	8					8	
	9	Inventories for sale or use			48,686.	9	127,032
		1 1	 I I	·····	40,000	9	127,032
	iva	Land, buildings, and equipment: cost or other	100	1 /38 536			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	842 844	760,013.	10c	595,692
		Less: accumulated depreciation	100	042,044.	700,013.		393,092
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets	75 226	14	75 262		
	15	Other assets. See Part IV, line 11			75,226.	15	75,263 3,052,702
	16	Total assets. Add lines 1 through 15 (must equ			2,672,175.	16	3,054,704
	17	Accounts payable and accrued expenses			322,275.	17	330,839
	18	Grants payable			26 420	18	20 107
	19	Deferred revenue			26,438.	19	20,197
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to current and former					
≝∣		key employees, highest compensated employee	es, and o	disqualified persons.			
Liabilities						22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24).	Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			348,713.	26	351,036
		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🔼 and			
Se		complete lines 27 through 29, and lines 33 an					
ŭ	27	Unrestricted net assets			2,323,462.	27	2,701,666
3ala	28	Temporarily restricted net assets				28	
틸	29			L		29	
בַ		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶☐☐			
٥		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
SSI	31	Paid-in or capital surplus, or land, building, or ed	quipmen	t fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, c	or other funds		32	
ž	33	Total net assets or fund balances			2,323,462.	33	2,701,666
	34	Total liabilities and net assets/fund balances .			2,672,175.	34	3,052,702

Form **990** (2016)

Form **990** (2016)

Pa	TEXT RECONCILIATION OF NET ASSETS				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,96		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,58		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>5,9</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,32	3,4	<u>62.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	_	7,7	<u>59.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,70	1,6	66.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	an audite annulain who in Cabadula O and describe any stone tolerate undersa and prodite		ماد ا		1

632012 11-11-16

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

Name of the organization

LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Employer identification number 45-2442373

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

<u> </u>	ction A. Public Support						
	ndar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	include any "unusual grants.")	ļ					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
	the organization without charge	ļ					
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,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support		Г	1		1	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10	ete (eee inetwestis	<u> </u>			40	
	Gross receipts from related activities, First five years. If the Form 990 is for			d fourth or fifth to		12 501(a)(2)	
13	•	J	, ,	, ,	,	(/(/	ightharpoonup
Sec	organization, check this box and store ction C. Computation of Publi	c Support Per	centage	•••••			
	Public support percentage for 2016 (I			column (f))		14	%
	Public support percentage from 2015	, ,,	•	***		15	
	33 1/3% support test - 2016. If the o						
	stop here. The organization qualifies						. □
b	33 1/3% support test - 2015. If the o		-				
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation		,	>
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"				=		
b	10% -facts-and-circumstances test						
	more, and if the organization meets th	ū				•	
	organization meets the "facts-and-circ						>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	
					<u> </u>	adula A /Farm 000	000 ==\ 0040

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

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

Section A. Public Support	ow, piease com	piete Part II.)				
alendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
alendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6	(4) 2012	(6) 2010	(6) 2014	(4) 2013	(6) 2010	(i) Total
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
· · · · · · · · · · · · · · · · · · ·						+
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for t	he organization'	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ration,
check this box and stop here						<u></u>
Section C. Computation of Public					T T	
5 Public support percentage for 2016 (lin			olumn (f))		15	9/
Public support percentage from 2015 S					16	9/
Section D. Computation of Invest			40 / /*		14-1	
Investment income percentage for 201					17	9
Investment income percentage from 20					18	9
19a 33 1/3% support tests - 2016. If the o						. —
more than 33 1/3%, check this box and b 33 1/3% support tests - 2015. If the c	=	-				
line 18 is not more than 33 1/3%, check	k this box and	stop here. The org	anization qualifies	as a publicly supp	orted organization	· > 🗀
20 Private foundation. If the organization	did not check a	box on line 14 19	a or 19b, check th	nis box and see ins	structions	

632023 09-21-16

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
_		
4c		
-		
5a		
- Eh		
5b 5c		
30		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		<u> </u>

Par	t IV Supporting Organizations _(continued)			
			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)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с		11c		
Sect	tion B. Type I Supporting Organizations			
	_		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization.	2		
Seci	tion C. Type II Supporting Organizations		1	
			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	1		
Sect	the supported organization(s). tion D. All Type III Supporting Organizations	<u> </u>		
	non Divini Typo in Supporting Significations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the 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 instruct	ions).		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	That it look do it like the control of the control	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	20		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u		За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	Nov. 20, 1970 (explain in F	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must c	omplete Sec	tions A through E.	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by .035	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

Par	t V	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D -	Distributions		,	Current Year
1	Amou	ints paid to supported organizations to accomplish exer	mpt purposes		
2	Amou	ints paid to perform activity that directly furthers exemp	t purposes of supported		
	organ	izations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	s of supported organizations	 S	
4	Amou	ints paid to acquire exempt-use assets			
5		fied set-aside amounts (prior IRS approval required)			
6		distributions (describe in Part VI). See instructions			
		annual distributions. Add lines 1 through 6			
8		outions to attentive supported organizations to which th			
		de details in Part VI). See instructions			
9		outable amount for 2016 from Section C, line 6			
		B amount divided by Line 9 amount			
	LITIO	amount divided by Eine 6 amount	(i)	(ii)	(iii)
			Excess Distributions	Underdistributions	Distributable
Secti	on E -	Distribution Allocations (see instructions)	Excess Distributions	Pre-2016	Amount for 2016
1	Dietrik	outable amount for 2016 from Section C, line 6			
		rdistributions, if any, for years prior to 2016 (reason-			
2		cause required- explain in Part VI). See instructions			
3		s distributions carryover, if any, to 2016:			
	LACES	ss distributions carryover, if any, to 2010.			
<u>a</u> b					
	From	2013			
	From				
	From				
		of lines 3a through e			
		ed to underdistributions of prior years			
		ed to 2016 distributable amount			
<u> </u>		over from 2011 not applied (see instructions)			
		inder. Subtract lines 3g, 3h, and 3i from 3f.			
4		outions for 2016 from Section D,			
	line 7:	·			
а	Applie	ed to underdistributions of prior years			
		ed to 2016 distributable amount			
		inder. Subtract lines 4a and 4b from 4			
5		ining underdistributions for years prior to 2016, if			
	any. S	Subtract lines 3g and 4a from line 2. For result greater			
		zero, explain in Part VI. See instructions			
6	Rema	ining underdistributions for 2016. Subtract lines 3h			
	and 4	b from line 1. For result greater than zero, explain in			
	Part \	/I. See instructions			
7	Exces	ss distributions carryover to 2017. Add lines 3j			
	and 4	С			
8	Break	down of line 7:			
а					
b	Exces	ss from 2013			
С	Exces	ss from 2014			
		ss from 2015			
		ss from 2016			

Schedule A (Form 990 or 990-EZ) 2016

LAUNCH EXPEDITIONARY LEARNING

Schedule A	(Form 990 or 990-EZ) 2016 CHARTER SCHOOL	45-2442373 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17: Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Pasection D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any add	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,
	(See instructions.)	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Employer identification number 45-2442373

Schedule D (Form 990) 2016

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) Donor advised funds	(b) Furius and other accounts
1 2	Total number at end of year		
3	Aggregate value of grants from (during year) 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 w	l writing that the assets held in donor advis	sed funds
·	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor ac		
•	for charitable purposes and not for the benefit of the donor or		
Pai			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired at	fter 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing cons	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conserva	tion easements during the year
_	\$		6 M O (7 M)
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	•	· · · · · · · · · · · · · · · · · · ·
	include, if applicable, the text of the footnote to the organizati	ion's financial statements that describes	the organization's accounting for
Par	conservation easements. † III Organizations Maintaining Collections of	Art Historical Treasures or Of	ther Similar Assets
	Complete if the organization answered "Yes" on Form		and difficult / 1000tol
12	If the organization elected, as permitted under SFAS 116 (ASC		ment and halance sheet works of art
Iu	historical treasures, or other similar assets held for public exhi	,,	•
	the text of the footnote to its financial statements that describ		ince of public service, provide, in rain Am,
h	If the organization elected, as permitted under SFAS 116 (ASC		t and halance sheet works of art historical
D	treasures, or other similar assets held for public exhibition, ed	•	
	relating to these items:	acation, or resourer in farther aree or pa	bile service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
			. .
2	If the organization received or held works of art, historical trea		al gain, provide
_	the following amounts required to be reported under SFAS 11		J, p. 0.1.00
а	Revenue included on Form 990, Part VIII, line 1	- ·	> \$
	Assets included in Form 990, Part X		

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

	t III Organizations Maintaining Co		t. Histor	ical Tre	asures o	r Other			<u> </u>	
_									,	
3	Using the organization's acquisition, accession	n, and other record	s, cneck a	ny of the i	rollowing that	are a sig	nificant us	se of its c	ollection it	ems
	(check all that apply):									
а	Public exhibition	C			hange progra					
b	Scholarly research	е	e L Ot	:her						
С	Preservation for future generations									
4	Provide a description of the organization's coll	ections and explair	n how they	further th	ne organizatio	on's exem	pt purpos	e in Part	XIII.	
5	During the year, did the organization solicit or	receive donations of	of art, histo	orical treas	sures, or othe	er similar a	assets		_	
	to be sold to raise funds rather than to be main								Yes	No
Pai	t IV Escrow and Custodial Arrang		ete if the o	rganizatio	n answered	"Yes" on	Form 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodial	n or other intermed	iary for co	ntribution	s or other as	sets not ir	ncluded			
	on Form 990, Part X?							\square	Yes	No
b	If "Yes," explain the arrangement in Part XIII ar									
									Amount	
С	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on For								Yes	No
	If "Yes," explain the arrangement in Part XIII. C						•		_	
Par										
	Gemplete ii	(a) Current year	(b) Prid		(c) Two yea	I .		aare hack	(e) Four y	eare hack
10	Beginning of year balance	•	(6)1110	or year	(C) TWO you	13 back	a miles y	bars back	(C) rour y	cars back
_										
b	Contributions					+				
	Net investment earnings, gains, and losses					+				
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs					+				
f										
g	End of year balance									
2	Provide the estimated percentage of the curre	nt year end balance	e (line 1g, d	column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c should	d equal 100%.								
За	Are there endowment funds not in the possess	sion of the organiza	ation that a	re held ar	nd administer	red for the	organiza	tion	_	
	by:								\	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as requir	ed on Sch	edule R?					3b	
4	Describe in Part XIII the intended uses of the o									
Par	t VI Land, Buildings, and Equipme	ent.								
	Complete if the organization answered	"Yes" on Form 990), Part IV, I	ine 11a. S	See Form 990	, Part X, I	ine 10.			
	Description of property	(a) Cost or o			or other		cumulate	d	(d) Book	value
		basis (investr			(other)		reciation			
1a	Land	<u> </u>								
	Buildings									
	Leasehold improvements			69	1,039.	3	62,88	32.	328	,157.
	Equipment				1,010.		50,17			,838.
	Other				6,487.	1	29,79	00.		,697 .
	. Add lines 1a through 1e. (Column (d) must ea		V 001:							,692.
· otal	. , .a.a iii loo Ta ti ii ougit To. [Colullill (a) [[iust ea	uai i Uiiii 990. Pält	A. COIUITIN	ו וווווניםו. וכוו	UU./					, -, -, -,

Schedule D (Form 990) 2016

	DITIONARY LEA	ARNING	4.5	0440050	
Schedule D (Form 990) 2016 CHARTER SCH	100L		45	-2442373	Page
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes"					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end	l-of-year market va	alue
(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.	1				
Complete if the organization answered "Yes"	on Form 000 Part IV line	110 Soo Form 900 I	Part V line 13		
(a) Description of investment	(b) Book value		aluation: Cost or end	I-of-vear market v	alue
	(b) Book value	(e) meaned or v	<u> </u>	Toryour market vi	
<u>(1)</u>					
(2)					
(3)					
(5)					
(6)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990,	Part X, line 15.		
(a)	Description			(b) Book va	lue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990. Part X. col. (B) lin	<u>e 15.) </u>		>		
Complete if the organization answered "Yes"	on Form 990 Part IV line	e 11e or 11f See Form	990. Part X. line 25.		
1 (a) Description of liability	5 5 555, 1 41.17, 1110	(b) Book value	. 555, 1 4177, 1116 20.		
i. (a) Bosonphon or hability		(2) Book value			

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

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

Schedule D (Form 990) 2016

Sche	dule D (Form 990) 2016 CHARTER SCHOOL			2442373 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stat	ements With Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	5,968,103.
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			
С	Recoveries of prior year grants			
d				
	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		. —	5,968,103.
4	Amounts included on Form 990. Part VIII. line 12. but not on line 1:			, , , , , , , , , , , , , , , , , , ,
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	0.
			· —	
Par	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expenses pe	er Returr	<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line			
_				5,589,899.
1	Total expenses and losses per audited financial statements		1	3,309,099.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
b	Prior year adjustments			
С	Other losses		-	
d	Other (Describe in Part XIII.)	_		7 750
е	Add lines 2a through 2d			7,759. 5,582,140.
3	Subtract line 2e from line 1		3	5,582,140.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	, , , , , , , , , , , , , , , , , , , ,			
b	Other (Describe in Part XIII.)	4b		_
С	Add lines 4a and 4b		4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	_)	5	5,582,140.
Pai	rt XIII Supplemental Information.			
Provi	de 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, li	ne 4; Part X	X, line 2; Part XI,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional information.		
PAF	RT X, LINE 2:			
ГHЕ	E THE SCHOOL RECOGNIZES THE EFFECT OF IN	COME TAX POSITION	S ONL	IF THOSE
POS	SITIONS ARE MORE LIKELY THAN NOT TO BE S	SUSTAINED. MANAGEM	ENT HA	AS
DET	TERMINED THAT THE SCHOOL HAD NO UNCERTAI	N TAX POSITIONS T	HAT WO	OULD
				-
REC	QUIRE FINANCIAL STATEMENT RECOGNITION OR	DISCLOSURE, THE	SCHOOL	TS NO
	SOLUE LIMMOLINE BILLEMENT MEGOGITLION OF	DIDCEOCCION III	<u> </u>	1 10 10
.∩N	NGER SUBJECT TO EXAMINATIONS BY THE APPL	TCARIE TAXING TIIR	TSDTCT	TONG FOR
	NGER DODOECT TO EXAMINATIONS BY THE ATTE	TICADDE TAXING OUN	TODICI	TOND FOR
757	ARS PRIOR TO JUNE 30, 2014.			
LLF	WAS LUTON TO DOME ON' 7014.			
- v	OM VII IING OD OMIGD AD THOMASHOO			
PAF	RT XII, LINE 2D - OTHER ADJUSTMENTS:			
	76 ON DEGROOM OF 165-5			B 550
սՕՏ	SS ON DISPOSAL OF ASSETS			7,759.

Schedule D (Form 990) 2016

LAUNCH EXPEDITIONARY LEARNING

Schedule D (Form 990) 2016	CHARTER SCHOOL	45-2442373	Page 5
Schedule D (Form 990) 2016 Part XIII Supplemental Inform	ation (continued)		
	(Serial Good)		

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Employer identification number 45-2442373

_		444	5 / 5	
Pa	rt I		VEC	NO
_			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	١.,	х	
_	other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,	1	^	
2		2	Х	
2	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?			
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.			
		3		х
	If you need more space, use Part II AS A PUBLIC SCHOOL SUBJECT TO OPEN ENROLLMENT, THE CARTER	3		- 23
	SCHOOL IS NOT SUBJECT TO SPECIFIC GUIDELINES SET FORTH IN			
	REV. PROC. 75-50.			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		X
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	4A) THE SCHOOL MAINTAINS RACIAL COMPOSITION OF STUDENT BODY			
	NOT OF FACULTY AND ADMINISTRATIVE STAFF.			
	4B) THE SCHOOL IS A FREE PUBLIC SCHOOL AND DOES NOT AWARD			
	SCHOLARSHIPS OR FINANCIAL ASSISTANCE.			
5	Does the organization discriminate by race in any way with respect to:			
	Students' rights or privileges?	5a		X
	Admissions policies?	5b		X
	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	5d		X
	Educational policies?	5e		X
		5f		X
	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
62	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6b		Х
b	If you answered "Yes" on either line 6a or line 6b, explain on Part II.	OD		
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of			
′		7	Х	
	Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II		22	l

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

Schedule E (Form 990 or 990-EZ) 2016

LAUNCH EXPEDITIONARY LEARNING

Schedule E (Form 990 or 990-EZ) 2016 CHARTER SCHOOL	45-2442373 Page 2
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6	6b, and 7, as applicable.
Also provide any other additional information.	
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:	
THE SCHOOL RECEIVES PER-PUPIL FUNDING FROM THE NYC BOAR	D OF EDUCATION
UNDER THEIR CHARTER AGREEMENT. THE SCHOOL ALSO RECEIVES	VARIOUS FEDERAL,
STATE, AND CITY FUNDS INCLUDING FEDERAL ENTITLEMENTS TO	ASSIST WITH
COVERING THE COST OF CERTAIN PROGRAMS.	

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.

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

2016
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Employer identification number 45-2442373

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: NEW YORK CITY OUTWARD BOUND AND EXPEDITIONARY LEARNING. PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: FORM 990, AND THE CULTURE OF SCHOOLS. THE DESIGN PRINCIPLES ARE: LEARNING, PRIMACY OF SELF-DISCOVERY; HAVING WONDERFUL IDEAS; RESPONSIBILITY FOR LEARNING; EMPATHY AND CARING; SUCCESS AND FAILURE; COLLABORATION AND COMPETITION; DIVERSITY AND INCLUSION; NATURAL WORLD; SOLITUDE AND REFLECTION; AND SERVICE AND COMPASSION. FORM 990, PART VI, SECTION A, LINE 4: THE GOVERNING DOCUMENTS WERE CHANGED IN DECEMBER 2016. THE FOLLOWING CHANGES WERE MADE: ADDED LANGUAGE SUBJECTING THE BOARD TO THE PROVISIONS OF THE OPEN MEETING LAW AND THE GENERAL MUNICIPAL LAW OF THE STATE OF NEW YORK. REMOVED A PROVISION ALLOWING THE BOARD THE RAISE MONEY FROM PRIVATE SOURCES BECAUSE THIS IS NO LONGER ALLOWABLE. REMOVED THE EXECUTIVE COMMITTEE AS A STANDING COMMITTEE OF THE BOARD. WE DISCUSSED THIS AT THE OFFSITE. EXECUTIVE COMMITTEES ARE NOT A REQUIREMENT FOR SCHOOL BOARDS BUT IF THEY EXIST, THEY MUST HAVE AT LEAST 5 MEMBERS WHICH WOULD REQUIRE A MAJORITY OF OUR BOARD TO ALSO SIT ON THE EXECUTIVE COMMITTEE.

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

FORM 990 IS REVIEWED BY MANAGEMENT AND THE FINANCE COMMITTEE OF THE BOARD

OF TRUSTEES FOR APPROVAL. IF CHANGES ARE REQUIRED THE SCHOOL WILL THEN

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

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization LAUNCH EXPEDITIONARY LEARNING CHARTER SCHOOL

Employer identification number 45-2442373

FORWARD TO THE AUDITING FIRM AND A FINAL VERSION WILL BE DISTRIBUTED TO ALL BOARD MEMBERS PRIOR TO IRS SUBMISSION.

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

THE SCHOOL SHARES ITS CONFLICT OF INTEREST POLICY WITH BOARD MEMBERS AND
OFFICERS AS PART OF THEIR REGULAR MEETINGS. OFFICERS, DIRECTORS, AND KEY
EMPLOYEES ARE EXPECTED TO DECLARE IF AT ANY POINT A CONFLICT OF INTEREST
ARISES. IF A POTENTIAL CONFLICT WERE TO ARISE, THE INTERESTED PERSON SHALL
LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE
TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE
GOVERNING BOARD'S DECISION AS TO WHETHER A POTENTIAL CONFLICT OF INTEREST
EXISTS IS DOCUMENTED IN THE MINUTES OF THE BOARD.

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

THE PROCESS FOR DETERMINING COMPENSATION OF THE EXECUTIVE DIRECTOR:

- THE PERSONNEL COMMITTEE (PC) REVIEWS PREVIOUSLY DETERMINED GOALS AND METRICS ACHIEVED BY THE EXECUTIVE DIRECTOR
- THE PERSONAL COMMITTEE INTERVIEWS THE EXECUTIVE DIRECTOR
- THE PERSONAL COMMITTEE REVIEWS COMPARATIVE EXECUTIVE DIRECTOR

COMPENSATION DATA FOR THE CHARTER SCHOOL SECTOR

- THE PERSONAL COMMITTEE WRITES A MEMO DETAILING THE WAYS IN WHICH THE

 EXECUTIVE DIRECTOR HAS MET OR NOT MET EXPECTATIONS AND PROVIDES A RATING OF

 NOT MET, MET, OR EXCEEDED EXPECTATIONS
- THE PERSONAL COMMITTEE PRESENTS THE MEMO TO THE FULL BOARD FOR DISCUSSION AND A VOTE
- THE FULL BOARD VOTES ON THE BUDGET, INCLUDING EXECUTIVE DIRECTOR COMPENSATION.

THIS PROCESS WAS LAST COMPLETED IN 2017 FOR THE 2016 SCHOOL YEAR.

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

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

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

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

				Enter file	er's identifying nu	mber	
Type or					Employer identification number (EIN) or		
print	LAUNCH EXPEDITIONARY LEARNI						
ile by the	CHARTER SCHOOL			45-2442373			
due date for iling your eturn. See	fate for Number, street, and room or suite no. If a P.O. box, see instructions. Solution 1580 DEAN STREET				Social security number (SSN)		
nstructions	City, town or post office, state, and ZIP code. For a fo BROOKLYN, NY 11213	reign addr	ress, see instructions.				
Enter the	Return Code for the return that this application is for (file	a separat	e application for each return)			<u> 0 1 </u>	
Applicat	ion	Return	n Application			Return	
s For		Code	Is For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720 (other than individual)			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)			Form 8870			12	
Telepoint If the If this book In I reference for	ooks are in the care of 1580 DEAN STREE hone No. (718)604-6910 organization does not have an office or place of business is for a Group Return, enter the organization's four digit C If it is for part of the group, check this box equest an automatic 6-month extension of time until the organization named above. The extension is for the c calendar year or X tax year beginning JUL 1, 2016	in the Uni Group Exe and atta MAN organizatio	Fax No. ted States, check this box mption Number (GEN) . If the a list with the names and EINs of 7 15, 2018 , to file n's return for: d ending _JUN 30, 2017	f this is for all member the exem	r the whole group, ers the extension i opt organization re	s for.	
2 If t	he tax year entered in line 1 is for less than 12 months, ch Change in accounting period	neck reasc	n: Initial return F	Final retur	n		
3a If t	his application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			_	
<u>no</u>	nrefundable credits. See instructions.			3a	\$	0.	
	his application is for Forms 990-PF, 990-T, 4720, or 6069,					_	
	timated tax payments made. Include any prior year overpa			3b	\$	0.	
	lance due. Subtract line 3b from line 3a. Include your pa	,	, , ,			0	
	using EFTPS (Electronic Federal Tax Payment System). S			3c	\$	0.	

.HA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)

MAIL TO: DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0045

instructions.