# 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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Α	For the	e 2023 calendar year, or tax year beginning  JUL Ⅰ, 2023   and	ل ending	UN 30, 2024	
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addre	FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.			
	Name chang	Doing business as		58-23989	
	Initial return	,	Room/suite	E Telephone numbe	
	Final return termin		300	202-281-	
	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	
	Ameno	WASHINGTON, DC 20001		H(a) Is this a group re	
	Applic tion pendir			for subordinates	
_		SAME AS C ABOVE		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) (insert no.) 4947(	or 527	1	list. See instructions
	Websit	organization: X Corporation Trust Association Other	I Voor	H(c) Group exemption	n number  N State of legal domicile: DC
	art I	Summary	L Year	or formation. 1990 N	M State of legal doffliche. DC
		Briefly describe the organization's mission or most significant activities: TO PI	ROVIDE	A WORLD-CLA	ASS
e	'	EDUCATION FOR STUDENTS IN GRADES PRE-K TO		H HORLD CER	.100
Governance	2	Check this box if the organization discontinued its operations or dispos		than 25% of its net ass	eets
Ver	3	· · · · · · · · · · · · · · · · · · ·	-	3	13
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)			11
Š	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			1299
/itie	6	Total number of volunteers (estimate if necessary)		6	89
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	<u>b</u>	Not consider the street and to state the foreign from Front COOT Death the state		7b	0.
				Prior Year	Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)		24,029,653.	
enn	9	Program service revenue (Part VIII, line 2g)	<u>1</u>		119,969,202.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,228,555.	
	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	2,973,149.	1,303,578.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	46,850,982.	160,153,123.
		Grants and similar amounts paid (Part IX, column (A), Jines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0. 84,794,594.	99,194,106.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		04,794,394.	0.
Expenses	loa	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  105,0	78	0.	0.
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		55,450,661.	52,845,611.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			152,039,717.
		Revenue less expenses. Subtract line 18 from line 12	······	6,605,727.	8,113,406.
- JC		Tovarias lose expenses. Capages line to nontinio 12	Ве	ginning of Current Year	End of Year
Assets or	20	Total assets (Part X, line 16)		41,434,361.	245,867,660.
Ass	21	Total liabilities (Part X, line 26)	1	83,982,917.	179,886,165.
Net	-	Net assets or fund balances. Subtract line 21 from line 20		57,451,444.	65,981,495.
P	art II	Signature Block			
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	s and stateme	ents, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.	
Sig		Signature of officer		Date	
He	re	PATRICIA BRANTLEY, CEO		1/21/2025	
		Type or print name and title	Tr	Date Check	I DTIN
		Print/Type preparer's name Preparer's signature		i.f	PTIN
Pai		BRANDY L. MIKULA, CPA BRANDY L. MIKULA	A, CP 0	1/18/25 self-employ	
	parer	Firm's name MANER COSTERISAN PC Firm's address 2425 E. GRAND RIVER, SUITE 1		Firm's EIN 3	8-2157642
USE	Only	Firm's address 2425 E. GRAND RIVER, SUITE 1 LANSING, MI 48912-3291		Dhone no E1	7-323-7500
N/a	v tha I			I Priorie no. 31	
		RS discuss this return with the preparer shown above? See instructions	2-21-22		X Yes No

Pa	Till Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	TO PROVIDE A WORLD-CLASS EDUCATION THAT MOTIVATES STUDENTS TO ACHIEVE	
	HIGH ACADEMIC STANDARDS, ENJOY LEARNING AND DEVELOP AS ETHICAL,	
	LITERATE, WELL-ROUNDED AND SELF-SUFFICIENT CITIZENS THAT CONTRIBUTE	
	ACTIVELY TO THEIR COMMUNITIES.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
_	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$135,036,767. including grants of \$) (Revenue \$121,219,740	<u>•</u> )
	TO PROVIDE QUALITY INSTRUCTION FOR CHILDREN FROM PRE-KINDERGARTEN TO	
	12TH GRADE FOR APPROXIMATELY 4,511 STUDENTS.	
		—
		—
		—
	• (7)	—
		—
		—
	<u> </u>	—
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	
40	(Code:) (Expenses \$	<b>—</b> ′
		—
4c	(Code:) (Expenses \$ including grants of \$ ) (Revenue \$	)
		—
		—
		—
	Other was aware and issay (Describe on Cabadula O.)	—
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$\frac{\text{including grants of \$}}{135,036,767}\$) (Revenue \$\frac{\text{Revenue \$}}{\text{Notal program service expenses}}\$	—
<u>4e</u>	Total program service expenses 135, 036, 767.	US3)
	FOITH 999 (2:	J_U)

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		<u> </u>
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	77	X
	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		37	
40	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	40-	Х	
	Schedule D, Parts XI and XII	12a	Λ	_
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	106		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		- 22	х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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			
		14b		х
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	שדו		
.5	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			<del></del> -
	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,			<u> </u>
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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

	990 (2023) FRIENDSHIP PUBLIC CHARTER SCHOOL, INC. 58-239	8964	Р	age <sup>4</sup>
Pa	TIV Checklist of Required Schedules (continued)		1	Ι
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	000		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22		
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			,,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	056		x
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes." complete Schedule L. Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? of "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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		x
29	"Yes," complete Schedule L, Part IV	28c 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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
36	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
30	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	00		
٥.	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 on Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
		1	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 15	_		
b	Enter the number of Fernie W Zermoladed of the Fat. Enter of the applicable	<u>0</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

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(gambling) winnings to prize winners?

Form 990 (2023) FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

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

	. (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		100	110
	filed for the calendar year ending with or within the year covered by this return  2a 1299			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		_X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	00		
a	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
b 10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
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			
	Gross income from members or shareholders			
	Gross income from other sources. Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			7.7
	excess parachute payment(s) during the year?	15		<u> </u>
	If "Yes," see the instructions and file Form 4720, Schedule N.			7.7
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		_X_
<b>_</b> _	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

332005 12-21-23

FRIENDSHIP PUBLIC CHARTER SCHOOL, INC. Form 990 (2023) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 13 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 11 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a Х Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? ...... b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 900 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х on Schedule O how this was done ...... 12c Did the organization have a written whistleblower policy? Х 13 13 Х Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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? 16h Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	DC
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18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

Own website X Another's website X Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records

CATHERINE SANWO-SOMEFUN - 202-281-1700 1400 1ST STREET NW SUITE 300, WASHINGTON,

DC 20001

# 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 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 all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)  Name and title	(B) Average	,,		(( Pos	ition			(D) Reportable	(E) Reportable	<b>(F)</b> Estimated
	hours per	box,	, unles	heck i ss per id a di	son i	s both	n an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISO 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) PATRICIA A. BRANTLEY CEO	40.00	х		х				289,377.	0.	96,277.
(2) PEGGY EDWARDS-JONES	40.00	21		25				205,5111	•	30,211.
PRINCIPAL		1				X	)	237,422.	0.	33,779.
(3) KENNETH CHERRY CHIEF OF STAFF	40.00			1	X			229,899.	0.	23,132.
(4) JAMES WALLER	40.00		- \							-
CHIEF OF SCHOOL OPERATIONS		1			Х			207,428.	0.	14,911.
(5) JOHN GLOVER	40.00					,,		100 017		21 067
CHIEF EXTERNAL AFFAIRS OFFICER	40.00					X		190,017.	0.	31,067.
(6) JOSEPH SPEIGHT, JR. PRINCIPAL	40.00	1				X		189,835.	0.	30,640.
(7) CATHERINE SOMEFUN	40.00					^		109,033.	0.	30,040.
CFO	20.00			х				186,767.	0.	32,982.
(8) ZACHARY MORFORD	40.00									-
CHIEF OF PERFORMANCE						Х		189,804.	0.	28,891.
(9) JOHN SNOWDY	40.00								_	
PRINCIPAL	40.00					X		185,802.	0.	28,748.
(10) VIELKA SCOTT-MARCUS	40.00	-			٦,			200 022	,	2 020
CAO (11) DONALD L. HENSE	20.00				Х			208,822.	0.	3,929.
CHAIR	20.00	Х		х				0.	0.	10,533.
(12) DR. GREGORY PRINCE	5.00	21						•	•	10,333.
VICE CHAIR		Х		х				0.	0.	0.
(13) DARRIN L. GLYMPH	7.50									
TREASURER		Х		Х				0.	0.	0.
(14) VICTOR E. LONG	15.00									
SECRETARY		Х		Х				0.	0.	0.
(15) UNIQUE FULLMORE	5.00							_	_	_
TRUSTEE		Х						0.	0.	0.
(16) ANISE WALKER	5.00									•
TRUSTEE	F 00	Х						0.	0.	0.
(17) JEANETTE MENDES	5.00	v							_	0
TRUSTEE		X		<u> </u>				0.	0.	0.

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

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

# Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
MCN BUILD INC		
1214 28TH STREET, NW, WASHINGTON, DC 20007	CONSTRUCTION SERVICE	9,109,929.
CONSIGLI CONSTRUCTION CO., INC., 1250 H		
STREET, NW, SUITE 975, WASHINGTON, DC	CONSTRUCTION SERVICE	7,811,543.
BUSY BEE ENVIRONMENTAL SERVICES, 7826	HVAC MAINTENANCE,	
EASTERN AVE NW #503, WASHINGTON, DC 20012	HOUSEKEEPING SERVICE	6,926,908.
K12 MANAGEMENT INC.	EDUCATIONAL	
2300 CORPORATE PARK DR., HERNDON, VA 20171	MANAGEMENT SERVICE	3,489,000.
CDWG	INFORMATION	
200 N MILWAUKEE AVE, VERNON HILLS, IL 60061	TECHNOLOGY PRODUCTS	2,109,536.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 21		
		000

Form 990 (2023) FRIENDS
Part VIII Statement of Revenue

		Check if Schedule O contains a response o	r note to any lin	e in this Part VIII			
		Official in Schedule O contains a response of	i flote to arry iii i	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenuè excluded
					function revenue	business revenue	from tax under sections 512 - 514
		ТТ					Sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns 1a					
ira our	b	Membership dues 1b					
S, C	С	Fundraising events					
iift ar ,	d	Related organizations 1d					
s, ( imil	е	Government grants (contributions)	22,826,493.				
ion r S	f	All other contributions, gifts, grants, and					
but		similar amounts not included above 1f	12,178,673.				
i i	g	Noncash contributions included in lines 1a-1f					
Sol	h	Total. Add lines 1a-1f		35,005,166.			
			Business Code				
ø.	2 a	PUBLIC REVENUE	611600	118248748.	118248748.		
Κį	_ b		611600	1,720,454.	1,720,454.		
Ser	c			, ,			
m Ver	d						
gra Re						)	
Program Service Revenue	e						
_		All other program service revenue		119969202.			
		Total. Add lines 2a-2f		119909202.	$\overline{}$		
	3	Investment income (including dividends, interes		2 075 177			3875177.
		other similar amounts)		3,875,177.	,		3073177.
	4	Income from investment of tax-exempt bond pr	oceeas	1			
	5	Royalties(i) Real	(ii) Personal				
		52.040	(II) Personal	5			
	6 a			0			
	b						
	C	` '	- (	F2 040			F3 040
		Net rental income or (loss)  Gross amount from sales of  (i) Securities	(ii) Other	53,040.			53,040.
	/ a		(II) Other				
		assets other than inventory 7a	•				
•	b	Less: cost or other basis					
nu		and sales expenses 7b Gain or (loss) 7c					
Revenue							
Ä		Net gain or (loss)					
ther	8 a	Gross income from fundraising events (not					
ð		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events     Gross income from gaming activities. See					
	9 a	9 9					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b					
-	C	Net income or (loss) from sales of inventory	Business Code				
ns	11 6	MISCELLANEOUS REVENUE	900099	707,441.	707,441.		
Miscellaneous Revenue	ii a		900099	543,097.	543,097.		
ila Ven	C	· -		0.20,007.	223,037.		
Sce		l All other revenue					
Σ	-	• Total. Add lines 11a-11d		1,250,538.			
	12	Total revenue. See instructions		160153123.	121219740.	0.	3928217.

0 11	504(1/0) 1504(1/4) : ::				
Secti	on 501(c)(3) and 501(c)(4) organizations must comp			npiete column (A).	
	Check if Schedule O contains a respon		tnis Part IX	(C)	(D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,331,898.		1,331,898.	
6	Compensation not included above to disqualified				-
·	persons (as defined under section 4958(f)(1)) and				
7	Other salaries and wages	82,363,263.	75,435,530.	6,927,733.	_
8	Pension plan accruals and contributions (include	52,505,205	/5/25/550	77,733.	
o	•	816,305.	644,658.	171,647.	
0	section 401(k) and 403(b) employer contributions)	8,491,341.	7,505,614.	985,727.	
9	Other employee benefits	6,191,299.	5,637,375	553,924.	
10	Payroll taxes	0,191,299.	3,031,313	333,324.	
11	Fees for services (nonemployees):		401		
а	Management	60 740	.(0	60.740	
	Legal	62,749.		62,749. 132,430.	
С	Accounting	132,430.	6	132,430.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	45 500	)	45 500	
f	Investment management fees	47,722.		47,722.	
g	Other. (If line 11g amount exceeds 10% of line 25,	6 370000	4 564 644	4 600 000	
	column (A), amount, list line 11g expenses on Sch 0.)	6,372,488.	4,764,611.	1,607,877.	
12	Advertising and promotion	2 2 2 2 2 2 2	1 600 000	2 122 522	
13	Office expenses	3,937,938.	1,699,332.	2,133,528.	105,078.
14	Information technology	376,502.	357,677.	18,825.	
15	Royalties		10 -11 1-0	222 271	
16	Occupancy	11,388,524.		822,351.	
17	Travel	428,682.	397,015.	31,667.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	6,912,142.	6,566,535.	345,607.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,194,674.	7,784,941.	409,733.	
23	Insurance	924,837.	878,595.	46,242.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A).				
	amount, list line 24e expenses on Schedule 0.)				
а	DIRECT STUDENT COSTS	11,678,870.	11,678,870.		
b	CHARTER FEE	1,269,695.		1,269,695.	
С	TRAINING & RECRUITMENT	1,118,358.	1,119,841.	-1,483.	
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	152,039,717.	135,036,767.	16,897,872.	105,078.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					Form <b>990</b> (2022)

# Form 990 (2023) Part X | Balance Sheet

<u>Par</u>	rt X	Balance Sheet					
		Check if Schedule O contains a response or note	e to an	y line in this Part X			
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			48,742,833.	2	38,131,897
	3	Pledges and grants receivable, net			3,305,179.	3	4,750,133
	4	Accounts receivable, net			1,846,131.	4	1,453,419
	5	Loans and other receivables from any current or	former	officer, director,			
		trustee, key employee, creator or founder, substa	antial c	contributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ÿ	9	Prepaid expenses and deferred charges			0.	9	15,000
	10a	Land, buildings, and equipment: cost or other			A		
		basis. Complete Part VI of Schedule D	10a	228,571,791.			
	b	Less: accumulated depreciation	10b	68,360,402.	150,257,266.	10c	160,211,389
	11	Investments - publicly traded securities			29,883,647.	11	34,087,565
	12	Investments - other securities. See Part IV, line 1	1		3,000,000.	12	3,000,000
	13	Investments - program-related. See Part IV, line 1	l <b>1</b>			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			4,399,305.	15	4,218,257
	16	Total assets. Add lines 1 through 15 (must equa			241,434,361.	16	245,867,660
	17	Accounts payable and accrued expenses			22,022,174.	17	20,974,551
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			138,047,000.	20	152,221,542
	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
Se	22	Loans and other payables to any current or form	_				
Ě		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of thes	e pers	ons		22	
_	23	Secured mortgages and notes payable to unrela			22,178,060.	23	5,000,000
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines			4 505 600		4 600 050
		of Schedule D			1,735,683.		1,690,072
	26			77	183,982,917.	26	179,886,165
g		Organizations that follow FASB ASC 958, che	ck her	e X			
Š		and complete lines 27, 28, 32, and 33.			FC 070 F20		C4 F0F F4C
alar	27	Net assets without donor restrictions			56,970,530.	27	64,585,546
Ř	28	Net assets with donor restrictions			480,914.	28	1,395,949
ŭ		Organizations that do not follow FASB ASC 95	58, che	eck here			
Υ Τ		and complete lines 29 through 33.					
ts (	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or eq				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc			[7 A[1 AAA	31	6E 001 40E
Š	32	Total net assets or fund balances			57,451,444.	32	65,981,495
	33	Total liabilities and net assets/fund balances			241,434,361.	33	245,867,660 Form <b>990</b> (202

332012 12-21-23

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

**Employer identification number** 

FRIENDSHIP PUBLIC CHARTER SCHOOL 58-2398964 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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).) 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) 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). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions)) Total

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included				~~		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,				-07		
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support			0.			
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest,			5			
	dividends, payments received on			5			
	securities loans, rents, royalties,		\(	)			
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the		7,60				
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		•				
	assets (Explain in Part VI.)	1,10					
11	<b>Total support.</b> Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	te organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						
	ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (f))		14	<u>%</u>
	Public support percentage from 2022					15	<u>%</u>
16a	33 1/3% support test - 2023. If the	-			14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the	-			line 15 is 33 1/3%	or more, check th	is box
	and <b>stop here.</b> The organization qual	•	• • •				
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	•	VI how the organiz	zation
	meets the facts-and-circumstances te	-	•		-		
b	10% -facts-and-circumstances test	_					10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu		-	•	• • •		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a		
						Schedule A	(Form 990) 2023

(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.)

Callendar year (or fiscal year beginning in)  Gillis, grants, contributions, and membership fees received. (Do not include any "unusual grants").  Girlis expense recipits from admissions, membership fees received. (Do not include any "unusual grants").  Girlis expense recipits from admissions, membership fees received. (Do not include any "unusual grants").  Girlis expense recipits from admissions, membership from admissions, membrandiae solid or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose and any activity that is related to the organization's breating and the property of the organization's breating and the property form activities that are not an unrelated trade or business under services of facilities furnished by a governmental unit to the organization without change for the organization of successful and the state of called any activity that the organization without change for the organization of successful and the state of called any activity of the organization of successful and the state of called any activity of the organization of the state of called any activity of the successful and activities of the succe	Sec	tion A. Public Support						
membership fees received. (Do not include any runsus) grants. 7  2 Grass recipits from admissions, membrandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax exempl purpose of Grass receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues leved for the organization interest and the paid to or expended on its behalf to the organization without charge 6 Total Add lines 1 through 5 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts included on lines 1, 2, and 3 received from disqualified persons D Amounts from lines 6 under the persons of the company of the persons of the pe	Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		•	•	•				
more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		·						
b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	134							, 13 1101
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	L-							L
	a							
	00							

### Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

- 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.
- 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 lines 3b and 3c 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" "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined on 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 on 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 line 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		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
3		
9a		
9b		
9с		
10a		
401-		
10b ule A (Forn	n 990)	2023

	Check the box next to the method that the organization used to satisfy the integral Part Test during the year $N$	see msu ucuons).
а	The organization satisfied the Activities Test. Complete line 2 below.	

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

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

Activities Test. Answer lines 2a and 2b below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

- Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a 2b За

No

Yes

Schedule A (Form 990) 2023

Section B, line 8, column A)

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

3

4

5

6

Schedule	Δ	(Form	990)	2023

3

5

Minimum asset amount for prior year (from

emergency temporary reduction (see instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Schedule A (Form 990) 2023

e Excess from 2023

# Schedule B

(Form 990)

# Attack to Form 000 000 F7 or 000 PF

2023

Department of the Treasury Internal Revenue Service

Name of the organization

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

Schedule of Contributors

**ZUZ**3

**Employer identification number** 

OMB No. 1545-0047

FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

58-2398964

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ

 $\overline{X}$  501(c)( 3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF 501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

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

## **General Rule**

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

## Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Employer identification number

# FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 78,460.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	010110	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>4,223,718.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

# FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

	Contributors (see instructions). Use duplicate copies of Part I if additional		T
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>18,264,026.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 75,262.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	010110	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$7,500.	Person X Payroll Noncash (Complete Part II for

Employer identification number

# FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

	Contributors (see instructions). Use duplicate copies of Part I if additional	T	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$ 7,953,022.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$ <u>158,580.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	O 1/0/1/C	\$122,360.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$	Person X Payroll Noncash (Complete Part II for

Schedule B (Form 990) (2023)

Name of organization Employer identification number

# FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$5,800.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$ 12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21		\$ <u>263,487.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22	QUOIC *	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24		\$5,000.	Person X Payroll Noncash (Complete Part II for

Employer identification number

# FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26_		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	- SCIOSUI	\$7,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28_	Public :	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
323452 12-26	-23	1	Schedule B (Form 990) (2023)

Employer identification number

# FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		*	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	010110	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for
			noncash contributions.)  Schedule B (Form 990) (20

Name of organization Employer identification number

# FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if ac	dditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		* Co.62	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	-:60	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	-
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	 Schedule B (Form 990) (20

Name of organization **Employer identification number** FRIENDSHIP PUBLIC CHARTER SCHOOL, 58-2398964 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# **SCHEDULE D** (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

**Employer identification number** 58-2398964

Pai	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	s 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
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ac	lvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring
Da			
Pai			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio	` `	
	Preservation of land for public use (for example, recreat	, =	of a historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification of the tax year.	ed conservation contribution in the form	Held at the End of the Tax Year
_		.(2)	2a
b			2b
C	Number of conservation easements on a certified historic stru	cture included on line 2a	2c
d	Number of conservation easements included on line 2c acquire		
-	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	year		3
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period		-
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing cor	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conserve	ation easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 1700	h)(4)(B)(i)
_	and a attion 470/b/(4)(D)(")0		V N-
9	In Part XIII, describe how the organization reports conservatio		
	balance sheet, and include, if applicable, the text of the footnote		
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under FASB AS	_	
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.	Schedule D (Form 990) 2023

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, line 10c. column (B))

Schedule D (Form 990) 2023 FRIENDSHIP P Part VII Investments - Other Securities	ODDIC CHARTE	R SCHOOL, INC. 5	58-2398964 Page 3
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			•
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))  Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or	n Form 000 Part IV line	11c Soc Form 900 Part V line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or e	and of year market value
., .	(b) Dook value	(c) Welfied of Valuation Cost of a	end-or-year market value
(1)		()	
(2)			
(4)		<u> </u>	
(5)			
(6)			
(7)		30	
(8)			
(9)		U'	
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	10		
Complete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	
(a) D	escription		(b) Book value
(1)			
(2)			
(3)	<b>V</b>		
(4)	•		
(5)			
(6)			
(7)			
(8)			
(9)	(D))		
Total. (Column (b) must equal Form 990, Part X, line 15, col.  Part X Other Liabilities	<u>(B))</u>		
Complete if the organization answered "Yes" or	n Form 990 Part IV line	11e or 11f See Form 990 Part X line	25
	iri oiiii ooo, r aitiv, iiile	110 5. 111. 000 1 0.111 990, 1 att A, IIIIe	(b) Book value
11 1 7			(S) BOOK VAIAO
(1) Federal income taxes (2) CAPITAL LEASE OBLIGATION			1,690,072.
			+ -,000,012.

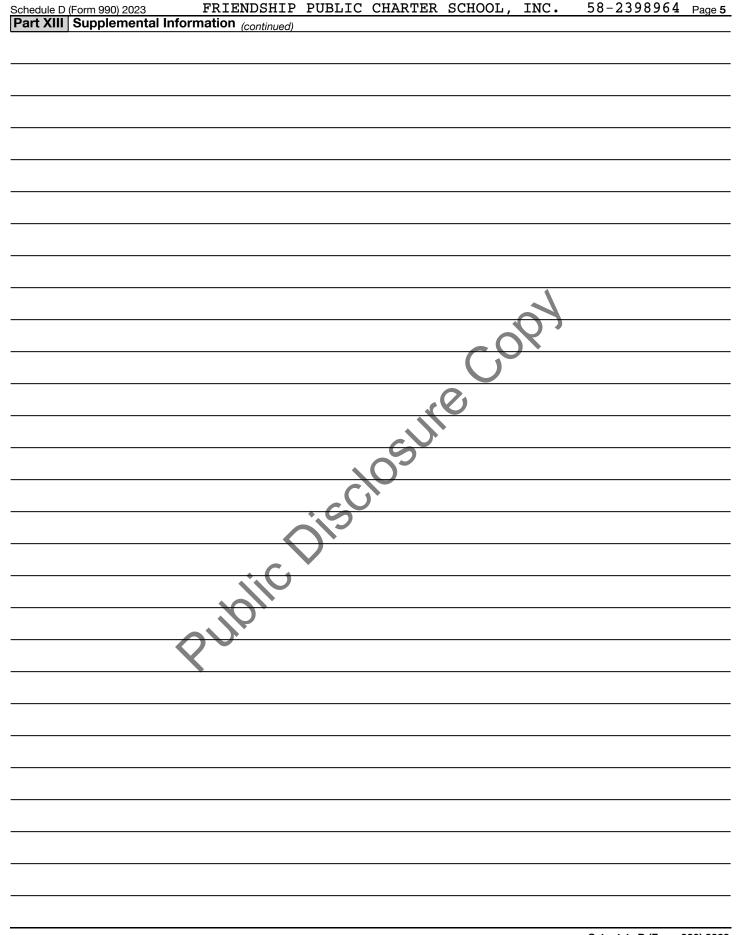
1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	CAPITAL LEASE OBLIGATION	1,690,072.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	1,690,072.

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

Schedule D (Form 990) 2023

ULTIMATELY DUE OR OWED. NO AMOUNTS HAVE BEEN IDENTIFIED, OR RECORDED, AS UNCERTAIN TAX POSITIONS. FEDERAL, STATE AND LOCAL TAX RETURNS GENERALLY REMAIN OPEN FOR EXAMINATION BY THE VARIOUS TAXING AUTHORITIES FOR A PERIOD OF THREE TO FOUR YEARS.

Schedule D (Form 990) 2023



# **SCHEDULE E** (Form 990)

Department of the Treasury

# **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.

INC.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Go to www.irs.gov/Form990 for the latest information.

FRIENDSHIP PUBLIC CHARTER SCHOOL

Employer identification number 58-2398964

Da	FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.   56-2	4390	<b>904</b>	
Pa			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?			
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	X	
	PUBLICIZED IN RECRUITMENT LITERATURE, FLYERS IN PUBLIC			
	PLACES, PRINT AND ELECTRONIC MEDIA. INFORMATION IS AVAILABLE			
	IN ENGLISH AS WELL AS OTHER LANGUAGES, AS APPROPRIATE.			
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		Х
С	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
е	Educational policies?	5e		Х
f	Use of facilities?	5f		X
_	Athletic programs?	5g		Х
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6-	Does the expenization receive any financial aid or equiptenes from a seven mental expense?	6-	Х	
	Does the organization receive any financial aid or assistance from a governmental agency?  Has the organization's right to such aid over been revoked or suspended?	6a		Х
D	Has the organization's right to such aid ever been revoked or suspended?	6b		<u> </u>
7	If you answered "Yes" on either line 6a or line 6b, explain on Part II.  Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
•	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
	racial nondiscrimination? If "No," explain on Part II	7	х	
	radia nondicontributation: it itto, copiani on tartii			

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

Schedule E (Form 990) 2023

Schedule E (Form 990) 2023

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

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Open to Public Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDSHIP PUBLIC CHARTER SCHOOL, INC. Inspection

OMB No. 1545-0047

Employer identification number 58-2398964

#### **Questions Regarding Compensation** Part I

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

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

Schedule J (Form 990) 2023

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

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

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

	(B) Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PATRICIA A. BRANTLEY	(i)	289,377.	0.	0.	83,826 🛦	12,451.	385,654.	0.
CEO	(ii)	0.	0.	0.	6.	0.	0.	0.
(2) PEGGY EDWARDS-JONES	(i)	237,422.	0.	0.	4,621.	29,158.	271,201.	0.
PRINCIPAL	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KENNETH CHERRY	(i)	229,899.	0.	0.	4,175.	18,957.	253,031.	0.
CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JAMES WALLER	(i)	207,428.	0.	0.	4,003.	10,908.	222,339.	0.
CHIEF OF SCHOOL OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOHN GLOVER	(i)	190,017.	0.	0.	3,833.	27,234.	221,084.	0.
CHIEF EXTERNAL AFFAIRS OFFICER	(ii)	0.	0.	6	0.	0.	0.	0.
(6) JOSEPH SPEIGHT, JR.	(i)	189,835.	0.	0.	1,826.	28,814.	220,475.	0.
PRINCIPAL	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) CATHERINE SOMEFUN	(i)	186,767.	0.	0.	3,725.	29,257.	219,749.	0.
CFO	(ii)	0.	<b>+0.</b>	0.	0.	0.	0.	0.
(8) ZACHARY MORFORD	(i)	189,804.	0	0.	0.	28,891.	218,695.	0.
CHIEF OF PERFORMANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JOHN SNOWDY	(i)	185,802.	0.	0.	0.	28,748.	214,550.	0.
PRINCIPAL	(ii)	0.	<b>•</b> 0.	0.	0.	0.	0.	0.
(10) VIELKA SCOTT-MARCUS	(i)	208,822.	0.	0.	317.	3,612.	212,751.	0.
CAO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)	X						
	(ii)	•						
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
-	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 4B:
PATRICIA BRANTLEY RECEIVED SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN
CONTRIBUTIONS OF \$78,000.
$Q_{j}$
401
3,5
110
10

#### SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information on Tax-Exempt Bonds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2023
Open to Public Inspection

Name of the organization

FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

Employer identification number 58-2398964

Part I	Bond Issues S.	EE PART VI	FOR COLUM	1 (F) CON	TINUAT	IONS			_							
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issue	d (e) Iss	(e) Issue price (f) Description		(f) Description of purpose		Description of purpose		feased	ased <b>(h)</b> On behalf of issuer		(i) Po finan	
									Yes	No	Yes	No	Yes	No		
Δ DTS	STRICT OF COLUMBIA	53-6001131	NONEAVATI	09/14/2	3   1803	<b>I</b>	O CURRE	NT G PURPOSE	!	х		x		х		
<u> </u>		33 0001131	1011211111	037 2 27 2			O CURRE									
B DIS	STRICT OF COLUMBIA	56-6001131	NONEAVAIL	12/01/2	2 2974	12000.R	EFUNDIN	G PURPOSE	:	Х		х		X		
							O FINAN									
c DIS	STRICT OF COLUMBIA	53-6001131	NONEAVAIL	04/14/2	1 3000			PROJECTS		Х		Х		X		
n DT	STRICT OF COLUMBIA	53-6001131	NONFAVATI.	08/28/10	9 1726			URSE AND CAPITAL P	,	х		x		х		
Part II	Proceeds	55 0001151	HOMEAVAID	00/20/1	7 1442	/0000.	INANCE	CALLIAD I	1 1	21	<u> </u>	21	J			
1 di t ii	1100000				Δ		В	С		D						
<b>1</b> Am	nount of bonds retired			4	25,000.		49,000.	1,399,	000					00.		
	nount of bonds legally defeased			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \												
<b>3</b> To	tal proceeds of issue			18,0	35,000.	29,7	42,000.	31,278,516.		. 17,30		,30	3,88	39.		
<b>4</b> Gr	oss proceeds in reserve funds															
<b>5</b> Ca	apitalized interest from proceeds		<u>*</u>													
<b>6</b> Pro	oceeds in refunding escrows				261 407				00 110							
	•			3	61,487.		393			,110.		230		<del>98.</del>		
	edit enhancement from proceeds															
	orking capital expenditures from proceeds		<del>''\</del>					25 020	677		17	0.21	= 24	<u>-                                    </u>		
	apital expenditures from proceeds	<b>\</b>		17 6	73,513.	29 7	25,839, 742,000. 105,						3,20 3,00			
	her spent proceeds her unspent proceeds		<u> </u>	17,0	13,313.	29,1	42,000.	4,940					$\frac{3}{2}, \frac{3}{13}$			
	ear of substantial completion		· · · · · · · · · · · · · · · · · · ·					4,540,	, ,	•			$\frac{1}{24}$	<u>/+•</u>		
10 10	nar er edbetarniar eempletien			Yes	No	Yes	No	Yes	No		Yes		No			
14 We	ere the bonds issued as part of a refunding	issue of tax-exempt b	oonds (or,													
if is	ssued prior to 2018, a current refunding iss	sue)?			X		X		X				2	X		
<b>15</b> We	ere the bonds issued as part of a refunding	issue of taxable bond	ds (or, if													
iss	issued prior to 2018, an advance refunding issue)?			X		X			X			$\perp$		X		
	as the final allocation of proceeds been made				X	1	X		<u> </u>					X		
	pes the organization maintain adequate boo	oks and records to sup	oport the													
fina	al allocation of proceeds?			X		X		X			X					

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

Schedule K (Form 990) 2023

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information on Tax-Exempt Bonds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2023
Open to Public Inspection

Name of the organization

FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

Employer identification number 58-2398964

Part I Bond Issues	SEE PART VI			TINUAT	ONS				<u> </u>				
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued		ue price	(f) Description	on of purpose	(g) Defeased (h)				(i) Po	
								Yes	No	Yes	No	Yes	No
A DISTRICT OF COLUMBIA	53-6001131	NONEAVAIL	03/30/16	2091		O CURRE	NT REFUNI BONDS.		х		х		х
B DISTRICT OF COLUMBIA	53-6001131	25483QY30	03/30/16	6397			NT REFUNI NDS, REF		х		х		Х
С					$\mathcal{C}_{\mathcal{A}}$								
D				.01									
Part II Proceeds				110	_				_				
1 Amount of bonds retired			16,39	5,000.		В	С				D		
2 Amount of bonds legally defeased			0~										
3 Total proceeds of issue			. 20,91	5,000.		10,411.							
4 Gross proceeds in reserve funds			( )		4,8	56,981.							
5 Capitalized interest from proceeds													
6 Proceeds in refunding escrows													
7 Issuance costs from proceeds			41	0,296.	1,2	79,485.							
8 Credit enhancement from proceeds		X.											
9 Working capital expenditures from pro	oceeds	. • . ( )											
10 Capital expenditures from proceeds						31,621.							
11 Other spent proceeds	Y		_ 20,50	4,704.	49,5	50,498.							
12 Other unspent proceeds						9,996.							
13 Year of substantial completion						2020							
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a re	-		•		•								
if issued prior to 2018, a current refun			Х		X						-		
15 Were the bonds issued as part of a re-	_			77									
	issued prior to 2018, an advance refunding issue)?			X	77	X			-		_		
16 Has the final allocation of proceeds be			X		X								
17 Does the organization maintain adeques final allocation of proceeds?			X		х								

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

Schedule K (Form 990) 2023

58-2398964

Part III Private Business Use								
		Ą		В		Ç		<u> </u>
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		X		X		X		X
2 Are there any lease arrangements that may result in private business use of								
bond-financed property?		X		X		X		X
Ba Are there any management or service contracts that may result in private								
business use of bond-financed property?		X		X		x		X
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside				4				
counsel to review any management or service contracts relating to the financed property?			•	77				
c Are there any research agreements that may result in private business use of			5					
bond-financed property?		Х		' x		x		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?			1					
Enter the percentage of financed property used in a private business use by entities				•				
other than a section 501(c)(3) organization or a state or local government		.00 %		.00 %		.00 %		.00
Enter the percentage of financed property used in a private business use as a		.(0		,,		,,		
result of unrelated trade or business activity carried on by your organization,	•							
another section 501(c)(3) organization, or a state or local government	Co	.00 %		.00 %		.00 %		.00
Total of lines 4 and 5	7	.00 %		.00 %		.00 %		.00
Does the bond issue meet the private security or payment test?	$\overline{\mathbf{O}}$	X		X		X		X
Has there been a sale or disposition of any of the bond-financed property to a non-						<del> </del>		<del></del>
governmental person other than a 501(c)(3) organization since the bonds were issued?		Х		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or		21		21		22		
		%		%		%		
disposed of  c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations		70		70		70		T
sections 1.141-12 and 1.145-2?						1		+
Has the organization established written procedures to ensure that all								
nonqualified bonds of the issue are remediated in accordance with the	x		х		х		х	
requirements under Regulations sections 1.141-12 and 1.145-2?	Λ		Λ		Λ		Λ	
art IV Arbitrage				_				
Health Stewart Clad Ferry 2000 T. Altitude Dahata Midd Cadadian and		A No.		B		C		D No.
Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No X	Yes	No X	Yes	No X	Yes	No X
Penalty in Lieu of Arbitrage Rebate?				1 ^				^
! If "No" to line 1, did the following apply?	X	T	77		37	1	37	Т
a Rebate not due yet?			X		X	77	X	77
b Exception to rebate?	X	7.7	X	1 37		X		X
c No rebate due?		X		X		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?	X		X			X	X	

Schedule K (Form 990) 2023 FRIENDSHIP PUBLIC CHARTER SCHOOL  Part III Private Business Use	· · ·	·		2398964				Pag
art III Frivate Dusiness Ose		Δ		В		2	Г	<u> </u>
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		X		X				
2 Are there any lease arrangements that may result in private business use of				† †				
bond-financed property?		Х		x				i
3a Are there any management or service contracts that may result in private				1				
business use of bond-financed property?		Х		x				i
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								i
c Are there any research agreements that may result in private business use of								
bond-financed property?		Х		x				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other			<del>- ( )                                  </del>					
outside counsel to review any research agreements relating to the financed property?			1	1 1				İ
				1				<u> </u>
		.00 1%		.00 %		%		
other than a section 501(c)(3) organization or a state or local government		90		• 0 0 %		90		
5 Enter the percentage of financed property used in a private business use as a								
result of unrelated trade or business activity carried on by your organization,		.00 %		.00 %		07		
another section 501(c)(3) organization, or a state or local government	-S	.00 %		.00 %		%		
6 Total of lines 4 and 5	$\left( \cdot \right)$	X X		X		%		
7 Does the bond issue meet the private security or payment test?		^		<del>  ^</del>				
8a Has there been a sale or disposition of any of the bond-financed property to a non-		v						
governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
disposed of		<u>%</u>		%		%		
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations				1 1				i
sections 1.141-12 and 1.145-2?				+				
9 Has the organization established written procedures to ensure that all				1 1				İ
nonqualified bonds of the issue are remediated in accordance with the				1 1				
requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					
Part IV Arbitrage								
		Ą		В	(	-		)
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		X		X				
2 If "No" to line 1, did the following apply?								1
a Rebate not due yet?		X		X				
<b>b</b> Exception to rebate?	X		X					
c No rebate due?	X		X					
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?		Х		Х				

Par	t IV Arbitrage (continued)									
			A B			С	;	D		
4a	Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No	
	hedge with respect to the bond issue?	Х		X			X		X	
b	Name of provider			CITY NATIO						
	Term of hedge	19.7	7100000	19.5	000000					
	Was the hedge superintegrated?		X		Х					
е	Was the hedge terminated?		X		Х					
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		Х		X	
b	Name of provider									
	Term of GIC			0						
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?				Ť					
6	Were any gross proceeds invested beyond an available temporary period?		X	· () ·	X	X		X		
7	Has the organization established written procedures to monitor the									
	requirements of section 148?	X		X		X		X		
Par	t V Procedures To Undertake Corrective Action		-(/)							
		/	11	В	1	Ç	;	D		
	Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No	
	of federal tax requirements are timely identified and corrected through the	5								
	voluntary closing agreement program if self-remediation isn't available under									
	applicable regulations?	X		X		Х		Х		
Par	t VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instru	uctions.						
	<del>```</del>									

Part IV Arbitrage (continued)								
	A B			3	ç			)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X		X				
<b>b</b> Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
<b>b</b> Name of provider				1				
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?				•				
6 Were any gross proceeds invested beyond an available temporary period?		X	X					
7 Has the organization established written procedures to monitor the			)					
requirements of section 148?	X		Х					
Part V Procedures To Undertake Corrective Action		.(7)						
	,	11	E	3		2	D	)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the	5							
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	Х		X					
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instru	uctions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: DISTRICT OF COLUMBIA								
(F) DESCRIPTION OF PURPOSE:								
TO FINANCE CAPITAL PROJECTS AND PAY COSTS OF ISSU	ANCE							
(A) ISSUER NAME: DISTRICT OF COLUMBIA								
(F) DESCRIPTION OF PURPOSE:								
TO REIMBURSE AND FINANCE CAPITAL PROJECTS AND TO	PAY COS	STS OF	ISSUANC	CE				
(A) ISSUER NAME: DISTRICT OF COLUMBIA								
(F) DESCRIPTION OF PURPOSE:								
TO CURRENT REFUND PRIOR BONDS, REFINANCE EXISTING	LOAN,	FINANC	E CAP I	PROJECT				
PAGE 1 COLUMN A: PART I(F)								
THE BONDS CURRENT REFUNDED THE BORROWER'S TERM LO	AN ISSU	JED ON	DECEMBE	ER				
28, 2021.								

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. *(continued)*PAGE 1 COLUMN A: PART II, LINE 13

THE BONDS WERE ISSUED FOR A CURRENT REFUNDING PURPOSE ONLY; THEREFORE, NO SUBSTANTIAL DATE OF COMPLETION APPLIES TO THE BONDS.

PAGE 1 COLUMN A: PART III, LINE 7
AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE
AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE
SECURITY OR PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS
USE AND/OR UNRELATED TRADE OR BUSINESS USE. ACCORDINGLY, THE AMOUNT OF
PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT
STATED IN PART III, LINE 6. THE ORGANIZATION HAS NOT UNDERTAKEN AN
ANALYSIS OF THE PRIVATE SECURITY OR PAYMENT TEST WITH RESPECT TO THE

BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE REPORTED IN PART III, LINE 6 IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE.

PAGE 1 COLUMN B: PART I(F)

THE BONDS CURRENT REFUND SERIES 2021A TAXABLE BONDS (ISSUED APRIL 14, 2021).

PAGE 1 COLUMN B: PART II, LINE 13

THE BONDS WERE ISSUED FOR A CURRENT REFUNDING PURPOSE ONLY; THEREFORE, NO SUBSTANTIAL DATE OF COMPLETION APPLIES TO THE BONDS.

PAGE 1 COLUMN B: PART III, LINE 7

AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE SECURITY OR PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE. ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATED IN PART III, LINE 6. THE ORGANIZATION HAS NOT UNDERTAKEN AN ANALYSIS OF THE PRIVATE SECURITY OR PAYMENT TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE REPORTED IN PART III, LINE 6 IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE.

PAGE 1 COLUMN B: PART IV, LINE 2(B)

THE BONDS HAVE MET THE 6-MONTH EXCEPTION TO REBATE REQUIREMENT AND, THEREFORE, NO REBATE HAS, OR EVER WILL, BECOME DUE ON THE BONDS.

PAGE 1 COLUMN C: PART I(F)

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. (continued) BONDS WERE ISSUED TO FINANCE CAPITAL PROJECTS AND PAY COSTS OF ISSUANCE.

PAGE 1 COLUMN C: PART II, LINE 3 THE TOTAL PROCEEDS SHOWN IN PART II, LINE 3 DIFFERS FROM THE ISSUE PRICE SHOWN IN PART I, (E) DUE TO INTEREST EARNINGS ON INVESTED PROCEEDS.

PAGE 1 COLUMN C: PART III, LINE 7 AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE SECURITY OR PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE. ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATED IN PART III. LINE 6. THE ORGANIZATION HAS NOT UNDERTAKEN AN ANALYSIS OF THE PRIVATE SECURITY OR PAYMENT TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE REPORTED IN PART III, LINE 6 IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE.

PAGE 1 COLUMN D: PART I(F)

BONDS WERE ISSUED TO REIMBURSE AND FINANCE CAPITAL PROJECTS AND TO PAY COSTS OF ISSUANCE.

PAGE 1 COLUMN D: PART II, LINE 3 THE TOTAL PROCEEDS SHOWN IN PART II, LINE 3 DIFFERS FROM THE ISSUE

PRICE SHOWN IN PART I, (E) DUE TO INTEREST EARNINGS ON INVESTED PROCEEDS.

PAGE 1 COLUMN D: PART III, LINE 7 AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE SECURITY OR PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE. ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATED IN PART III, LINE 6. THE ORGANIZATION HAS NOT UNDERTAKEN AN ANALYSIS OF THE PRIVATE SECURITY OR PAYMENT TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS USE REPORTED IN PART III, LINE 6 IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE CODE.

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. *(continued)*PAGE 2 COLUMN A: PART I(F)

BONDS WERE ISSUED TO CURRENT REFUND THE 2015 BONDS (ISSUED ON JUNE 30, 2015).

PAGE 2 COLUMN A: PART II, LINE 3

THE TOTAL PROCEEDS SHOWN IN PART II, LINE 3 DIFFERS FROM THE ISSUE PRICE SHOWN IN PART I, (E) DUE TO INTEREST EARNINGS ON INVESTED PROCEEDS.

PAGE 2 COLUMN A: PART II, LINE 13

THE BONDS WERE ISSUED FOR A CURRENT REFUNDING PURPOSE ONLY; THEREFORE, NO SUBSTANTIAL DATE OF COMPLETION APPLIES TO THE BONDS.

PAGE 2 COLUMN A: PART III, LINE 7
AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE
AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE
SECURITY OR PAYMENT TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS
USE AND/OR UNRELATED TRADE OR BUSINESS USE. ACCORDINGLY, THE AMOUNT OF
PRIVATE PAYMENTS FOR THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT
STATED IN PART III, LINE 6. THE ORGANIZATION HAS NOT UNDERTAKEN AN
ANALYSIS OF THE PRIVATE SECURITY OR PAYMENT TEST WITH RESPECT TO THE
BONDS, AS THE LEVEL OF PRIVATE BUSINESS USE AND/OR UNRELATED TRADE OR
BUSINESS USE REPORTED IN PART III, LINE 6 IS NOT IN EXCESS OF AMOUNTS
PERMITTED UNDER SECTION 145 OF THE CODE.

PAGE 2 COLUMN A: PART IV, LINE 2(B)

THE BONDS HAVE MET THE 6-MONTH EXCEPTION TO REBATE REQUIREMENT AND, THEREFORE, NO REBATE HAS, OR EVER WILL, BECOME DUE ON THE BONDS.

PAGE 2 COLUMN A: PART IV, LINE 2(C)

THE MOST RECENT REBATE REPORT WAS PREPARED BY ARBITRAGE REBATE SERVICES, INC. AND DATED APRIL 27, 2017.

PAGE 2 COLUMN B: PART I(F)

THE BONDS CURRENT REFUND SERIES 2003 BONDS (ISSUED NOVEMBER 12, 2003)
AND THE SERIES 2006 BONDS (ISSUED DECEMBER 28, 2006) (COLLECTIVELY, THE
"PRIOR BONDS"). THE TAXABLE LOAN WAS ISSUED BY COMPASS BANK ON JUNE 30,
2015 (THE "TAXABLE LOAN" AND, TOGETHER WITH THE PRIOR BONDS, THE
"REFUNDED DEBT").

PAGE 2 COLUMN B: PART II, LINE 3

### SCHEDULE O (Form 990)

# 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 Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

FRIENDSHIP PUBLIC CHARTER SCHOOL, INC.

Employer identification number 58-2398964

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

THE BOARD CHAIR/CEO AND THE HEAD OF THE FINANCE COMMITTEE REVIEW THE 990

ONCE IT IS COMPLETED PRIOR TO BEING FILED. AT THAT TIME, THE FULL FINANCE

COMMITTEE AND BOARD OF DIRECTORS IS GIVEN THE OPPORTUNITY TO REVIEW THE

990. AFTER ANY ISSUES ARE ADDRESSED OR CORRECTED, THE CEO SIGNS AND FILES

THE RETURN.

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

PERIODIC REVIEWS ARE DONE BY THE CHIEF OPERATING OFFICER, THE CHIEF

FINANCIAL OFFICER, THE DIRECTOR OF HUMAN RESOURCES, AND THE PROCUREMENT

MANAGER ON VENDOR AND FAMILY RELATIONSHIPS IN REGARDS TO EMPLOYMENT,

CONTRACTS AND OTHER AGREEMENTS ENTERED ON BEHALF OF FRIENDSHIP PUBLIC

CHARTER SCHOOL.

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

THE ORGANIZATION DETERMINES COMPENSATION BY FORMAL AND INFORMAL COMPARATIVE

COMPENSATION STUDIES, WHICH INCLUDES A REVIEW OF CHARTER SCHOOLS OF SIMILAR

SIZE/COMPLEXITY, OTHER NON PROFITS, AND EDUCATIONAL INSTITUTIONS. THE

COMPENSATION PROCESS IS HEADED BY THE FINANCE COMMITTEE, AND THEY SUBMIT

THEIR RECOMMENDATIONS TO THE BOARD FOR APPROVAL.

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

ALL DOCUMENTS ARE MADE AVAILABLE FOR PUBLIC INSPECTION THROUGH THE PUBLIC

CHARTER SCHOOL BOARD, STATE EDUCATION AGENCIES, GUIDESTAR, AND UPON

REQUEST.

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

Schedule O (Form 990) 2023