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# 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

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. 2023 A For the 2022 calendar year, or tax year beginning JUL 1, 2022 and ending JUN Check if applicable: C Name of organization D Employer identification number Address change GROWING UP GREEN CHARTER SCHOOLS X Name change 81-0991132 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 84-35 152ND STREET 347-642-4306 36,731,058. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return JAMAICA, NY 11432 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: MATTHEW GREENBERG for subordinates? ..... Yes X No SAME AS C ABOVE \_ Yes 「 **H(b)** Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.GUGCS.ORG H(c) Group exemption number **K** Form of organization: **X** Corporation Trust Association Other L Year of formation: 2015 M State of legal domicile: NY Part I Summary Briefly describe the organization's mission or most significant activities: TO EMPOWER CHILDREN TO BE **Activities & Governance** CONSCIOUS AND CONTRIBUTING MEMBERS OF THEIR COMMUNITY. if the organization discontinued its operations or disposed of more than 25% of its net assets. 9 3 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 428 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 1,593,425. 1,779,144. Contributions and grants (Part VIII, line 1h) 8 15,613,147. 34,845,591. Program service revenue (Part VIII, line 2g) 2.292. 81,323. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 25,000. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 11 17,208,864. 36.731.058**.** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 10,613,228. 25,711,125. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 7,043,718. 12,907,096. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17,656,946. 38,618,221. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -448,082. -1,887,163. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 7,137,055. 115,610,612 Total assets (Part X, line 16) 3,664,693. 107,524,349 21 Total liabilities (Part X, line 26) 三年 472,362. 8,086,263 Net assets or fund balances. Subtract line 21 from line 20 ..... Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign MATTHEW GREENBERG, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 05/14/24 P00543209 GARRETT M. HIGGINS GARRETT M. HIGGINS Paid self-employed PKF O'CONNOR DAVIES, LLP Firm's EIN 87-3231666 Preparer Firm's name Firm's address 665 FIFTH AVENUE Use Only Phone no. 212-286-2600 NEW YORK, NY 10022

No

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	GROWING UP GREEN CHARTER SCHOOLS EMPOWERS CHILDREN TO BE CONSCIOUS	<del>;</del> ,
	CONTRIBUTING MEMBERS OF THEIR COMMUNITY THROUGH A RIGOROUS CURRICU	JLUM
	AND AN ENGAGING GREEN CULTURE. GRADUATES OF THE SCHOOLS WILL BE	
	PREPARED TO ATTEND HIGH-PERFORMING SCHOOLS WHERE THEIR	
2	Did the organization undertake any significant program services during the year which were not listed on the	
		Yes X No
	If "Yes," describe these new services on Schedule O.	
3	, and the second se	Yes X No
3		Tes LA 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 exper-	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expense	es, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$34 , 190 , 827 • including grants of \$0 • (Revenue \$34 , 84	<u>15,591.</u> )
	EDUCATION - THE SCHOOLS PROVIDED EDUCATION TO APPROXIMATELY 1,468	
	STUDENTS IN GRADES KINDERGARTEN THROUGH EIGHT DURING THE 2022-2023	<u>;                                    </u>
	ACADEMIC YEAR.	
4b	(Code:) (Expenses \$) (Revenue \$)	)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses 34,190,827.	
	Fc	orm <b>990</b> (2022)

## 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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
·	similar amounts as defined in 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	<u> </u>		<del></del>
Ü	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,	-		
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<b>-</b>		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<sub>V</sub>
_	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?			٦,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
124	, ,	12a	Х	
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
D		12b		V X
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
			- 21	х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del>  ^</del>
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			
		445		x
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<sub>V</sub>
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			\ <b>.</b> ,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
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		<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Х

Pa	1990 (2022) GROWING UP GREEN CHARTER SCHOOLS 81-0992 TIV Checklist of Required Schedules (continued)			age 4
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
<b>L</b>	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	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			
	, ,	25b		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	250		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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
b	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			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			1,7
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00		x
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34		34		x
35a	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	334		T
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

# Note: All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance

Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

	Check if Schedule O contains a response or note to any line in this Part V					LX
					Yes	No
1 a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	5			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
	(gambling) winnings to prize winners?			1c		

232004 12-13-22

Form 990 (2022)

13390671

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022) GROWING UP GREEN CHARTER SCHOOLS

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

			Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 428			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<del> </del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			37
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		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).			Х
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
ua	any contributions that were not tax deductible as charitable contributions?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ca		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
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		Х
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		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders  Gross income from other sources. (Do not net amounts due or paid to other sources against	1		
b	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		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			37
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	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		
22200	If "Yes," complete Form 6069.	Form	990	(2022)
_02000	TE IVEE	1 0111		(2006)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 9 **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 X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х 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? Did the organization have members or stockholders? 6 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 persons other than the governing body? X 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 **b** Each committee with authority to act on behalf of the governing body? Х 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 O 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 990 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 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 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? Х The organization's CEO, Executive Director, or top management official 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 NONE List the states with which a copy of this Form 990 is required to be filed 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 Another's website X Upon request Own website 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. State the name, address, and telephone number of the person who possesses the organization's books and records MATTHEW GREENBERG - 347-642-4306

Form **990** (2022)

13390671

39-27

28TH STREET, LONG ISLAND CITY,

# 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				(D) Reportable	<b>(E)</b> Reportable	(F) Estimated
riame and this	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)		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 Light		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) MATTHEW GREENBERG	40.00	1								
EXECUTIVE DIRECTOR	1			Х				411,286.	0.	6,824.
(2) JENNIFER SLUTAK	40.00	1								
SCHOOL LEADER	1					X		176,070.	0.	17,450.
(3) NANCY WONG DIRECTOR OF ASSESSMENT	40.00	-				x		157,846.	0.	12 0/5
(4) ANDREW WINTNER	40.00					^		137,040.	0.	13,845.
SCHOOL LEADER	40.00	1				x		127,683.	0.	35 353
(5) MAYA DENNIS	40.00					^		127,003.	0.	35,252.
DIRECTOR OF CURR. & INSTRUCTION	40.00	1				X		134,059.	0.	20,294.
(6) STEVEN VIOLA	40.00									
ASSISTANT SCHOOL LEADER						x		127,737.	0.	16,260.
(7) ANITA AMOH	40.00							·		•
DIRECTOR OF FINANCE				Х				119,849.	0.	17,423.
(8) MARC GREENBERG	1.00									
INTERIM BOARD CHAIR		Х		Х				0.	0.	0.
(9) ANNE LEVONEN	1.00									
TREASURER		Х		Х				0.	0.	0.
(10) KELLY RUSSOTTI	1.00									
SECRETARY		Х		Х				0.	0.	0.
(11) LINDA GREEN	1.00	<u> </u>								
ASSISTANT SECRETARY		Х		Х				0.	0.	0.
(12) PASTOR CORWIN MASON	1.00	]							_	_
BOARD MEMBER		Х						0.	0.	0.
(13) KIAH HUFANE	1.00	ļ								
BOARD MEMBER		Х						0.	0.	0.
(14) PETER DAVIS	1.00	ļ								
BOARD MEMBER	1	Х						0.	0.	0.
(15) DANIELLE WILLIAMS	1.00	l								
BOARD MEMBER	1 00	Х						0.	0.	0.
(16) MARK FREIDBERG	1.00	٠.,								•
BOARD MEMBER		Х						0.	0.	0.
		1								
		<u> </u>			l		l			- 000 (assa)

Form **990** (2022)

81-0991132

Section A. Officers, Directors, Trus		oloye	ees,			ghes	t C		,				
(A)	(B)			( <b>(</b> Posi				(D)	(E)			(F)	
Name and title	Average hours per		not cl	heck i	more	than o		Reportable	Reportable			timat	
	week					s both r/trust		compensation from	compensatio from related	- 1		nount other	
	(list any	tor						the	organizations			pensa	
	hours for	direc				D.		organization	(W-2/1099-MIS			om th	
	related	tee or	ıstee			ensate		(W-2/1099-MISC/	1099-NEC)		org	anizat	tion
	organizations	ıl trus	nal tr		oyee	dwo		1099-NEC)			and	d relat	ted
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	nizati	ions
	line)	lnd	lns	J)(	Key	Hig	휸			-			
-										-+			
										$\dashv$			
										$\dashv$			
										$\dashv$			
										$\neg$			
										$\neg$			
1b Subtotal								1,254,530.		0.	12	7,3	48.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								1,254,530.		0.	12	7,3	48.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) who	re	eceived more than \$100,	000 of reportable	;			
compensation from the organization											1		26
										_		Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,	•	,	,		,	,	٠	•	,				l
line 1a? If "Yes," complete Schedule J for se											3		X
4 For any individual listed on line 1a, is the su								•	•		_	37	
and related organizations greater than \$150											4	X	
5 Did any person listed on line 1a receive or a	•				,			J			_		х
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedule	J fo	or su	ıch <u>r</u>	oers	on .					5		_ A
·	managet ad ind	lono	ndor	at oc	ntro	otor	o +h	act received more than \$	100 000 of comp		ion fro		
1 Complete this table for your five highest countries the organization. Report compensation for the organization.	-	-							· · · · · · · · · · · · · · · · · · ·	ensau	1011 110	,,,,	
(A)	irie Caleridai ye	ai e	iluli	ig w	itire	)I VVII	T	(B)	car.		(0	٠,	
Name and business	address							Description of s	ervices	C	ompei		on
FLINT CONSTRUCTION NYC IN							1	•					
60-92 70TH AVENUE, RIDGEW		1	13	85			ŀ	REPAIRS & MA	INT.		17	4.6	45.
ONE SERVICE SECURITY SERV							1					_, _	
P.O. BOX 102, BOHEMIA, NY		- •						SECURITY SERV	VICES		13	7.2	58.
MSP NETWORKS, 1111 BROADH		OA	D,	S'	ΤE		f						
202, FARMINGDALE, NY 1173			•	_	_		-	IT SERVICES			13	2,4	15.
CSC BUILDING SOLUTIONS							f						
40-15 150TH STREET, 2F, F	LUSHING	,	NY	1	13	58	k	CUSTODIAL SE	RVICES		12	1,2	90.

Form 990 (2022)

<u>117,650.</u>

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

KENCAL MAINTENANCE CORPORATION

\$100,000 of compensation from the organization

399 KNOLLWOOD RD, WHITE PLAINS, NY 10603

REPAIRS & MAINT.

Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
			_	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
υυ	1 a	Federated campaigns 1a					
ant		Membership dues 1b					
2 5		Fundraising events 1c					
fts,							
ig je			1,618,234.				
Sir		3 \ / <del>     </del>	1,010,254.				
utio	т	All other contributions, gifts, grants, and	160,910.				
들됨		similar amounts not included above 1f	100,910.				
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions included in lines 1a-1f		1 770 144			
<u>0</u> <u>8</u>	h	Total. Add lines 1a-1f		1,779,144.			
			Business Code	00.010.056	00040056		
e S	2 a		611110	29,810,056.	29810056.		
e ≧	b	GOV'T PER-PUPIL FACILITIES	611110	5,035,535.	5,035,535.		
Program Service Revenue	C	:					
ev ev	C	d					
60 H	e						
Ā	f	All other program service revenue					
	ç	Total. Add lines 2a-2f		34,845,591.			
	3	Investment income (including dividends, inter-	est, and				
		other similar amounts)		81,323.			81,323.
	4	Income from investment of tax-exempt bond	oroceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	h	Less: cost or other basis					
<u>a</u>	-	and sales expenses <b>7b</b>					
ther Revenue		Gain or (loss) 7c					
ě		Net gain or (loss)					
౼		Gross income from fundraising events (not					
Ĕ∣	0 0						
0		contributions reported on line 1c). See					
		Part IV, line 18					
		D Less: direct expenses					
		Net income or (loss) from fundraising events	,				
		Gross income from gaming activities. See					
	9 8						
		Part IV, line 19  Less: direct expenses  9t					
			0				
		Net income or (loss) from gaming activities					
	10 a	a Gross sales of inventory, less returns					
	_	and allowances 10					
		Less: cost of goods sold 10	b				
$\rightarrow$	C	Net income or (loss) from sales of inventory	Desir Co.				
<u>2</u>		2124742 222	Business Code	25.22			0.500
e e	11 a	PARKING FEE	900099	25,000.			25,000.
Miscellaneous Revenue	b	<b></b>					
Sel Se	C						
Mis		d All other revenue					
	e	e Total. Add lines 11a-11d		25,000.	_		
	12	Total revenue. See instructions		36,731,058.	34845591.	0.	106,323.

232009 12-13-22

Form **990** (2022)

	990 (2022) GROWING UP (	<u>GREEN CHARTEI</u> <b>9S</b>	R SCHOOLS	81-09	91132 Page IU
Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon			,, ,,	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations		·		•
	and domestic governments. See Part IV, line 21				
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,	<b>- - - - - - - - - -</b>	404 500	440.055	40.60=
	trustees, and key employees	563,208.	424,608.	118,975.	19,625.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	20 214 472	10 216 600	1 074 401	102 270
7	Other salaries and wages	20,314,473.	18,316,680.	1,874,421.	123,372.
8	Pension plan accruals and contributions (include	251 450	226 224	22 247	1 070
_	section 401(k) and 403(b) employer contributions)	251,459. 2,903,950.		23,247. 271,405.	1,978. 20,655.
9	Other employee benefits	1,678,035.	1,509,270.	156,830.	11,935.
10	Payroll taxes	1,070,033.	1,309,270.	130,030.	11,933.
11	Fees for services (nonemployees):				
	Management	117,855.		117,855.	
	Legal Accounting	68,122.		68,122.	
	Lobbying	00/1221		00/1220	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
3	column (A), amount, list line 11g expenses on Sch 0.)	871,766.	373,571.	486,085.	12,110.
12	Advertising and promotion	199,328.	184,870.	14,458.	
13	Office expenses	465,652.	404,019.	61,633.	
14	Information technology	344,184.	309,589.	34,595.	
15	Royalties				
16	Occupancy	8,739,108.	7,854,781.	884,327.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	F 4 7 4 7 2	400 204	FF 000	
22	Depreciation, depletion, and amortization	547,473. 257,797.	492,384. 231,820.	55,089. 25,977.	
23	Insurance	451,191.	231,020.	25,911.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	STUDENT SERVICES	908,256.	896,631.	11,625.	
b	REPAIRS & MAINTENANCE	174,718.	157,028.	17,690.	
С	SUBSCRIPTIONS	152,995.	137,610.	15,385.	
d	FOOD SERVICE	35,668.	35,668.		
е	All other expenses	24,174.	24,174.	4 005 510	100 555
25	Total functional expenses. Add lines 1 through 24e	38,618,221.	34,190,827.	4,237,719.	189,675.
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined				

Form **990** (2022)

Check here

educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Pai	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	2,427,983.	1	3,408,066.
	2	Savings and temporary cash investments	1,077,716.	2	5,069,924.
	3	Pledges and grants receivable, net	454,107.	3	1,135,824.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ğ	9	Prepaid expenses and deferred charges	380,410.	9	1,115,880.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation  10a 5,502,410. 10b 1,955,327.			
	b	Less: accumulated depreciation 1,955,327.	2,242,780.	10c	3,547,083.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	554.050	14	101 222 025
	15	Other assets. See Part IV, line 11	554,059.	15	101,333,835.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	7,137,055.	16	115,610,612.
	17	Accounts payable and accrued expenses	1,030,231.	17	2,685,385.
	18	Grants payable	1 260	18	1 074 200
	19	Deferred revenue	1,368.	19	1,074,390.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%		00	
<u>E</u>	00	controlled entity or family member of any of these persons		22	
	23 24	Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		24	
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
			2,633,094.	25	103,764,574.
	26	Total liabilities. Add lines 17 through 25	3,664,693.	26	107,524,349.
		Organizations that follow FASB ASC 958, check here	0,002,000		
es		and complete lines 27, 28, 32, and 33.			
auc	27	Net assets without donor restrictions	3,472,362.	27	8,086,263.
Bala	28	Net assets with donor restrictions	, ,	28	,
P		Organizations that do not follow FASB ASC 958, check here			
Ξ		and complete lines 29 through 33.			
ğ	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	3,472,362.	32	8,086,263.
	33	Total liabilities and net assets/fund balances	7,137,055.	33	115,610,612.
	100	Total habilities and net assets/fund palarites	.,_5,,055.	55	Form <b>990</b>

Form 990 (2022)

#### **SCHEDULE A**

(Form 990)

Total

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.

2022

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

GROWING UP GREEN CHARTER SCHOOLS 81-0991132 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box 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). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990) 2022 GROWING UP GREEN CHARTER SCHOOLS 81-0991

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

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

Section A. Public Support		<u> </u>				
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and	(4) = 2 · 2	(,	(-,	(,	(-,	(4)
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,						
column (f)						
6 Public support. Subtract line 5 from line 4.						
Section B. Total Support				1		
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4			, ,		, ,	,,
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources						
9 Net income from unrelated business						
activities, whether or not the						
business is regularly carried on						
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities,	etc (see instruction	ons)			12	
<b>13</b> First 5 years. If the Form 990 is for the						
organization, check this box and <b>sto</b>	_					
Section C. Computation of Publi						
14 Public support percentage for 2022 (I			column (f))		14	%
15 Public support percentage from 2021		•	.,,		15	%
16a 33 1/3% support test - 2022. If the					nore, check this box	
stop here. The organization qualifies						
b 33 1/3% support test - 2021. If the						
and <b>stop here.</b> The organization qual	-					
17a 10% -facts-and-circumstances test						
and if the organization meets the fact						
meets the facts-and-circumstances te						
b 10% -facts-and-circumstances test	-	•	* **	-	17a. and line 15 is	 10% or
more, and if the organization meets the	•				•	. = , 0 0.
organization meets the facts-and-circ				-		
18 Private foundation. If the organization		-		• • •		
in the organization	L.L. HOL CHOOK a		, , . r . a, or 171	_, BOX 6		(Form 990) 2022

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

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

Se	ction A. Public Support	elow, please comp	Diete Fait II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1)	(12)	(5)====	(-7	(5) = 5 = 5	χ,
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(2) = 3 : 3	(2) 20:0	(0) = 0 = 0	(4) = 5 = 1	(0) = 0 = 0	(1)
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975					+	
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•		. —
	check this box and stop here	- O 1 D -					
	ction C. Computation of Publi						
	Public support percentage for 2022 (I		•	column (f))		15	%
	Public support percentage from 2021 ction D. Computation of Inves					16	%
	•			: 10!···-· (f)		147	0/
	Investment income percentage for 20					17	%
	Investment income percentage from					18	% 7 is not
198	a 33 1/3% support tests - 2022. If the					-41	
k	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the		-	•	• •		
	line 18 is not more than 33 1/3%, che	ck this box and <b>st</b>	t <b>op here.</b> The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14 19	a or 10h check th	nis hox and see in	structions	

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Schedule A (Form 990) 2022

## 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 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")? *If* "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).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- 8 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.
- **b** 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		
3a		
Sa		
3b		
Зс		
4a		
4b		
4c		
-10		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
9b		
9с		
10a		
,		
10b		Щ.

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Га	Gontinued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	<u>detail in</u> Part VI. tion B. Type I Supporting Organizations	11c		
Sec	tion B. Type i Supporting Organizations		1	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		'	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	l' I	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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	OI-		
•	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2-		
h	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in <b>Part VI.</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
	or ito supported organizations: [[-] fes.   describe    Fait VI the fole biaved by the organization in this regard.	UU		

e Discount claimed for blockage or other factors

emergency temporary reduction (see instructions).

(explain in detail in Part VI):

Sche	dule A (Form 990) 2022 GROWING UP GREEN CHARTER	R SCH	OOLS	81-0991132 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organ	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying All other Type III non-functionally integrated supporting organizations must		·	in Part VI). See instructions.
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		

2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,		
	see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Minimum Asset Amount (add line 7 to line 6) tion C - Distributable Amount	8	Current Year
		8	Current Year
	tion C - Distributable Amount	1 2	Current Year
	tion C - Distributable Amount  Adjusted net income for prior year (from Section A, line 8, column A)	1	Current Year
Sec	tion C - Distributable Amount  Adjusted net income for prior year (from Section A, line 8, column A)  Enter 0.85 of line 1.	1 2	Current Year
Sec	tion C - Distributable Amount  Adjusted net income for prior year (from Section A, line 8, column A)  Enter 0.85 of line 1.  Minimum asset amount for prior year (from Section B, line 8, column A)	1 2 3	Current Year

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

Schedule A (Form 990) 2022

instructions).

Schedule A (Form 990) 2022

e Excess from 2022

# Schedule B

(Form 990)

# **Schedule of Contributors**

GROWING UP GREEN CHARTER SCHOOLS

Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

Schedule B (Form 990) (2022)

Department of the Treasury Internal Revenue Service

Name of the organization

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

**Employer identification number** 

81-0991132

Organization type (check one):					
Filers of	:	Section:			
Form 99	0 or 990-EZ	$\overline{X}$ 501(c)( $\overline{3}$ ) (enter number) organization			
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation			
		527 political organization			
Form 99	0-PF	501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
	nly a section 501(c)(	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
X	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special	Rules				
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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.				
	year, contributions is checked, enter h purpose. Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., nplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year\$			
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 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 grequirements of Schedule B (Form 990).			

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

Schedule B (Form 990) (2022)

Name of organization Employer identification number

# GROWING UP GREEN CHARTER SCHOOLS

81-0991132

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		\$152,434.	Person X Payroll
(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
		\$	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 Oncash (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.)

Name of organization Employer identification number

# GROWING UP GREEN CHARTER SCHOOLS

81-0991132

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.) (d) Date received		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		<u> </u>		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
223/53 11-15			Schedule B (Form 990) (2022)	

Page 4

Name of organization

Employer identification number

GROWING UP GREEN CHARTER SCHOOLS

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year

from	m any one contributor. Complete columns (a) the pleting Part III, enter the total of exclusively religious, chase duplicate copies of Part III if additional spiral.	rough <b>(e) and</b> the following line entiritable, etc., contributions of <b>\$1,000 or I</b>	ess for the year. (Enter this info. once.)		
o. n : I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee		
o. n I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee		
lo. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, and	(e) Transfer of gift	nnsfer of gift  Relationship of transferor to transferee		
o.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
- [ -		(e) Transfer of gift	t		
	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

GROWING UP GREEN CHARTER SCHOOLS

**Employer identification number** 81-0991132

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ar Funds or Ad	ccounts. Complete if the
	organization anomored 100 on 10111 000, 1 arriv, into	(a) Donor advised fun	ds	(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 advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any oth	er purpose conferi	ring
	impermissible private benefit?			
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on	Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education) Pre	servation of a histo	orically important land area
	Protection of natural habitat	Pre	servation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution	in the form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired a			
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or termin	nated by the organ	ization during the tax
	year			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the peri	• • •	nandling of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and en	forcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing	na conservation ea	sements during the year
•	Amount of expenses incurred in monitoring, inspecting, harris	ing or violations, and emoron	ig conscivation ca	sements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of s	section 170(h)(4)(B)	(i)
_	and section 170(h)(4)(B)(ii)?	•		
9	In Part XIII, describe how the organization reports conservation			
	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 Treasu	res, or Other S	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 bal	ance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or re	esearch in furthera	nce of public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describe	s these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue stat	ement and balance	e sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or rese	arch in furtherance	e 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 financial gain,	provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these items	s:	
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2022

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Pai	rt III Organizations Maintain	ing Coll	lections of Ar	rt, Histo	orical Tre	easures, oi	r Other :	Similar <i>A</i>	ssets	(contir	nued)	
3	Using the organization's acquisition, a	ccession,	and other record	ds, check	any of the t	following that	make sigi	nificant use	of its			
	collection items (check all that apply):											
а	Public exhibition			d 🔲	Loan or exc	hange progra	am					
b	Scholarly research		6	е 🗌	Other							
С	Preservation for future generation	ons										
4	Provide a description of the organizati	on's colle	ctions and explai	n how th	ey further th	ne organizatio	n's exemp	t purpose	in Part X	III.		
5	During the year, did the organization s	olicit or re	eceive donations	of art, his	storical treas	sures, or othe	er similar a	ssets				
	to be sold to raise funds rather than to	be maint	tained as part of t	the organ	ization's co	llection?				Yes		No
Pai	rt IV Escrow and Custodial A									ne 9, or		
	reported an amount on Form 9											
1a	Is the organization an agent, trustee, o	custodian	or other intermed	diary for d	contribution	s or other ass	ets not in	cluded				
	on Form 990, Part X?								🔲	Yes		No
b	If "Yes," explain the arrangement in Pa											
									1	Amount	t	
С	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f								1f				
2a	Did the organization include an amour							?		Yes		No
b	If "Yes," explain the arrangement in Pa	art XIII. Ch	neck here if the ex	xplanatio	n has been	provided on F	Part XIII					
Pai	rt V Endowment Funds. Con	nplete if th	ne organization ar	nswered	"Yes" on Fo	orm 990, Part	IV, line 10					
			a) Current year		rior year	(c) Two year		d) Three yea	rs back	(e) Four	years	back
1a	Beginning of year balance											
b												
С	Net investment earnings, gains, and lo											
d	Grants or scholarships											
е	011 111 1 1 1 1111											
	and programs											
f												
g	End of year balance											
2	Provide the estimated percentage of the		t year end balanc	e (line 1c	, column (a	)) held as:	•					
а	B 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			%	,, , , ,	••						
b			%	_								
С	Term endowment	%										
	The percentages on lines 2a, 2b, and 2	 2c should	equal 100%.									
За	Are there endowment funds not in the	possessi	on of the organiza	ation tha	t are held ar	nd administer	ed for the					
	organization by:										Yes	No
	(i) Unrelated organizations									3a(i)		
	(ii) Related organizations									3a(ii)		
b	If "Yes" on line 3a(ii), are the related or	rganizatio	ns listed as requi	red on So	chedule R?					3b		
4	Describe in Part XIII the intended uses	of the or	ganization's endo	wment f	unds.							
Pai	rt VI Land, Buildings, and Eq	uipmer	nt.									
	Complete if the organization ar	nswered "	Yes" on Form 990	0, Part IV	, line 11a. S	See Form 990	, Part X, lir	ne 10.				
	Description of property		(a) Cost or o	other	(b) Cost	t or other	(c) Acc	cumulated	(	( <b>d)</b> Bool	k valu	е
			basis (investr	ment)	basis	(other)	depr	eciation				
1a	Land											
b												
С						6,595.	1,0	85,813	3. <u>1</u>	.,830	0,7	82.
d			1			4,011.	8	69,514	1.	.,554	4,4	97.
е	Other		1		16	1,804.				163	1,8	04.
Tota	Add lines 1a through 1e (Column (d)	must serv	ol Form 000 Dort	V colum	n (D) line 1	00.)			3	.54	7.0	83.

Schedule D (Form 990) 2022

0011000000	(1 01111 000) = 0		
Part VII	Investments -	Other Se	ecurities

Part VIII III Vestille III.5 - Other Securities.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(9)		

(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

#### Part IX Other Assets.

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

(a) Description	(b) Book value
	· · ·
(1) ROU ASSET	99,729,973.
(2) DUE FROM FRIENDS OF GROWING UP GREEN CHARTER SCHOOL	1,067,190.
(3) SECURITY DEPOSIT	415,250.
(4) OTHER ASSETS	121,422.
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	101,333,835.

#### Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITIES	103,764,574.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	103,764,574.

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

Schedule D (Form 990) 2022

GKOMING	UP	GKEEM	CUAKIEK	SCHOOLS	

Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				26 500 245
1				1	36,782,347.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		22 24 =		
а	Net unrealized gains (losses) on investments		39,347.		
b	Donated services and use of facilities				
С	Recoveries of prior year grants		11 040		
d	Other (Describe in Part XIII.)	2d	11,942.		F1 000
е	Add lines 2a through 2d			2e	51,289. 36,731,058.
3	Subtract line <b>2e</b> from line <b>1</b>			3	36,/31,058.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			0
C	Add lines 4a and 4b			4c	36,731,058.
Dai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.)  † XII   Reconciliation of Expenses per Audited Financial Statemen	nte Witk	Evnences per E	5 Potur	30,/31,030.
Pai		iitə miri	i Expenses per n	vetur	11.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				20 021 201
1	Total expenses and losses per audited financial statements			1	38,931,281.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 . 1			
a	Donated services and use of facilities				
b	Prior year adjustments				
С.	Other losses		313,060.		
d	Other (Describe in Part XIII.)				313 060
e	Add lines 2a through 2d			2e 3	313,060. 38,618,221.
3	Subtract line 2e from line 1			3	30,010,221.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-			
a	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)			4-	0
	Add lines 4a and 4b			4c 5	38,618,221.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  † XIII Supplemental Information.			5	30,010,221.
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V lines 1h	and 2h: Part V line 4	· Dort `	V line 2: Part VI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit			, rait i	A, IIIIC Z, I alt AI,
111162	zu and 45, and Part XII, lines zu and 45. Also complete this part to provide any addi-	lionai imon	nation.		
PAF	RT X, LINE 2:				
THE	SCHOOL RECOGNIZES THE EFFECT OF INCOME TA	X POS	ITIONS ONLY	IF	THOSE
POS	SITIONS ARE MORE LIKELY THAN NOT TO BE SUST	AINED	. MANAGEMEN	т н	AS
DET	ERMINED THAT THE SCHOOL HAD NO UNCERTAIN T	AX PO	SITIONS THA	T W	OULD
REÇ	UIRE FINANCIAL STATEMENT RECOGNITION OR DI	SCLOS	URE. THE SC	HOO	L IS NO
	•				
LOI	IGER SUBJECT TO EXAMINATIONS BY THE APPLICA	BLE T	AXING JURIS	DIC	TIONS FOR
YE?	ARS PRIOR TO JUNE 30, 2020.				
	·				
PAF	RT XI, LINE 2D - OTHER ADJUSTMENTS:				
GA]	N ON TRANSFER OF LEASES				11,942.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

Schedule D (Form 990) 2022

#### **SCHEDULE E**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schools**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

GROWING UP GREEN CHARTER SCHOOLS

 $Employer\ identification\ number \\ 81-0991132$ 

		0T-0337	LIJZ	
Pa	tl		VEO	L NO
_			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,		v	
_	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,		х	
_	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarsh	nips? 2	<b>├</b> ^	
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	
	AS A PUBLIC SCHOOL, SUBJECT TO OPEN ENROLLMENT, THE CHARTER		<u> </u>	
	SCHOOL IS NOT SUBJECT TO THE SPECIFIC GUIDELINES SET FORTH I	<u>,                                    </u>		
	REV. PROC. 75-50 AND AS MODIFIED BY REV. PROC. 2020-23.	<u>.,                                    </u>		
	KEV: TROC: 75 50 AND AD MODIFIED BI REV: TROC: 2020 25:			
		_		
Ļ	Does the organization maintain the following?	_		
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a		х
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis			X
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	·   40		
٠	with student admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?			
_	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	SEE PART II			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	<u>5a</u>		X
b	Admissions policies?	<u>5b</u>		X
С	Employment of faculty or administrative staff?	<u>5c</u>		X
d	Scholarships or other financial assistance?	5d		X
е	Educational policies?	<u>5e</u>		X
f	Use of facilities?	5f		X
	Athletic programs?			X
h	Other extracurricular activities?	<u>5h</u>		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
àa	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
	racial nondiscrimination? If "No," explain on Part II	7	X	1

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

Schedule E (Form 990) 2022

13390671

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

Attach to Form 990.

ZUZZ

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

GROWING UP GREEN CHARTER SCHOOLS

Employer identification number 81-0991132

Tax 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	Pa	art I Questions Regarding Compensation			
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.    First-class or charter travel				Yes	No
First-class or charter travel	1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
Travel for companions		Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
Tax indemnification and gross-up payments 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 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?  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 committee Written employment contract Independent compensation consultant Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee  4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:  a Receive a severance payment or change-of-control payment?  4 A X  b Participate in or receive payment from a supplemental nonqualified retirement plan?		First-class or charter travel Housing allowance or residence for personal use			
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  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 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  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:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4 Dring 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:  A Participate in or receive payment from a supplemental nonqualified retirement plan?		Travel for companions Payments for business use of personal residence			
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  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 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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  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:  a Receive a severance payment or change-of-control payment?  4 A X  b Participate in or receive payment from a supplemental nonqualified retirement plan?		Tax indemnification and gross-up payments Health or social club dues or initiation fees			
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain  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?  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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  Approval by the board or compensation committee  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:  a Receive a severance payment or change-of-control payment?  4a X  b Participate in or receive payment from a supplemental nonqualified retirement plan?		Discretionary spending account Personal services (such as maid, chauffeur, chef)			
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain  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?  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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  Approval by the board or compensation committee  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:  a Receive a severance payment or change-of-control payment?  4a X  b Participate in or receive payment from a supplemental nonqualified retirement plan?					
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?  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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  X Approval by the board or compensation committee  4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization:  a Receive a severance payment or change-of-control payment?  4 A X  b Participate in or receive payment from a supplemental nongualified retirement plan?  4 A X	b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?  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.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  Approval by the board or compensation committee  During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization:  Receive a severance payment or change-of-control payment?  A Participate in or receive payment from a supplemental nonqualified retirement plan?		reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
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.  Compensation committee  Independent compensation consultant  Compensation survey or study  X Form 990 of other organizations  Approval by the board or compensation committee  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:  Receive a severance payment or change-of-control payment?  A Example 1	2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.  Compensation committee  Independent compensation consultant  Compensation survey or study  X Approval by the board or compensation committee  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:  Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?  Let Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.  Compensation committee  Independent compensation consultant  Compensation survey or study  X Approval by the board or compensation committee  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:  Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?  Let Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
establish compensation of the CEO/Executive Director, but explain in Part III.  Compensation committee  Independent compensation consultant  Tompensation survey or study  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:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization:  4 A X  4 A X  4 A X	3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
Compensation committee  Independent compensation consultant  X Form 990 of other organizations  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:  Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?  Written employment contract  Compensation survey or study  Approval by the board or compensation committee		CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
Independent compensation consultant  X Form 990 of other organizations  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:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  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:  4 A X  5 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:		establish compensation of the CEO/Executive Director, but explain in Part III.			
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:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4 X		Compensation committee Written employment contract			
<ul> <li>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:</li> <li>a Receive a severance payment or change-of-control payment?</li> <li>b Participate in or receive payment from a supplemental nonqualified retirement plan?</li> <li>4b X</li> </ul>					
organization or a related organization:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4b X		X Approval by the board or compensation committee			
organization or a related organization:  a Receive a severance payment or change-of-control payment?  b Participate in or receive payment from a supplemental nonqualified retirement plan?  4b X					
<ul> <li>a Receive a severance payment or change-of-control payment?</li> <li>b Participate in or receive payment from a supplemental nonqualified retirement plan?</li> <li>4a X</li> <li>b X</li> </ul>	4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
<ul> <li>a Receive a severance payment or change-of-control payment?</li> <li>b Participate in or receive payment from a supplemental nonqualified retirement plan?</li> <li>4a X</li> <li>b X</li> </ul>		organization or a related organization:			
b Participate in or receive payment from a supplemental nonqualified retirement plan?	а	Receive a severance payment or change-of-control payment?	<u>4a</u>	<u> </u>	<u>X</u>
	b				X
o vanispaio menerali populari nemana ana aquiny successiva nemana agentina	С		4c		Х
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only coation E04(a)(2) E04(a)(4) and E04(a)(00) agranizations must complete lines E.O.		Only continue 504(a)(2), 504(a)(4), and 504(a)(00) arguminations must complete lines 5.0			
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	5				
contingent on the revenues of:	_		E0		x
a The organization?  5a X  b Appreciated examination?	a h				X
b Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	D	•	30		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	6	·			
contingent on the net earnings of:	U				
	•		62		х
o V					X
b Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	J	•	00		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7	,			
	•		7		х
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	8				
	-		8		х
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9				
Regulations section 53.4958-6(c)?	-		9		

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

Schedule J (Form 990) 2022

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-2 and/or 1099-MISC and/or 1099-NEC compensation		(C) Retirement and 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) MATTHEW GREENBERG (	(i)	411,286.	0.	0.	5,800.	1,024.	418,110.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(2) JENNIFER SLUTAK	(i)	176,070.	0.	0.	3,557.	13,893.	193,520.	0.
SCHOOL LEADER	ii)	0.	0.	0.	0.	0.	0.	0.
(3) NANCY WONG	(i)	157,846.	0.	0.	3,160.	10,685.	171,691.	0.
DIRECTOR OF ASSESSMENT	ii)	0.	0.	0.	0.	0.	0.	0.
(4) ANDREW WINTNER	(i)	127,683.	0.	0.	2,921.	32,331.	162,935.	0.
SCHOOL LEADER	ii)	0.	0.	0.	0.	0.	0.	0.
(5) MAYA DENNIS	(i)	134,059.	0.	0.	0.	20,294.	154,353.	0.
DIRECTOR OF CURR. & INSTRUCTION	ii)	0.	0.	0.	0.	0.	0.	0.
(	(i)							_
(i	ii)							_
(	(i)							_
(i	ii)							
(	(i)							
	ii)							
	(i)							
(i	ii)							
	(i)							
	ii)							
(	(i)							
	ii)							
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	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
(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.

# SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

GROWING UP GREEN CHARTER SCHOOLS

Employer identification number 81-0991132

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

INTERDISCIPLINARY ACADEMIC FOUNDATION, KNOWLEDGE OF SUSTAINABILITY, AND

STRONG SENSE OF SELF SETS THEM APART AS LEADERS OF THE FUTURE. GROWING

UP GREEN CHARTER SCHOOL AND GROWING UP GREEN CHARTER SCHOOL II MERGED;

THE MERGER BECAME EFFECTIVE JULY 1, 2022.

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

THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND THEN REVIEWED BY
THE EXECUTIVE DIRECTOR, CHARTER SCHOOL BUSINESS MANAGEMENT ("CSBM") AND THE
FINANCE COMMITTEE OF THE ORGANIZATION. A COMPLETE COPY IS THEN FORWARDED TO
ALL MEMBERS OF THE GOVERNING BODY AND ALL QUESTIONS AND ISSUES ARE
ADDRESSED AND RESOLVED PRIOR TO FILING.

FORM 990, PART I, QUESTION 5, AND PART V, QUESTION 2A:

THE ORGANIZATION CONTRACTED WITH A PROFESSIONAL EMPLOYER ORGANIZATION

(PEO) FOR SERVICES, INCLUDING BUT NOT LIMITED TO, PAYROLL, TIMEKEEPING,

EMPLOYEE BENEFITS, HR ADMINISTRATION AND WORKFORCE REGULATORY

COMPLIANCE NEEDS. AS THE EMPLOYER OF RECORD FOR TAX PURPOSES, FORMS W-2

AND W-3 ARE ISSUED BY THE PEO AND FILED UNDER THE PEO'S FEDERAL EIN.

IN THIS CO-EMPLOYMENT ARRANGEMENT, THE ORGANIZATION IS THE COMMON LAW

EMPLOYER AND, ACCORDINGLY, COMPENSATION IS REPORTED ON FORM 990, PART

VII, SECTION A AND PART IX, LINES 5-10.

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

THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY APPLICABLE TO ALL

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page **2** 

Name of the organization

GROWING UP GREEN CHARTER SCHOOLS

81

Employer identification number 81-0991132

TRUSTEES, OFFICERS AND KEY EMPLOYEES (IF ANY). ALL APPLICABLE INDIVIDUALS

ARE REQUIRED TO SIGN A CONFLICT OF INTEREST AGREEMENT ANNUALLY, DISCLOSING

ANY POSSIBLE CONFLICT OF INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE

ALL MATERIAL FACTS TO THE TRUSTEES. A COMMITTEE WITH BOARD DELEGATED POWERS

DECIDES WHETHER A CONFLICT OF INTEREST EXISTS. AFTER DISCLOSURE OF ALL

MATERIAL FACTS, AND AFTER ANY DISCUSSIONS WITH THE INTERESTED PERSON,

HE/SHE SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION

OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING

DISINTERESTED TRUSTEES OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF

INTEREST EXISTS. THE BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE

OF THE DISINTERESTED TRUSTEES OR COMMITTEE MEMBERS WHETHER A CONFLICT

EXISTS. DELIBERATION AND DECISIONS ARE RECORDED IN THE MINUTES OF THE

BOARD. ANNUAL DISCLOSURE STATEMENTS ARE REVIEWED ANNUALLY BY THE AUDIT

COMMITTEE.

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

THE PROCESS FOR DETERMINING COMPENSATION FOR THE ORGANIZATION'S EXECUTIVE

DIRECTOR INCLUDES THE USE OF COMPARABLE DATA SUCH AS THE FORM 990'S OF

OTHER ORGANIZATIONS. THE BOARD OF DIRECTORS REVIEWS THE COLLECTED DATA AND

VOTES ON THE COMPENSATION. THE PROCESS LAST OCCURRED IN 2023, AND IS

DOCUMENTED IN THE MINUTES OF THE BOARD.

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

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS

REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. IN ADDITION, THE

FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ARTICLES OF

INCORPORATION AND BY-LAWS ARE ALSO AVAILABLE UPON REQUEST.

Schedule O (Form 990) 2022 Page **2** 

Name of the organization  GROWING UP GREEN CHARTER SCHOOLS	Employer identification number 81-0991132
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON DISPOSAL OF PROPERTY AND EQUIPMENT	-313,060.
ACQUISITION OF NET ASSETS PURSUANT TO MERGER OF RELATED	
CHARTER SCHOOL	6,762,835.
GAIN ON TRANSFER OF LEASES	11,942.
TOTAL TO FORM 990, PART XI, LINE 9	6,461,717.
FORM 990, PART XII, LINE 2C:	
THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS IS RESPONS	IBLE FOR THE
OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STA	TEMENTS AND
THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HA	S NOT CHANGED
FROM THE PRIOR YEAR.	