			EXTENDED TO MAY 15, 2023							
	Ω	00	Return of Organization Exempt Fron	n Income Tax	OMB No. 1545-0047					
For	m J	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		2021					
			Do not enter social security numbers on this form as it m	ay be made public.	Open to Public					
Depa Inter	artment nal Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the la		Inspection					
ΑΙ	For th	e 2021 calend	ar year, or tax year beginning $ m JUL1$, 2021 and ending	<u>J</u> UN 30, 2022						
B	Check if applicab	le: C Name o	forganization	D Employer identificat	ion number					
	Addre	ess WASH	INGTON GLOBAL PUBLIC CHARTER SCHOOL							
	Name	pe Doing b	usiness as	47-1118215	;					
	Initial returr	Number	and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone number						
	Final return	17	SCHOOL STREET SW	202-796-24						
	termii ated	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	6,197,912.					
	Amer		INGTON, DC 20024	H(a) Is this a group retur						
	Appli tion pendi	^{ca-} F Name a	nd address of principal officer: ELIZABETH TORRES	for subordinates?	Yes 🔟 No					
		S	CHOOL STREET SW, WASHINGTON, DC 2002		ded? Yes No					
				527 If "No," attach a list	. See instructions					
			INGTONGLOBAL.ORG	H(c) Group exemption n						
			X Corporation Trust Association Other ► L	/ear of formation: 2014 M S	tate of legal domicile: DC					
Pa	art I	Summary								
e	1	Briefly describ	e the organization's mission or most significant activities: A COMMUN	TTY SCHOOL OPEN	I TO ALL					
ano			SCHOOL STUDENTS IN WASHINGTON, DC. IT		-					
Governance	2	Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a)								
ğ	3		9 8							
જ	4		al number of individuals employed in calendar year 2021 (Part V, line 2a) 5 al number of individuals employed in calendar year 2021 (Part V, line 2a) 5							
ties	5									
Activities &	6		of volunteers (estimate if necessary)		10					
Ac			d business revenue from Part VIII, column (C), line 12		0.					
	0	Net unrelated	business taxable income from Form 990-T, Part I, line 11	Prior Year	Current Year					
	8	Contributions	and grants (Part VIII, line 1h)	1,150,052.	1,435,658.					
Revenue	9			4,903,789.	4,761,923.					
Svel		0	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.					
ď	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	331.					
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,053,841.	6,197,912.					
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.					
	14		to or for members (Part IX, column (A), line 4)	0.	0.					
ŝ	40	•	compensation, employee benefits (Part IX, column (A), lines 5-10)	2,940,553.	3,083,358.					
Expenses	16a		indraising fees (Part IX, column (Δ), line 11e)	0.	18,000.					
épe	b		ing expenses (Part IX, column (D), line 25) \blacktriangleright 143, 349.							
Ш	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	2,333,857.	2,763,008.					
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,274,410.	5,864,366.					
	19	Revenue less	expenses. Subtract line 18 from line 12	779,431.	333,546.					
s or				Beginning of Current Year	End of Year					
Net Assets or Fund Balances	20	Total assets (I	Part X, line 16)	8,188,677.	8,473,525.					
t As Id B	21	Total liabilities	(Part X, line 26)	6,442,762.	6,394,064.					
I Pur	22		fund balances. Subtract line 21 from line 20	1,745,915.	2,079,461.					
_	art II	•								
	•		I declare that I have examined this return, including accompanying schedules and sta		lowledge and belief, it is					
true	, corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.						

Sign	Signature of officer		Date
Here	ELIZABETH TORRES, CEO		
	Type or print name and title		
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	MEENA BISHNOI	Meren Signature	5/12/2023 if pol480769
Preparer	Firm's name 🍃 JM&M		Firm's EIN ▶ 52–1853933
Use Only	Firm's address ⊾ 1730 RHODE ISLAN	D AVE, N.W., SUITE	800
	WASHINGTON, DC 2	0036	Phone no. 202 – 296 – 3306
May the IF	S discuss this return with the preparer shown abo	ove? See instructions	X Yes No
132001 12-0	2-21 LHA For Paperwork Reduction Act Note	ce, see the separate instructions.	Form 990 (2021)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2021) WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 Page 2
Pa	t III Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III
	TO DEVELOP ENTERPRISING AND COMPETITIVE GLOBAL CITIZENS THROUGH USING A RIGOROUS, INTERNATIONALLY-BASED ACADEMIC AND CULTURAL CURRICULUM
	THAT INTEGRATES PROJECT BASED-LEARNING, SERVICE LEARNING, TECHNOLOGY,
	AND LANGUAGE ACQUISITION.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses 4,951,229. including grants of \$) (Revenue \$ 4,762,254.)
	WASHINGTON GLOBAL IS A TUITION-FREE MIDDLE SCHOOL OPEN TO ALL STUDENTS
	IN WASHINGTON, D.C. THE SCHOOL OFFERS AN INTERNATIONAL, RESEARCH-BASED
	ACADEMIC PROGRAM TO DEVELOP STUDENTS COMPETITIVE ON THE GLOBAL LEVEL, READY FOR COLLEGE AND CAREERS. THE PROGRAM INCLUDES PROJECT-BASED
	LEARNING, SMALL LEARNING COMMUNITIES, TECHNOLOGY INSTRUCTION, ARTS, AND
	FOREIGN LANGUAGE CLASSES IN SPANISH AND KOREAN. WASHINGTON GLOBAL
	STRIVES FOR ALL STUDENTS TO BE HEALTHY AND ACTIVE THROUGH NUTRITION,
	PHYSICAL EDUCATION, ATHLETIC PROGRAMS, AND SERVICE LEARNING. THE
	SCHOOL'S FRAMEWORK CURRICULUM IS THE INTERNATIONAL BACCALAUREATE
	INTERNATIONAL MIDDLE YEARS CURRICULUM (IMYC), A RENOWN PROGRAM OF STUDY
	USED BY SCHOOLS THROUGHOUT THE WORLD.
4b	(Code:) (Expenses \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Other program convises (Describe on Schedule O.)
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 4,951,229.
	Form 990 (2021)
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Form 990 (2021)

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
5	during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	-		v
10	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
11	or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	10		- 23
••	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		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X X
-	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			x
16	or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15		15		x
16	The foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		x
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			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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		37	
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			x
L	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
U		24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to 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? 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			37
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а	"Vas " somelete Schedule L. Dert IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	200		
•	"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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
~=	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	555		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 21			
b		-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4-	х	
12000	(gambling) winnings to prize winners?	Eorm		<u> </u> (2021)
132004	4	1 UIII	500	(2021)
~		4		

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Form 990 (2021)

Part IV Checklist of Required Schedules (continued)

2021.05080 WASHINGTON GLOBAL PUBLIC CH 17546__1

021)	WASHINGTON	GLOBAL	PUBLIC	CHARTER	SCHOOL
Statements F	Regarding Other II	RS Filings a	and Tax Co	ompliance (co	ontinued)

Form 990 (2021)

Part V

					Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		49							
	filed for the calendar year ending with or within the year covered by this return	2a			x					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	<u> </u>					
•	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instruction					Х				
				3a 3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	רג)?	4a		X				
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		. ,	.		х				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c						
Ja	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-				х				
	any contributions that were not tax deductible as charitable contributions?			6a						
b	If "Yes," did the organization include with every solicitation an express statement that such contribu-		0							
_	were not tax deductible?			6b						
	Organizations that may receive deductible contributions under section 170(c).			_		v				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se			7a		X				
	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 w			_		v				
	to file Form 8282?			7c		X				
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10	_		v				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		<u> </u>				
	If the organization received a contribution of qualified intellectual property, did the organization file F			7g						
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h						
3	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	Э	_						
				8						
9	Sponsoring organizations maintaining donor advised funds.									
				9a						
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b						
D	Section 501(c)(7) organizations. Enter:	I								
	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
1	Section 501(c)(12) organizations. Enter:	1								
	Gross income from members or shareholders	11a								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	11b								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b								
	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									
	•	13b								
	Enter the amount of reserves on hand									
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b						
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune									
	excess parachute payment(s) during the year?			15		X				
	If "Yes," see the instructions and file Form 4720, Schedule N.									
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment	nt inco	me?	16		X				
	If "Yes," complete Form 4720, Schedule O.									
7	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	any								
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? \dots			17						
	If "Yes," complete Form 6069.									
	5 12-09-21 5				1 990					
40	502 793927 17546 2021.05080 WASHINGTON GLO	BAL	PUBLIC CH	175	o46_	1				

Form 990	(2021)
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WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215

Page 6

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			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year1a	9								
	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.									
b	Enter the number of voting members included on line 1a, above, who are independent 1b	3								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		x						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х						
6	Did the organization have members or stockholders?	6		X						
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
74		7a		x						
Ь	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	14								
D	never the state of the service head of	7b		x						
0	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	70		- 23						
8		0-	x							
a	The governing body?	8a	X							
	Each committee with authority to act on behalf of the governing body?	8b								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			37						
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X							
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done	12c	x							
13	Did the organization have a written whistleblower policy?	13	x							
14	Did the organization have a written document retention and destruction policy?	14	x							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
~	The organization's CEO, Executive Director, or top management official	15a	x							
a h				x						
D	Other officers or key employees of the organization	15b		- 11						
40.	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	10		x						
_	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?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed NONE									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) availa	able						
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	ncial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
	ELIZABETH TORRES - 202-796-2415									
	525 SCHOOL STREET SW, WASHINGTON, DC 20024									
132004	§ 12-09-21	Form	1 990	(202-						
	6			、 <u>-</u>						
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Form 990 (2021)	WASHINGTON	GLOBAL	PUBLIC	CHARTER	SCHOOL	47-1118215	Page 7					
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated												
Employees,	Employees, and Independent Contractors											
Check if Schedu	ule O contains a response	or note to an	y line in this Pa	art 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average	(do	not c	(C Pos heck	C) ition	l than	one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any	offi		unless person er and a direct				compensation from the	compensation from related organizations	amount of other compensation
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MISC/ 1099-NEC)	from the organization and related organizations
<pre>(1) ELIZABETH TORRES, ED.D. MEMBER AND CEO</pre>	40.00	x		x				166,130.	0.	12,134.
(2) HOWARD MEBANE PRINCIPAL	40.00					x		127,093.	0.	5,012.
(3) TERESA R. CURRISTINE, PH.D.	2.00									
CHAIR (4) ALEXANDRA ZEILER	2.00	X		X				0.	0.	0.
VICE-CHAIR	2.00	x		x				0.	0.	0.
(5) LINDA BROWN SECRETARY	2.00	x		x				0.	0.	0.
(6) CANDICE CLOOS HANEY	2.00									0
TREASURER (7) VANESSA HARVEY-LYKES	2.00	X		X				0.	0.	0.
MEMBER		x						0.	0.	0.
(8) CARLOS ARDILLA	2.00									•
MEMBER	2 00	X						0.	0.	0.
(9) DANIEL BREWER MEMBER UNTIL FEBRUARY 2022	2.00	x						0.	0.	0.
(10) SHANGLA JOSEPH MEMBER UNTIL SEPTEMBER 2021	2.00	x						0.	0.	0.
(11) NIKIA STEINER	2.00									
MEMBER AS OF SEPTEMBER 2021		X						0.	0.	0.
(12) KESHA HILARY MEMBER AS OF FEBRUARY 2022	2.00	x						0.	0.	0.
132007 12-09-21										Form 990 (2021)

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Form **990** (2021)

Form 990 (2021) WASHINGT	ON GLOBA	AL	ΡŪ	JBI	JI(<u> </u>	CH.	ARTER	SCHOOL	47-1	118	215	Pa	age 8
Part VII Section A. Officers, Directors, Trus		ploy	vees			ghe	st C			es (continued)				
(A) Name and title	(B) Average hours per week	box	not c , unle	Posi heck ss per d a d	ition ^{more} rson i	than is bot	h an	Repo compe	D) ortable ensation	(E) Reportable compensatio	on	an	(F) stimate nount o	
	(list any hours for related organizations below line)	tee or director	Institutional trustee	Officer		Highest compensated employee	Former	tl organ (W-2/109	om he nization 99-MISC/ 9-NEC)	from relate organizatior (W-2/1099-MI 1099-NEC	ns SC/	com fr org and	other pensation the anizati d relate anizatio	e ion ed
	-													
		-												
1b Subtotal								29	3,223.		0.	1	7,14	46.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	II, Section A	· · · · · · · ·	·····			·····		29	0. 3,223.		0. 0.		,1	0.
2 Total number of individuals (including but r compensation from the organization ►	not limited to th	nose	liste	ed at	SOVe	e) wł	סר no r	eceived mor	re than \$100),000 of reportab	ble		Yes	2 No
3 Did the organization list any former officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> a	such individual											3		X
 4 For any individual listed on line 1a, is the s and related organizations greater than \$15 5 Did any person listed on line 1a receive or 	0,000? If "Yes,	" со	mple	ete S	Sche	edule	ə J i	for such indi	ividual			4	x	
rendered to the organization? <i>If</i> "Yes," con Section B. Independent Contractors												5		X
1 Complete this table for your five highest co the organization. Report compensation for									zation's tax		npens I			
(A) Name and business CHARTER SCHOOL INCUBATOR			VE VE					Des	(B) scription of s	services	С	(C Compe	;) nsatior	1
15938 DERWOOD ROAD, ROCKVILLE, MD 20855 EDOPS, 1611 CONNECTICUT AVE. NW, SUITE								FINANC	E, BID				9,54	
200, WASHINGTON, DC 2000	9							DATA S	UPPORT			11	0,9:	24.
2 Total number of independent contractors (\$100,000 of compensation from the organ	U U	not li	mite	d to		se lis 2	stec	d above) whe	o received n	nore than				
						-						Form	990 (2	2021)

132008 12-09-21

	n 990 (i			GLOBAL PI	UBLIC CHAR	TER SCHOOL	47-1118	215 Page 9
	rt VII		venue					
		Check if Schedule O c	contains a respoi	nse or note to an		II		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			1b					
s, G	с	Fundraising events	1c					
Gift			1d					
ns, šimi	е	Government grants (contr	ibutions) 1e	1,423,31	6.			
er S	f	All other contributions, gifts,	-	10.04				
Oth		similar amounts not included		12,34	2.			
ont nd (-					0		
aC	h	Total. Add lines 1a-1f			1,435,65	<u>.</u>		
•	•	PER PUPIL APP		Business Co		1.4,049,651		
Program Service Revenue	2 a b	PER PUPIL FAC		90009				
Ser		I HK TOTTH THE					•	
m ver	c d							
Be	e							
Pro	f	All other program service	revenue	_				
	q	Total. Add lines 2a-2f			▲,761,92	3.		
	3	Investment income (includ						
		other similar amounts)						
	4	Income from investment of						
	5	Royalties)	•			
			(i) Real	(ii) Persona	al			
	6 a	Gross rents	6a					
		Less: rental expenses \dots	6b					
		Rental income or (loss)	6c					
		Net rental income or (loss)			•	_		
	7 a	Gross amount from sales of	(i) Securiti	es (ii) Other				
		assets other than inventory	7a					
e	a	Less: cost or other basis and sales expenses	76					
evenue	•	Gain or (loss)	7b 7c					
ñ		Net gain or (loss)			•			
er I		Gross income from fundraisir		/	-			
Other I	• •	including \$	-					
		contributions reported on						
		Part IV, line 18		8a				
	b	Less: direct expenses		8b				
		Net income or (loss) from	-		►			
	9 a	Gross income from gamin						
		Part IV, line 19		9a				
		Less: direct expenses		9b				
		Net income or (loss) from		·				
	iu a	Gross sales of inventory, I		100				
	L	and allowances Less: cost of goods sold		10a 10b				
		Net income or (loss) from						
	U U		Sales of Inventor	Business Co	de			
Miscellaneous Revenue	11 a	REFUNDS & REI	MBURSEME			1. 331	•	
ane	b			-			1	
sells	c			-				
Aisc	d	All other revenue						
<		Total. Add lines 11a-11d			▶ 33			
	12	Total revenue. See instructio	ons		6,197,91	2.4,762,254	. 0.	
13200	9 12-09	-21						Form 990 (2021

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CU	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respons				
0 1	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
b, (8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
I	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				
5	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	194,226.	166,196.	23,229.	4,80
	Compensation not included above to disqualified				_,
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	2,478,633.	2,120,922.	296,440.	61,27
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	48,561.	41,553.	5,808.	1,20
	Other employee benefits	134,789.	115,337.	16,120.	3,33
	Payroll taxes	227,149.	194,367.	27,167.	5,61
	Fees for services (nonemployees):				
а	Management				
b	Legal	22,670.	19,398.	2,712.	56
С	Accounting	98,740.		98,740.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	18,000.			18,00
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	100 410	140 486		0 00
	column (A), amount, list line 11g expenses on Sch 0.)	170,419.	140,476.	27,646.	2,29
	Advertising and promotion	121 470	91 295	F0 041	
	Office expenses	131,479.	71,375.	58,041.	2,06
	Information technology	45,574.	38,996.	5,451.	Ι,ΙΖ
	Royalties	864,073.	739,373.	103,340.	21,36
		004,075.	133,313.	103,340.	21,50
	Travel Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest	381,097.	326,098.	45,578.	9,42
	Payments to affiliates	,	0_0,000		27
	Depreciation, depletion, and amortization	384,691.	329,175.	46,007.	9,50
	Insurance	33,563.	28,719.	4,014.	
	Other expenses. Itemize expenses not covered	-		· · · · · · · · · · · · · · · · · · ·	
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	DIRECT STUDENT EXPENSE	551,300.	551,300.		
b	OTHER STAFF RELATED EXP	60,422.	51,702.	7,226.	1,49
с	PROFESSIONAL DEVELOPMEN	10,472.	8,961.	1,252.	25
d	DUES, FEES AND FINES	8,508.	7,281.	1,017.	21
е	All other expenses				
	Total functional expenses. Add lines 1 through 24e	5,864,366.	4,951,229.	769,788.	143,34
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Form **990** (2021)

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Cash - non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net

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

S 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 9 Controlled entity or family member of any of these persons 5 9 Prepaid expenses and deferred charges 7 10 Land, buildings, and equipment: cost or other 10a 7, 527, 224. 10 Land, buildings, and equipment: cost or other 10a 7, 527, 224. 11 Investments - publicly traded securities 11 12 12 Investments - publicly traded securities 11 12 13 Investments - program-telated. See Part IV, line 11 13 14 Itagible assets 14 15 Other assets. Add lines 1 through 15 fmust equal line 33) 8, 188, 677. 16 8, 473, 525. 16 Grants payable 18 20 20 21 21 21 Exerver or cutodial accourt happet be and courder expenses 453, 806. 17 433, 156. 17 Accounts payable and accourd expenses 453, 806. 17 433, 156. 18 Getarts payable 18 20 </th <th></th> <th>4</th> <th>Accounts receivable, net</th> <th>258,993.</th> <th>4</th> <th>256,299.</th>		4	Accounts receivable, net	258,993.	4	256,299.
generating of analy member of any of these persons 5 in Lans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(b) 6 in Ventories for sale or use 7 is Inventories for sale or use 8 in Ventories for sale or use 129,120.9 is Inventories for sale or use 129,120.9 is Inventories for sale or use 100 is Land, buildings, and equipment: cost or other 100 is Complete Part VI of Schedule D 100 is Complete Part VI of Schedule D 101 is Complete Part VI of Schedule D 122 is Complete Part VI of Schedule D 122 is Complete Part VI of Schedule D 122 is Control assets. See Part IV, line 11 13 is Control assets. Add lines 1 through 15 (must equal line 33) 8,188,677.16 is Grants payable 19 is Control assets. Add lines 1 through 15 (must equal line 33) 8,188,677.16 is Grants payable 19 is Convor custodial account liability. Complete Part V of Schedule D 21 is Convor custodial account liability. Complete Part V of Schedule D 22 is Convor custodial account liability. Complete Part V of Schedule D		5				
6 Loans and other receivables from other disqualified persons (as defined under section 4958(i)(1)), and persons described in section 4958(i)(3)(8) 6 7 Notes and loans receivable, net 8 9 Prepaid expenses and deferred charges 129,120.9 10a Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D 10b 1,779,200.5 b Less: accumulated depreciation 10b 1,779,200.5 5,959,981.1 10c 5,748,024.1 11 Investments - publicly traded securities 11 12 11 11 12 Investments - commendated. See Part IV, line 11 13 13 14 13 Investments - publicly traded securities 50,000.15 50,000.15 50,000.0 16 Total assets. Add lines 1 through 15 (must equal line 33) 8,188,677.1 16 8,473,525.1 17 Accounts payable and account liabilities 20 21 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 23 5,988,956.23 5,960,906.906.906.906.906.906.906.906.906.906.			trustee, key employee, creator or founder, substantial contributor, or 35%			
generation under section 4958(h(1)), and persons described in section 4958(h(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 129,120.9 10a Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D 10a 11 Investments - publicly traded socurities 111 12 Investments - publicly traded socurities 111 13 Investments - program-related. See Part IV, line 11 13 14 Intagble assets 50,000.15 50,000.15 15 Total assets. Add lines 1 through 15 (must equal line 33) 8,188,677.16 8,473,525.1 16 Total assets. Add lines 1 through 15 (must equal line 33) 8,188,677.16 8,473,525.1 16 Total assets and other payables to 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 22 22 21 Eacrow or custodial account liability. Complete Part V of Schedule D 22 23 22 Eacrow or custodial account inability. Complete Par			controlled entity or family member of any of these persons		5	
gg 7 Notes and loans receivable, net 7 g Inventories for sale or use 8 9 Prepaid expenses and deferred charges 129,120.9 101,638.8 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 7,527,224.1 10b 11 Investments - publicly traded securities 111 12 11 12 Investments - publicly traded securities 111 12 11 Investments - publicly traded securities 11 12 11 Investments - publicly traded securities 11 12 12 Investments - publicly traded securities 11 12 13 Investments - publicly traded securities 50,000.16 50,000.16 16 Other assets. See Part IV, line 11 50,000.16 50,000.16 16 Total assets. Add lines 1 through 15 (must equal line 33) 8,188,677.16 8,473,525.1 17 Accounts payable and accrued expenses 453,806.17 433,158.1 19 Deferred revenue 18 19 21 Excore or stotal account liability. Complete Part V of Schedule D 22 </td <th>6</th> <td>Loans and other receivables from other disqualified persons (as defined</td> <td></td> <td></td> <td></td>		6	Loans and other receivables from other disqualified persons (as defined			
8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 129,120. 8 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 17,527,224. b Less: accumulated depreciation 10b 1,779,200. 5,959,981. 10c 5,748,024. 11 Investments - publicly traded securities 11 12 11 12 11 12 12 Investments - program-related. See Part IV, line 11 13 14 13 14 13 Investments - program-related. See Part IV, line 11 13 14 50,000. 15 50,000. 16 Total assets. See Part IV, line 11 13 14 50,000. 15 50,000. 17 Accounts payable and accrued expenses 453,806. 17 433,158. 18 10 Deferred revenue 19 20 20 21 20 21 21 Lass and other payables to any current or former officer, director, trust, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 5,988,956. 23 5,960,			under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 129,120. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D 10a 7,527,224. b Less: accumulated depreciation 10b 1,779,200. 5,959,981. 10c 5,748,024. 11 Investments - publicly traded securities 11 11 122 11 13 Investments - program-related. See Part IV, line 11 13 11 11 14 Intangible assets 14 50,000. 15 0,000. 16 Other assets. See Part IV, line 11 50,000. 15 0,000. 16 16 Other assets. Add lines 1 through 15 (must equal line 33) 8,188,677. 16 8,473,525. 17 Accounts payable and accrued expenses 453,806. 17 433,158. 18 Grants payable 19 20 20 20 20 21 Less and other payables to 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 22 22 2	Assets	7	Notes and loans receivable, net		7	
10a Land, buildings, and equipment: cost or other 10a 11a 11a 11a 11a 10a Land, buildings, and equipment: cost or other 10a 7,527,224. 10a 5,959,981. 10c 5,748,024. 11 Investments - publicly traded securities 111 11a 11a 11a 11a 12 Investments - other securities. See Part IV, line 11 13a 11a 11a 11a 13 Investments - other securities. See Part IV, line 11 13a 11a 11a 14 Intrangible assets. See Part IV, line 11 50,000. 15 50,000. 16 Total assets. Add lines 1 through 15 (must equal line 33) 8,188,677. 16 8,473,525. 17 Accounts payable and accrued expenses 453,806. 17 433,158. 18 Deferred revenue 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 22 Loans and other payables to unrelated third parties 22 5,988,956. 23 5,960,906. 23 Secured motrgages and notes payable		8			8	
basis. Complete Part VI of Schedule D 10a 7,527,224. 10b 10c 5,748,024. 11 Investments - publicly traded securities 11 10c 5,748,024. 12 Investments - oblight traded securities. 11 11 12 12 Investments - program-related. See Part IV, line 11 13 14 13 Investments - program-related. See Part IV, line 11 13 14 Intrastreats. Add lines 1 through 15 (must equal line 33) 8,188,6777.16 8,473,525. 17 Accounts payable 18 20 20 21 Leass and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member persons 22 23 Secured mortgages and notes payable to unrelated third parties 24 24 24 Other liabilities. Add lines 17 through 25 6,4422,7622.26 6,394,064. 24 Other liabilities. Add lines 17 through 25 6,4422,7622.26 6,394,064. 25 Other liabilities. Add lines 17 through 25 22,079,461. 40.28 0 25 Ca total li	Ř	9		129,120.	9	101,638.
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 14 15 Other assets. See Part IV, line 11 13 16 Total assets. Add lines 1 through 15 (must equal line 33) 8 , 188 , 677 16 8 , 473 , 525 . 17 Accounts payable and accrued expenses 453 , 806 . 17 4 33 , 158 . 19 Deferred revenue 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to 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 , 988 , 956 . 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 24 Other liabilities included on lines 17.24). Complete Part X of Schedule D 26 6 , 442 , 762 . 26 6 , 394 , 064 . 28 Total liabilititises. Add lines 17 through 25 <td< td=""><td rowspan="2"></td><th>10a</th><td></td><td></td><td></td><td></td></td<>		10a				
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 14 15 Other assets. See Part IV, line 11 13 16 Total assets. Add lines 1 through 15 (must equal line 33) 8 , 188 , 677 16 8 , 473 , 525 . 17 Accounts payable and accrued expenses 453 , 806 . 17 4 33 , 158 . 19 Deferred revenue 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to 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 , 988 , 956 . 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 24 Other liabilities included on lines 17.24). Complete Part X of Schedule D 26 6 , 442 , 762 . 26 6 , 394 , 064 . 28 Total liabilititises. Add lines 17 through 25 <td< td=""><th></th><td>basis. Complete Part VI of Schedule D 10a 7,527,224.</td><td></td><td></td><td></td></td<>			basis. Complete Part VI of Schedule D 10a 7,527,224.			
12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 50,000. 15 50,000. 16 Total assets. Add lines 1 through 15 (must equal line 33) 8,188,677. 16 8,473,525. 17 Accounts payable and accrued expenses 453,806. 17 433,158. 19 Deferred revenue 19 12 21 Escrow or custodial account liabilities 20 21 22 Loans and other payables to 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 22 23 Secured mortgages and notes payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 25 6,442,762. 26 6,394,064. 28 Net assets without donor restrictions 1,745,875. 27 2,079,461. 29 Capital stock or trust principal, or current funds 29 29 20,079,461. 29		b	Less: accumulated depreciation 1,779,200.	5,959,981.	10c	5,748,024.
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		აა		0,100,077.	33	

47-1<u>118215 Page 11</u> WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL

1

2

3

(B) End of year

1,438,235.

879,329.

(A) Beginning of year

1,331,100.

459,483.

1

2

3

Part X Balance Sheet

Form	1990 (2021) WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL	47-	-1118215	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,19	7,9	12.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,86	4,3	66.
3	Revenue less expenses. Subtract line 2 from line 1	3			46.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,74	5,9	15.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,07	9,4	61.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b				Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				

Form **990** (2021)

132012 12-09-21

SCH	EDU	LE	A
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Department of the Treasury

(Form 990)

<u>Total</u>

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.

OMB No. 1545-0047
2021
Open to Public Inspection

Intern	al Reve	enue Service		► Go to www.irs.go	v/Form990 for instructi	ons and t	he latest i	nformation.		Inspection
Name of the organization										identification number
		Deces			BAL PUBLIC C					7-1118215
	rt I				(All organizations must o				ns.	
	orgar				(For lines 1 through 12, o					
1					on of churches describe		on 170(b)(1)(A)(i).		
2	X				(Attach Schedule E (Forr					
3					anization described in s					
4				ation operated in co	onjunction with a hospita	l describe	d in sectio	on 170(b)(1)(A	(III). Enter	the hospital's name,
_		city, and stat								
5		0	-		ollege or university owne	d or opera	ited by a g	overnmental	unit descrit	bed in
~				Complete Part II.)	en a stal a se it al a a suite a sli a		70/1-1/41/41	M- A		
6 7	\square				mental unit described in				the general	public described in
'		-		omplete Part II.)	antial part of its support	rom a gov	remmenta		line general	public described in
8)(1)(A)(vi). (Complete Par	+ 11 \				
9					d in section 170(b)(1)(A)		ed in conii	inction with a	land-grant	college
Ū		-		-	culture (see instructions)				-	-
		university:		grant concego or agri				<i>,</i> , a.i.a otato o		
10		· · ·	ion that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	hip fees, a	nd gross receipts from
					ct to certain exceptions;					
		income and u	unrelated busi	ness taxable income	e (less section 511 tax) fr	om busine	esses acqu	uired by the o	rganization	after June 30, 1975.
		See section	509(a)(2). (Co	mplete Part III.)						
11		An organizat	ion organized a	and operated exclus	sively to test for public sa	afety. See	section 5	09(a)(4).		
12		An organizat	ion organized a	and operated exclus	sively for the benefit of, t	o perform	the function	ons of, or to c	arry out the	e purposes of one or
		more publicly	y supported or	rganizations describ	ed in section 509(a)(1) c	r section	509(a)(2).	See section	509(a)(3). 🤇	Check the box on
	_	lines 12a thro	ough 12d that	describes the type	of supporting organizatic	n and con	nplete line	s 12e, 12f, an	d 12g.	
а					supervised, or controlled	• •	•		••••••	
			-	., .	egularly appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting
	_			complete Part IV, S					<i>.</i>	
b				•	d or controlled in connec			-	., .	-
			-		panization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ропеа
-				-	, Sections A and C.	in connor		and functions	llu integrat	
С	L		-	•	ng organization operated s). You must complete				any integrat	ea with,
d			-		porting organization oper				orted organ	ization(e)
u	L				ization generally must sa				-	
			•		mplete Part IV, Section	-		•	a an attorn	
е					written determination fro				e II. Type III	
			-		onally integrated support				, . ,	
f	Ent		of supported of		, , , , , , , , , , , , , , , , , , , ,	0 0				
g	Pro	vide the follow	ving information	n about the support	ed organization(s).					
		(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10		anization listed ing document?	(v) Amount o	-	(vi) Amount of other
		organization	n		above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 Page 2 Schedule A (Form 990) 2021 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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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.						
_	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	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						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First 5 years. If the Form 990 is for th						
	organization, check this box and stor						
Sec	ction C. Computation of Publ						
	Public support percentage for 2021 (column (f))		14	%
15	Public support percentage from 2020) Schedule A, Part	II, line 14			15	%
	33 1/3% support test - 2021. If the o					nore, check this bo	ox and
	stop here. The organization qualifies	-					\blacktriangleright
b	33 1/3% support test - 2020. If the o		-				nis box
	and stop here. The organization qual	-					\blacktriangleright
17a	10% -facts-and-circumstances tes						or more,
	and if the organization meets the fact						
	meets the facts-and-circumstances te				•	en en en en game	
h	10% -facts-and-circumstances tes	-			•		10% or
~	more, and if the organization meets th	-					
	organization meets the facts-and-circ						
18	Private foundation. If the organization		•		• • • •		s
				,,,	.,		(Eorm 990) 2021

Schedule A (Form 990) 2021

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WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 Page 3 Schedule A (Form 990) 2021 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organiza	tion,
check this box and stop here				-		
Section C. Computation of Publi	c Support Pe					
15 Public support percentage for 2021 (li	ine 8, column (f), c	divided by line 13,	column (f))		15	%
16 Public support percentage from 2020	Schedule A, Part	III, line 15			16	%
Section D. Computation of Invest			•			
17 Investment income percentage for 20	21 (line 10c, colur	nn (f), divided by l	ine 13, column (f))		17	%
18 Investment income percentage from 2	2020 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2021. If the	organization did r				33 1/3% , and line	17 is not
more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiz	ation	
b 33 1/3% support tests - 2020. If the	organization did r	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%	, and
line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	anization qualifies	as a publicly supp	orted organizatior	
20 Private foundation. If the organization	<u>n did not check a</u>	box on line 14, 19	9a, or 19b, check t	his box and see in	structions	
132023 01-04-22					Schedule	A (Form 990) 2021
			15			

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Schedule A (Form 990) 2021

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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 ElN 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.)

132024 01-04-21

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

No

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 Page 5 Schedule A (Form 990) 2021 Part IV Supporting Organizations (continued)

			Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons? 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		
b	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			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations		_	

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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. <i>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.</i>
~	Did the second structure for the last off of a second structure is the structure the second structure structure is a second structure s

Did the organization operate for the benefit of any supported organization other than the supported 2 organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C.	Type II Supporting Organization	5

			Yes	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		

Section D. All Type III Supporting	ng 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		

Section 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 y	veatsee instructions)

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

c 🗋	\Box The organization supported a	governmental entity.	Describe in Part VI how	you supported a governme	ental entity (see instructions).
-----	-------------------------------------	----------------------	-------------------------	--------------------------	----------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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 these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- 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.

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3b Schedule A (Form 990) 2021

2a

2b

3a

Yes

No

Yes No

1

2

... .

17

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Schedule A (Form 990) 2021

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

			(optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3.	4		
Depreciation and depletion	5		
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		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d.	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035.	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
on C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, column A)	1		
Enter 0.85 of line 1.	2		
Minimum asset amount for prior year (from Section B, line 8, column A)	3		
Enter greater of line 2 or line 3.	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
	Add lines 1 through 3. Depreciation and depletion 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) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) on B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): Average monthly value of securities Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (<i>explain in detail in</i> Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035. Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) on 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) Enter greater of line 2 or line 3. Income tax imposed in prior year	Add lines 1 through 3. 4 Depreciation and depletion 5 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 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Son B - Minimum Asset Amount 7 Adyerage monthly value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities 1a Average monthly cash balances 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 Recoveries of prior-year distributions 7 Multiply line 5 by 0.035. 6 Recoveries of prior-year (from Section A, line 8, column A) 1 Enter 0	Add lines 1 through 3. 4 Depreciation and depletion 5 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 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 on B - Minimum Asset Amount (A) Prior Year Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities 1a Average monthly value of securities 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 Recoveries of prior-year distributions 7 Multiply line 5 by 0.035. 6

instructions).

Schedule A (Form 990) 2021

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Schedule A (Form 990) 2021

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 Page 7

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued	<u>d)</u>	
Secti	Current Year				
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exempt				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions (describe in Part VI). See instructions.		6		
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021		(iii) Distributable Amount for 2021
_1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.			_	
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

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Part VI		HINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 F n. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Part IV. Section A. lines 1. 2. 3b.	3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C
	line 1; Part IV, Section D, lines 2	and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part
	Section D, lines 5, 6, and 8; and (See instructions.)	Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
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2028 01-04-2	2	20 Schedule A (Form 990
	793927 17546	2021.05080 WASHINGTON GLOBAL PUBLIC CH 17546

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

202

Employer identification number

47-1118215

	WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL	
Organization type (cho	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

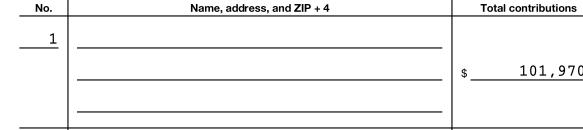
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

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

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

noncash contributions.) Schedule B (Form 990) (2021)



(b)

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

		\$_	101,970.	Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
2		\$_	8,057.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
3		\$_	1,072,539.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
4		\$_	90,909.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
5		\$_	157,899.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
		\$_		Person Payroll Noncash (Complete Part II for

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL

Name of organization

Part I

(a)

123452 11-11-21

19240502 793927 17546

Schedule B (Form 990) (2021)

47-1118215

Person

(c)

Page 2 Employer identification number

(d)

Type of contribution

X

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
123453 11-11-21			Schedule B (Form 990) (2021)

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Schedule B (Form 990) (2021) Name of organization

(a)

Page 3

Employer identification number

47-1118215

19240502 793927 17546

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Schedule	B (Form 990) (2021)			Page 4	
Name of o	organization			Employer identification number	
WASHI	NGTON GLOBAL PUBLIC CHA	ARTER SCHOOL		47-1118215	
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona	a) through (e) and the following line e charitable, etc., contributions of \$1,000 o	entry For organizations		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held	
		(e) Transfer of g	 ift		
	Transferee's name, address, a	and ZIP + 4	Relationship of tra	ansferor to transferee	
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held	
	Transferee's name, address, a	ift Bolationship of tr	anoforor to transferoo		
				ansferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held	
Part I					
		(e) Transfer of g	 		
	Transferee's name, address, a		ansferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, a	Ind ZIP + 4	Relationship of tra	ansferor to transferee	
123454 11-1	1-21	24		Schedule B (Form 990) (2021	

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SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 9	90)
---------	-----

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.



Name of the organization

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL

Employer identification number 47-1118215

Par	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		s or Accounts. Complete if the
	organization answered tes of Form 990, Fart IV, in	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year		
1	Total number at end of year Aggregate value of contributions to (during year)		
2 3	Aggregate value of grants from (during year)		
4	Aggregate value of grants norm (during year)		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	and funds
5	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
U	for charitable purposes and not for the benefit of the donor		-
Par			
1	Purpose(s) of conservation easements held by the organizat	•	
•	Preservation of land for public use (for example, recrea		a historically important land area
	Protection of natural habitat		a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b			
с	Number of conservation easements on a certified historic st		
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	asement is located 🕨	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting		
	►		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conserva	ation easements during the year
	▶\$		
8	Does each conservation easement reported on line 2(d) abo		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservat		
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statem	ents that describes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	of Art Historical Tracquires or O	Nthar Similar Acasta
Fai	Complete if the organization answered "Yes" on Form		diler Similar Assets.
	, 0		and balance about works
Ia	If the organization elected, as permitted under FASB ASC 99 of art, historical treasures, or other similar assets held for pu	•	
	service, provide in Part XIII the text of the footnote to its fina		
h	If the organization elected, as permitted under FASB ASC 9		
D	art, historical treasures, or other similar assets held for publi	•	
	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 tre		
_	the following amounts required to be reported under FASB /		J
а	Revenue included on Form 990, Part VIII, line 1	-	▶ \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instruction		Schedule D (Form 990) 202
	10-28-21		. ,

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		TON GLOBAL								5 Page 2
Pa	t III Organizations Maintaining C	Collections of A	rt, Histo	orical	Treasures,	or Othe	er Simila	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, access	ion, and other record	ds, check	any of t	he following th	at make s	ignificant	use of its		
	collection items (check all that apply):									
а	Public exhibition	C			exchange prog					
b	Scholarly research	e	e 🗆 c	ther						
С	Preservation for future generations									
4	Provide a description of the organization's c			-	-			se in Par	t XIII.	
5	During the year, did the organization solicit of								-	
	to be sold to raise funds rather than to be m								Yes	No No
Pa	t IV Escrow and Custodial Arran		ete if the o	organiza	ation answered	"Yes" on	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod								٦	<u> </u>
_	on Form 990, Part X?							L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing ta	ıble:					A 100 0 1 100 t	
									Amount	
	Beginning balance									
	Additions during the year									
e	Distributions during the year									
T 0-	Ending balance						1f		Yes	
	Did the organization include an amount on F						• • • • • • • • • • • • • • • • • • • •	L	⊥ ¥es	
Pa	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete									
		(a) Current year		or year				ears back	(e) Four	vears back
1a	Beginning of year balance	(u) canon you	(2)	or you.	(0) ****) **		((0)	,
b	Contributions									
c c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
Ū	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur		ce (line 1a	. colum	n (a)) held as:					
а	Board designated or quasi-endowment	•	%	<i>.</i>	(<i>m</i>					
b	Permanent endowment	%								
с	· · · · · · · · · · · · · · · · · · ·	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse		ation that	are hel	d and administ	ered for th	he organiz	ation		
	by:									Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on Sc	hedule	R?				Зb	
	Describe in Part XIII the intended uses of the		owment fu	ınds.						
Pa	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 990	0, Part IV,	line 11a	a. See Form 99	0, Part X,	line 10.			
	Description of property	(a) Cost or c		• •	ost or other		ccumulate	d	(d) Book	k value
		basis (investr	ment)	bas	sis (other)	dep	oreciation			
	Land									
	Buildings						- 1 1	_		
	Leasehold improvements				175,586.		541,39			1,191.
	Equipment				274,298.		197,91			5,386.
	Other				77,340.		39,89			7,447.
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colum	n (B), lin	ne 10c.)				5,748	3,024.

Schedule D (Form 990) 2021

) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
Financial derivatives			
Closely held equity interests			
Other			
A)			
B)			
C)			
D)			
E)			
=)			
G)			
I. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
rt VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
1)			-
2)		1	
3)		1	
4)			
5)			
6)			
7)			
8)			
0,			
(9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets.			
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ art IX Other Assets. Complete if the organization answered "Yes" of the organization answere of the organization answered "Yes" of the organization answere of the organization answere of the organization answere of the organization and the organization answere of the organization answere of the organization answere of the organization and t	on Form 990, Part IV, line Description	e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ art IX Other Assets. Complete if the organization answered "Yes" of the organization answere of the organization answered "Yes" of the organization answere of the organization answere of the organization answere of the organization and the organization answere of the organization answere of the organization answere of the organization and t		e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Int IX Other Assets. Complete if the organization answered "Yes" complete if the organization" complete if the organization" com		e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Int IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2)		e 11d. See Form 990, Part X, line 15.	(b) Book value
(9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► art IX Other Assets. Complete if the organization answered "Yes" o (a) D		e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► ITTIX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4)		e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► ITTIX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4) 5)		e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Int IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4) 5) 6)		e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► ITTIX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4) 5) 6) 7)		e 11d. See Form 990, Part X, line 15.	(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► ITTIX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4) 5) 6) 7) 8) 9)	Description		(b) Book value
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► IT IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4) 5) 6) 7) 8) 9) al. (Column (b) must equal Form 990, Part X, col. (B) line IT X Other Liabilities.	Description		
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Int IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) (a) D 2) (a) D 3) (b) must equal Form 990, Part X, col. (b) line 4) (b) must equal Form 990, Part X, col. (b) line 5) (c) C 6) (c) C 7) (c) C 8) (c) C 9) (c) C al. (Column (b) must equal Form 990, Part X, col. (B) line IT X Other Liabilities. Complete if the organization answered "Yes" of (c) C	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► IT IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4) 5) 6) 7) 8) 9) al. (Column (b) must equal Form 990, Part X, col. (B) line IT X Other Liabilities.	Description		
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► rt IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) (a) D 2) (a) 3) (b) must equal Form 990, Part X, col. (b) line 13.) ► 4) (c) 5) (c) 6) (c) 7) (c) 8) (c) 9) (c) 1. (Column (b) must equal Form 990, Part X, col. (B) line rt X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► rt IX Other Assets. Complete if the organization answered "Yes" or (a) D 1) (a) D 2) (a) 3) (b) must equal Form 990, Part X, col. (b) line 13.) ► 4) (c) 5) (c) 6) (c) 7) (c) 8) (c) 9) (c) al. (Column (b) must equal Form 990, Part X, col. (B) line rt X Other Liabilities. Complete if the organization answered "Yes" or (a) Description of liability 1) Federal income taxes	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ rt IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) (a) D 2) (a) 3) (b) must equal Form 990, Part X, col. (b) line 4) (c) 5) (c) 6) (c) 7) (c) 8) (c) 9) (c) 1. (Column (b) must equal Form 990, Part X, col. (B) line rt X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability 1) Federal income taxes 2) (a) Description of liability	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Int IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) (a) D 2) (a) 3) (b) must equal Form 990, Part X, col. (b) line 4) (c) 5) (c) 6) (c) 7) (c) 8) (c) 9) (c) 1. (Column (b) must equal Form 990, Part X, col. (B) line Int X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability 1) Federal income taxes 2) (a) 3) (a)	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Int IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) (a) D 2) (a) 3) (b) must equal Form 990, Part X, col. (B) line (Column (b) must equal Form 990, Part X, col. (B) line (Column (b) must equal Form 990, Part X, col. (B) line (Column (b) must equal Form 990, Part X, col. (B) line (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (b) must equal Form 990, Part X, col. (Column (Column (b) must equal Form 990, Part X, col. (Column (Column (b) must equal Form 990, Part X, col. (Column (Colum	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► ITT IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) 2) 3) 4) 5) 6) 7) 8) 9) al. (Column (b) must equal Form 990, Part X, col. (B) line ITT X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability 1) Federal income taxes 2) 3) 4) 5)	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► art IX Other Assets. Complete if the organization answered "Yes" of (a) D (a) D (a) D (b) must equal Form 990, Part X, col. (B) line 13.) ► (a) D (b) must equal Form 990, Part X, col. (B) line 13.) ► (c) D (a) D (c) D<	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Int IX Other Assets. Complete if the organization answered "Yes" of (a) D 1) (a) D 2) (a) 3) (b) must equal Form 990, Part X, col. (b) line 4) (c) 5) (c) 6) (c) 7) (c) 8) (c) 9) (c) al. (Column (b) must equal Form 990, Part X, col. (B) line Int X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes 2) (a) 3) (a) 4) (c) 5) (c) 6) (c)	Description		25.
9) I. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Int IX Other Assets. Complete if the organization answered "Yes" or (a) D 1) (a) D 2) (a) 3) (b) must equal Form 990, Part X, col. (b) line 4) (c) 5) (c) 6) (c) 7) (c) 8) (c) 9) (c) al. (Column (b) must equal Form 990, Part X, col. (B) line Int X Other Liabilities. Complete if the organization answered "Yes" or (a) Description of liability 1) Federal income taxes 2) (a) 3) (c) 4) (c) 5) (c) 6) (c) 7) (c)	Description		25.

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL

Schedule D (Form 990) 2021

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Schedule D (Form 990) 2021

Sche	edule D (Form 990) 2021 WASHINGTON GLOBAL PUBLIC (1118215 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With R	evenue per	Return	۱.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements			1	6,197,912.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	. 2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	6,197,912.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b			
с				4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	6,197,912.
_					
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater	nents With E			
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	nents With E a.	xpenses pe		irn.
P a 1	rt XII Reconciliation of Expenses per Audited Financial Stater	nents With E a.	xpenses pe		
	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With E	xpenses pe	r Retu	irn.
1	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents With E	xpenses pe	r Retu	irn.
1 2	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With E a. 2a	xpenses pe	r Retu	irn.
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	nents With E a. 2a 2b	xpenses pe	r Retu	irn.
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	xpenses pe	r Retu	irn.
1 2 a b c	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other normed to the total service in Part XIII.)	2a 2b 2c 2d	xpenses pe	r Retu	rn. <u>5,864,366.</u> 0.
1 2 b c d	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	xpenses pe	r Retu	rn. 5,864,366.
1 2 b c d e	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	xpenses pe	r Retu	rn. <u>5,864,366.</u> 0.
1 2 6 0 2 3	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	xpenses pe	r Retu	rn. <u>5,864,366.</u> 0.
1 2 3 4	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	xpenses pe	r Retu	rn. 5,864,366. 0. 5,864,366.
1 2 a b c d e 3 4 a	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	xpenses pe	r Retu 1 2e 3 4c	rn. 5,864,366. 0. 5,864,366. 0.
1 2 d e 3 4 b c 5	rt XII Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	xpenses pe	r Retu 1 2e 3 4c	rn. 5,864,366. 0. 5,864,366.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

WASH	INGTO	ON (GLOBAL	BEI	LIEV	'ES 1	ГНАТ	IΤ	HAS	APPR	OPRI	ATE	SUPP	ORT	FOR	ANY	TAX	
POSI	FIONS	5 ТА	AKEN,	AND	AS	SUCH	I, D	DES	NOT	HAVE	ANY	UNC	ERTA	IN 1	TAX I	POSI	FION	IS
THAT	ARE	MAT	FERIAL	, то	THE	FI	IANC	IAL	STA	LEWEN.	rs o	R TH	AT W	OULI) HAI	/E Al	N EF	'FECT
ON I	rs ta	X-I	EXEMPT	' STZ	ATUS	. тн	IERE	ARI	e no	UNRE	COGN	IZED	TAX	BEN	IEFIJ	ទេ ០រ		
LIAB	ILITI	ES	THAT	NEEI	о то) BE	REC	ORDI	ED.									

132054 10-28-21

Schedule D (Form 990) 2021

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(For	HEDULE E m 990) ment of the Treasury Revenue Service	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.							
Name	e of the organizatio		identificat	ion nu	mber				
			7-1118						
Pa	rt I								
				YES	NO				
1	Does the organiza	tion have a racially nondiscriminatory policy toward students by statement in its charter,			<u> </u>				
•	-	erning instrument, or in a resolution of its governing body?	1	x					
2		tion include a statement of its racially nondiscriminatory policy toward students in all its brochures,							
-	-	ther written communications with the public dealing with student admissions, programs, and scholarshi	os? 2	x					
3	0	ion publicized its racially nondiscriminatory policy on its primary publicly accessible Internet							
•	-	mes during its taxable year in a manner reasonably expected to be noticed by visitors to the							
		bugh newspaper or broadcast media during the period of solicitation for students, or during the							
		I if it has no solicitation program, in a way that makes the policy known to all parts of the general							
	0 1	es? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	X					
		L IS A PUBLIC CHARTER SCHOOL AND IS OPERATING UNDER							
	A CONTRAC	T WITH DC GOVERNMENT. REVENUE PROCEDURE 75-50 DOES	_						
	NOT APPLY	•	_						
			_						
			_						
4	Does the organiza	tion maintain the following?	_						
а	Records indicating	g the racial composition of the student body, faculty, and administrative staff?	4a	X					
b	Records documer	nting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		X				
с	Copies of all catal	ogues, brochures, announcements, and other written communications to the public dealing							
		issions, programs, and scholarships?	4c	Х					
d	Copies of all mate	rial used by the organization or on its behalf to solicit contributions?		X					
	If you answered "I	No" to any of the above, please explain. If you need more space, use Part II.							
		ROCEDURE 75-50 DOES NOT APPLY TO PUBLIC CHARTER							
	SCHOOLS.								
5	Does the organiza	tion discriminate by race in any way with respect to:							
а	Students' rights o	r privileges?	5a		X				
b	Admissions policie	98?	5b		X				
С	Employment of fac	culty or administrative staff?	5c		X				
		ther financial assistance?			X				
		es?			X				
f	Use of facilities?		5f		X				
		?			X				
h	Other extracurricu	Ilar activities?	5h		X				
		Yes" to any of the above, please explain. If you need more space, use Part II.							
		tion receive any financial aid or assistance from a governmental agency?		X					
b	Has the organizat	ion'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 organiza	tion 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, covering racial nondiscrimination? If "No," explain on Part II	7		X				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990 or 990-EZ. Sc	hedule E (Fo	orm 99	0) 2021				

Schedule E (Form 990) 2021

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information.

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE SCHOOL RECEIVES GOVERNMENT FINANCIAL ASSISTANCE FROM OSSE (OFFICE OF

THE STATE SUPERINTENDENT OF EDUCATION).

LINE 7 - EXPLANATION OF RACIAL NONDISCRIMINATION COMPLIANCE:

THE SCHOOL IS A PUBLIC CHARTER SCHOOL AND IS OPERATING UNDER A CONTRACT

WITH THE DC GOVERNMENT, REVENUE PROCEDURE 75-50 DOES NOT APPLY.

Schedule E (Form 990) 2021

132062 10-18-21

19240502 793927 17546

SCHEDULE G (Form 990)	Complete if th	Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.								
Department of the Treasury Internal Revenue Service	► G	► Attac to www.irs.gov/For	h to Form 990				tion		Open to Public Inspection	
Name of the organization	n	TON GLOBAL						Employer ide	ntification number	
		• Complete if the orga								
 Indicate whether the a Mail solicitate Mail solicitate Internet and c Phone solicitate C Phone solicitate In person social provided the organization key employees list 	e organization rais tions email solicitations tations blicitations on have a written o ted in Form 990, F b highest paid indi	sed funds through an s or oral agreement with Part VII) or entity in cou viduals or entities (fur	e X Solicita f X Solicita g Specia n any individua nnection with p	ation of ation of I fundra al (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru undraising services	stees, ?	X Yes		
(i) Name and addres or entity (fund		(ii) Activ	ity	(iii) fundr have c or cor contrib	trol of	(iv) Gross receipts from activity	tò (oi	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization	
DEVELOPMENT ASSOCI BOX 1458, BOWIE, M		GRANT SERVICES		Yes	No X	0.		18,000.	-18,000.	
Total 3 List all states in whor licensing. DC	ich the organizatio	on is registered or lice	insed to solicit	contrib	butions	s or has been notifie	d it is e	18,000. exempt from re	-18,000.	
LHA For Paperwork R	eduction Act Not	ice, see the Instruct	ions for Form	990 or	990-1	ΕΖ.		Schedule	G (Form 990) 2021	

132081 10-21-21

WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215 Page 2

Part II	F
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Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	_	5		,	<u> </u>	<u> </u>
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
an			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
Se	5 Noncash prizes 6 Rent/facility costs					
zpense						
Direct Expenses	7	Food and beverages				
_	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through			•	
Pa	11 11			1 990. Part IV. line 19. or		
	_	\$15,000 on Form 990-EZ, line 6a.			•	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Вe	4	Gross revenue				
	<u> </u>					
nses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Dired	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	└── Yes %	│	│	
	7	Direct expense summary. Add lines 2 through			<u> </u>	
	8	Net gaming income summary. Subtract line 7	from line 1. column (d)		►	
						•
	ls t	ter the state(s) in which the organization condu the organization licensed to conduct gaming ac No," explain:		states?		Yes No
		но, ехрап				
		ere any of the organization's gaming licenses re Yes," explain:	evoked, suspended, or to	erminated during the tax	year?	Yes No
~						
1320	82 10	D-21-21			Sche	dule G (Form 990) 2021

Sch	edule G (Form 990) 2021	WASHINGTON	GLOBAL	PUBLIC (CHARTER	SCHOOL 47	-111821!	D Page 3
11	Does the organization conduct g	aming activities with nor	nmembers?				🗌 Yes	No No
12	Is the organization a grantor, be	-		•	•			
	to administer charitable gaming?	?					📖 Yes	L No
	Indicate the percentage of gamin							
	The organization's facility							%
	An outside facility						13b	%
14	Enter the name and address of t	he person who prepares	the organiza	tion's gaming/sp	ecial events b	ooks and records:		
	Nama 🕨							
	Name							
	Address 🕨							
15a	Does the organization have a co	ntract with a third party f	rom whom th	ne organization re	eceives gamino	g revenue?	Yes	🗌 No
b	If "Yes," enter the amount of gar					_ and the amount		
	of gaming revenue retained by th			_				
С	If "Yes," enter name and addres	s of the third party:						
	Nama 🕨							
	Name 🕨							
	Address ►							
16	Gaming manager information:							
	5 5							
	Name 🕨							
	Gaming manager compensation	▶ \$						
	Description of services provided							
	Director/officer	Employee		dependent contra	actor			
17	Mandatory distributions:							
а	Is the organization required und	er state law to make char	ritable distrib	utions from the g	aming procee	ds to		
	retain the state gaming license?						Ves	L No
b	Enter the amount of distributions	s required under state lav	w to be distril	outed to other ex	empt organiza	ations or spent in the	e	
	organization's own exempt activ							
Ра		rmation. Provide the e					Part III, lines 9	, 9b, 10b,
	15b, 15c, 16, and 17b, a	as applicable. Also provid	le any additic	onal information.	See instruction	18.		
13208	83 10-21-21					Sch	edule G (Form	n 990) 2021
				33				

Schedule G	(Form 990)	WASHINGTON	GLOBAL	PUBLIC	CHARTER	SCHOOL	47-1118215	Page 4
Part IV	Supplemental I	WASHINGTON nformation (continued)						
							Schedule G (F	orm 990)
132084 11-18-	21			34				
				5-				

SC	SCHEDULE J				OMB No. 1545-0047			
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest				2021		
•	•	Compensated Employees		ZU		1		
Deres		 Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. 		Open to	Publ	ic		
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction			
Nam	e of the organizatio	n	Employer i			mber		
_		WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL	47-1	11821	5			
Pa	rt I Question	s Regarding Compensation						
					Yes	No		
1a	Check the appropr	iate box(es) if the organization provided any of the following to or for a person listed on Form	ı 990,					
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or o	charter travel Housing allowance or residence for perso	nal use					
	Travel for com							
	Tax indemnification and gross-up payments							
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		ur, chef)					
b	•	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								
	trustees, and office	ers, including the CEO/Executive Director, regarding the items checked on line 1a?		2				
-								
3		ny, of the following the organization used to establish the compensation of the organization?						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
		ation of the CEO/Executive Director, but explain in Part III.						
	Compensation							
		compensation consultant						
		ther organizations	committee					
4	During the year, did	d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
•	organization or a re							
а			4a		Х			
b					X			
					X			
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	,							
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on					
	contingent on the r							
а	The organization?			5a		Х		
b	Any related organiz	zation?		5b		X		
		or 5b, describe in Part III.						
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on					
	contingent on the r	net earnings of:						
а	The organization?			6a		X		
		zation?				X		
		or 6b, describe in Part III.						
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment						
		nes 5 and 6? If "Yes," describe in Part III		7	Х			
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t	the					
	initial contract exce	eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X		
9	If "Yes" on line 8, d	lid the organization also follow the rebuttable presumption procedure described in						
	Regulations section	n 53.4958-6(c)?		9		L		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	lule J (Forr	n 990)) 2021		

132111 11-02-21

Schedule J (Form 990) 2021

21 WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-1118215

Page **2**

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-MIS compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	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) ELIZABETH TORRES, ED.D.	(i)	159,248.	6,732.	150.	7,039.	5,095.	178,264.	0.
	(ii)	0.	0.	0.	0.	0.		0.
	(i)							
	(ii) [
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

ELIZABETH TORRES RECEIVED A BONUS OF \$6,732 DURING CALENDAR YEAR 2021.

HOWARD MEBANE RECEIVED A BONUS OF \$4,805 DURING CALENDAR YEAR 2021. BONUSES

ARE DETERMINED BY THE BOARD AND ARE BASED ON MERIT.

SCHEDULE O (Form 990)

Name of the organization

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.



WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL 47-

47-1118215

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

INTERNATIONALLY-BASED ACADEMIC AND CULTURAL CURRICULUM, WHICH

INTEGRATES PROJECT-BASED LEARNING, SERVICES-LEARNING, TECHNOLOGY, AND

LANGUAGE ACQUISITION TO DEVELOP ENTERPRISING AND COMPETITIVE GLOBAL

CITIZENS.

1

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

THE 990 IS FIRST REVIEWED BY THE CEO. AFTER THE INITIAL REVIEW, THE FORM

990 IS DISTRIBUTED TO THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO SUBMISSION TO THE IRS.

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

BOARD MEMBERS ARE REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST FORM ATTESTING TO ANY CONFLICTS THAT THEY MAY HAVE, OR PERCEIVED TO HAVE, WHEN THEY JOIN THE BOARD. THE BOARD CHAIR MONITORS COMPLIANCE WHEN A NEW BOARD MEMBER JOINS THE BOARD. BOARD MEMBERS ARE REQUIRED TO DISCLOSE ANY CONFLICTS AT ANY TIME AND RECUSE THEMSELVES PER THE SCHOOL'S BYLAWS AS APPROPRIATE.

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

THE OFFICER'S COMPENSATION IS REVIEWED AND APPROVED BY THE BOARD OF

DIRECTORS. COMPENSATION IS SET AND ADJUSTED USING COMPARABLE DATA WITH

CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION. THE MOST

RECENT SALARY REVIEW ON OFFICERS WAS IN JUNE OF 2022.

FORM 990, PART VI, SECT	ION C, LINE 19:	
LHA For Paperwork Reduction Act Notice,	see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2021
132211 11-11-21	38	
L9240502 793927 17546	2021.05080 WASHINGTON GLOB	AL PUBLIC CH 175461

Schedule O (Form 990) 2021	Page 2
Name of the organization WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL	Employer identification number $47 - 1118215$
WASHINGTON GLOBAL PUBLIC CHARTER SCHOOL MAKES ITS GOVERNI	NG DOCUMENTS,
CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAI	LABLE TO THE

PUBLIC UPON REQUEST.

FORM 990, PART XIII, LIVE 2C:

THE ORGANIZATION HAS NOT CHANGED ITS AUDIT OVERSIGHT PROCESS OR ITS

PROCESS OF SELECTION OF AN INDEPENDENT ACCOUNTANT DURING THE YEAR.

132212 11-11-21