Application: Buffalo Commons Charter School

Daniel Brink-Washington - dbrink-washington@buffalocommonscharter.org 2022-2023 Annual Report

Summary

ID: 0000000392

Last submitted: Oct 11 2023 10:53 AM (EDT)

Labels: SUNY Trustees

Entry 1 School Info and Cover Page

Completed - Aug 18 2023

Instructions

Required of ALL Charter Schools

Each Annual Report begins with a completed School Information and Cover Page. The information is collected in a survey format within the <u>Annual Report Portal</u>. When entering information in the portal, some of the following items may not appear, depending on your authorizer and/or your responses to related items.

Entry 1 School Information and Cover Page

(New schools that were not open for instruction for the 2022-2023 school year are not required to complete or submit an annual report this year).

Please be advised that you will need to complete this cover page (including signatures) <u>before</u> all of the other tasks assigned to you by your school's authorizer are visible on your task page. While completing this cover page task, please ensure that you select the correct authorizer (as of June 30, 2023) or you may not be assigned the correct tasks.

BASIC INFORMATION

a. SCHOOL NAME

(Select name from the drop down menu)

BUFFALO COMMONS CHARTER SCHOOL - 800000092085

a1. Popular School Name Buffalo Commons Charter School b. CHARTER AUTHORIZER (As of June 30th, 2023) Please select the correct authorizer as of June 30, 2023 or you may not be assigned the correct tasks. SUNY BOARD OF TRUSTEES c. School Unionized Is your charter school unionized? No d. DISTRICT / CSD OF LOCATION **BUFFALO CITY SD** e. Date of Approved Initial Charter Jan 4 2021 f. Date School First Opened for Instruction Sep 1 2022

(Regents, NYCDOE and Buffalo BOE authorized schools only)
N/A
h. School Website Address
www.buffalocommonscharter.org
i. Total Approved Charter Enrollment for 2022-2023 School Year
100
j. Total Enrollment on June 30, 2023 - excluding Pre-K program enrollment
54
54
k. Grades Served
k. Grades Served
k. Grades Served Grades served during the 2022-2023 school year (exclude Pre-K program students):
k. Grades Served Grades served during the 2022-2023 school year (exclude Pre-K program students): Use the CTRL button to select multiple grades to accurately capture every grade level served.
k. Grades Served Grades served during the 2022-2023 school year (exclude Pre-K program students): Use the CTRL button to select multiple grades to accurately capture every grade level served. Responses Selected:

g. Approved School Mission and Key Design Elements

Do you have a <u>Charter Management Organization</u> ?	
No	
FACILITIES INFORMATION	
m. FACILITIES	
Will the school maintain or operate multiple sites in 2023-2	2024?
	No, just one site.
School Site 1 (Primary)	

I. Charter Management Organization

m1. SCHOOL SITES

Please provide information on Site 1 for the upcoming school year.

	Physical Address	Phone Number	District/CSD	Grades to be Served at Site for previous year (K-5, 6-9, etc.)	Grades to be Served at Site for coming year (K-5, 6-9, etc.)	Receives Rental Assistance for Which Grades (If yes, enter the appropriate grades. If no,
						grades. If no, enter No).
Site 1	833 Michigan Ave, Buffalo, NY 14203	7168152672	Buffalo	K-1	K-2	No

m1a. Please provide the contact information for Site 1.

	Name	Title	Work Phone	Alternate Phone	Email Address
School Leader	Daniel Brink- Washington	Executive Director	716-815-2672		dbrink- washington@buf falocommonscha rter.org
Operational Leader	Daniel Brink- Washington	Executive Director	716-815-2672		dbrink- washington@buf falocommonscha rter.org
Compliance Contact	Daniel Brink- Washington	Executive Director	716-815-2672		dbrink- washington@buf falocommonscha rter.org
Complaint Contact	Daniel Brink- Washington	Executive Director	716-815-2672		dbrink- washington@buf falocommonscha rter.org
DASA Coordinator	Ellen Morenzi	Director of School Community	716-815-2672		emorenzi@buffal ocommonscharte r.org
Phone Contact for After Hours Emergencies	Daniel Brink- Washington	Executive Director	716-815-2672		dbrink- washington@buf falocommonscha rter.org

m1b. Is site 1 in public (co-located) space or in private space?

Private Space

IF LOCATED IN PRIVATE SPACE IN NYC OR IN DISTRICTS OUTSIDE NYC

m1d. Upload a current Certificate of Occupancy (COO) and the annual Fire Inspection Report for school site 1 if

located in private space in NYC or located outside of NYC.

Certificate of Occupancy and Fire Inspection. Provide a copy of a current and non-expired certificate of

occupancy (if outside NYC or in private space in NYC). For schools that are not in district space (NYC co-

locations), provide a copy of a current and non-expired certificate of occupancy, and a copy of the current

annual fire inspection results, which should be dated on or after July 1, 2023.

• Fire inspection certificates must be updated annually. For the upcoming school year 2023-2024,

submit a current fire inspection certificate.

• If the fire inspection certificate is dated after the August 1, 2022 submission of the Annual Report,

please submit the new certificate with the Annual Report entries due on November 1, 2023.

Site 1 Certificate of Occupancy (COO)

Certificate of Occupancy 2023-24.pdf

Filename: Certificate of Occupancy 2023-24.pdf Size: 151.3 kB

Site 1 Fire Inspection Report

This is required, marked optional for administrative purposes.

BCCS Annual Fire Inspection SY22-23 4.11.23 (1).pdf

Filename: BCCS Annual Fire Inspection SY22-23 4.11.23 (1).pdf Size: 278.5 kB

n. List of owned, rented, leased facilities not used to educate students

Separate by semi-colon (;)

N/A

CHARTER REVISIONS DURING THE 2022-2023 SCHOOL YEAR

o. Were there any revisions to the school's charter during the 2022-2023 school year? (Please include approved or pending material and non-material charter revisions).

Please note, listing the revisions here does not constitute a request. Schools are advised to seek revision requests through their authorizer directly.

No

ATTESTATIONS

p. Individual Primarily Responsible for Submitting the Annual Report. (To write type in a phone number with an extension, please use this format: 123-456-7890-3. The dash and number 3 at the end of the phone number refers to the individual's phone extension. Do not type in the work extension or the abbreviation for it - just the dash and the extension number after the phone number).

Name	Danny Brink-Washington
Position	Executive Director
Phone/Extension	716-815-2672
Email	dbrink-washington@buffalocommonscharter.org

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

Responses Selected:

Yes

As outlined in ENTRY 10:

Our signatures (Executive Director/School Leader/Head of School and Board President) below attest that our school has reviewed, understands and will comply with the employee clearance and fingerprint requirements as outlined in Entry 10 and found in the NYSED CSO Fingerprint Clearance Oct 2019 Memo. Click YES to agree.

Responses Selected:

Yes

Signature, Head of Charter School



Signature, President of the Board of Trustees



Aug 18 2023



Thank you.

Entry 2 Links to Critical Documents on School Website

Completed - Aug 18 2023

Instructions

Required of ALL Charter Schools noting that SUNY-authorized charter schools are not required to submit item 5: Authorizer-approved DASA policy and NYSED-Approved School Discipline Policy

By law, each charter school is required to maintain certain notices and policies listed on its website. Please insert the <u>link</u> from the school's website for each of the items:

- 1. Current Annual Report (i.e., 2021-2022 Annual Report);[1]
- 2. Board meeting notices, agendas and documents;
- 3. New York State School Report Card;
- Authorizer-approved DASA Policy and NYSED-Approved School Discipline Policy (For Regents, NYCDOE, and Buffalo BOE-Authorized Charter Schools ONLY);
- 5. District-wide safety plan, not a building level safety plan (as per the September 2021 <u>Emergency Response Plan Memo</u>;
- 6. Authorizer-approved FOIL Policy; and
- 7. Subject matter list of FOIL records. (Example: See NYSED Subject Matter List)

[1] Each charter school is required to make the Annual Report publicly available by August 1 and to post on their respective charter school website. Each school should post an updated and complete version to include accountability data and financial statements that are not or may not be available until after the August deadline (i.e., Repost when financials have been submitted in November.)

Form for Entry 2 Links to Critical Documents on School Website

School Name: Buffalo Commons Charter School

Required of ALL Charter Schools noting that SUNY-authorized charter schools are not required to submit item 4: Authorizer-approved DASA policy and NYSED-Approved School Discipline Policy

By law, each charter school is required to maintain certain notices and policies listed on its website. Please insert the Link from the school's website for each of the items:

New York State Report Card

Emergency Response Plan Memo

NYSED Subject Matter List

	Link to Documents
1. Current Annual Report (i.e., 2022-2023 Annual Report)	https://www.buffalocommonscharter.org
2. Board meeting notices, agendas and documents	https://www.buffalocommonscharter.org/board-of-trustees
3. New York State School Report Card	https://www.buffalocommonscharter.org
4. Authorizer-approved DASA Policy and NYSED- Approved School Discipline Policy (For Regents, NYCDOE, and Buffalo BOE-Authorized Charter Schools ONLY)	https://www.buffalocommonscharter.org
5. District-wide safety plan, not a building level safety plan (as per the September 2021 Emergency Response Plan Memo	https://www.buffalocommonscharter.org
6. Authorizer-approved FOIL Policy	https://www.buffalocommonscharter.org/board-of-trustees
7. Subject matter list of FOIL records. (Example: See NYSED Subject Matter List)	https://www.buffalocommonscharter.org/board-of-trustees



Thank you.

Entry 3 Progress Toward Goals

Incomplete - Hidden from applicant

Instructions

Regents, NYCDOE, and Buffalo BOE-Authorized Charter Schools ONLY

The following tables reflect formatting in the online portal required for Board of Regents, NYCDOE, and Buffalo BOE authorized charter schools only. These charter schools should report all Progress Toward Charter Goals as per their currently approved charters no later than **November 1, 2023.**

PLEASE NOTE: This is a required task, and it is marked optional for administrative purposes only.

Entry 3 Progress Toward Goals

PROGRESS TOWARD CHARTER GOALS

Regents, NYCDOE, and Buffalo BOE-Authorized Charter Schools ONLY

Complete the tables provided. List each goal and measure as contained in the school's currently approved charter, and indicate whether the school has met or not met the goal. Please provide information for all goals no later than November 1, 2023.

1. ACADEMIC STUDENT PERFORMANCE GOALS

Regents, NYCDOE, and Buffalo BOE-Authorized Charter Schools ONLY

The following tables reflect formatting in the online portal required for Board of Regents, NYCDOE, and Buffalo BOE authorized charter schools only. These charter schools should report all Progress Toward Charter Goals as per their currently approved charters no later than **November 1, 2023.**

2022-2023 Progress Toward Attainment of Academic Goals

	Academic Student Performance Goal	Measure Used to Evaluate Progress Toward Attainment of Goal	Goal - Met, Not Met or Unable to Assess	If not met, describe efforts the school will take to meet goal. If unable to assess goal, type N/A for Not Applicable
Academic Goal 1				
Academic Goal 2				
Academic Goal 3				
Academic Goal 4				
Academic Goal 5				
Academic Goal 6				
Academic Goal 7				
Academic Goal 8				
Academic Goal 9				
Academic Goal 10				

2. Do have more academic goals to add?

(No response)

2022-2023 Progress Toward Attainment of Academic Goals

	Academic Student Performance Goal	Measure Used to Evaluate Progress Toward Attainment of Goal	Goal - Met, Not Met or Unable to Meet	If not met, describe efforts the school will take to meet goal. If unable to assess goal, type N/A for Not Applicable
Academic Goal 21				
Academic Goal 22				
Academic Goal 23				
Academic Goal 24				
Academic Goal 25				
Academic Goal 26				
Academic Goal 27				
Academic Goal 28				
Academic Goal 29				
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Academic Goal 41				

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Academic Goal 67	Academic Goal 65		
	Academic Goal 66		
Academic Goal 59	Academic Goal 67		
	Academic Goal 59		

Academic Goal 60		
Academic Goal 61		
Academic Goal 62		

4. ORGANIZATION GOALS

For the 2022-2023 school year, any organization goals that cannot be evaluated due to school closure resulting in a lack of data and changes in testing, surveying, and other usual practices should be reported as "N/A".

2022-2023 Progress Toward Attainment of Organization Goals

	Organizational Goal	Measure Used to Evaluate Progress	Goal - Met, Not Met, or Unable to Assess	If not met, describe efforts the school will take to meet goal. If unable to assess goal, type N/A for Not Applicable
Org Goal 1				
Org Goal 2				
Org Goal 3				
Org Goal 4				
Org Goal 5				
Org Goal 6				
Org Goal 7				
Org Goal 8				
Org Goal 9				
Org Goal 10				
Org Goal 11				
Org Goal 12				
Org Goal 13				
Org Goal 14				
Org Goal 15				
Org Goal 16				
Org Goal 17				
Org Goal 18				
Org Goal 19				
Org Goal 20				

5.	Do	have	more	organizational	goals	to add?	
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(No	respor	ise)
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6. FINANCIAL GOALS

2022-2023 Progress Toward Attainment of Financial Goals

	Financial Goals	Measure Used to Evaluate Progress	Goal - Met, Not Met, or Partially Met	If not met, describe efforts the school will take to meet goal.
Financial Goal 1				
Financial Goal 2				
Financial Goal 3				
Financial Goal 4				
Financial Goal 5				

7. Do have more financial goals to add?

2021-2022 Progress Toward Attainment of Financial Goals

	Financial Goals	Measure Used to Evaluate Progress	Goal - Met, Not Met, or Partially Met	If not met, describe efforts the school will take to meet goal.
Financial Goal 6				
Financial Goal 7				
Financial Goal 8				
Financial Goal 9				
Financial Goal 10				

Thank you.

Entry 3 Accountability Plan Progress Reports

Incomplete

Instructions

SUNY-Authorized Charter Schools ONLY- Complete Template and Upload to Epicenter

SUNY-authorized charter schools must download an Accountability Plan Progress Report template at Accountability Plan Progress Report. After completing, SUNY-authorized charter schools must upload the document into the Annual Report Portal, and into the SUNY Epicenter document management system by September 15, 2023.

PLEASE NOTE: This is a required task, and it is marked optional for administrative purposes only.

Entry 4 - Audited Financial Statements

Incomplete

Required of ALL Charter Schools

ALL SUNY-authorized charter schools must upload the financial statements and related documents in PDF format into the <u>Annual Report Portal</u> and into the SUNY Epicenter document management system no later than **November 1, 2023. SUNY-authorized charter schools** are asked to ensure that security features such as password protection are turned off.

ALL Regents, NYCDOE, and Buffalo BOE-authorized charter schools must upload final, audited financial statements to the <u>Annual Report Portal</u> no later than **November 1, 2023**. Upload the independent auditor's report, any advisory and/or management letter, and the internal controls report as one submission, combined into a PDF file, ensuring that security features such as password protections are removed from all school uploaded documents.

PLEASE NOTE: This task appears as visible and optional task in the online portal until August 1 2023 but will be identified as a required task thereafter and due on November 1, 2023. This is a required task, and it is marked optional for administrative purposes only.

Entry 4a – Audited Financial Report Template (SUNY)

Completed - Aug 18 2023

Instructions - SUNY-Authorized Charter Schools ONLY

SUNY-authorized schools must download the Excel spreadsheet entitled "Audited Financial Statement Template" at http://www.newyorkcharters.org/fiscal/. After completing, schools must upload the document into the Annual Report Portal and into the SUNY Epicenter document management system no later than **November 1, 2023.**

PLEASE NOTE: This is a required task, and it is marked optional for administrative purposes only.

<u>6</u>

Filename: 6.30.22_Form_990_Public_Disclosure_Copy.pdf Size: 300.1 kB

Entry 4b – Audited Financial Report Template (BOR/NYC/BOE)

Incomplete - Hidden from applicant

Instructions - Regents-Authorized Charter Schools ONLY

Please complete one spreadsheet at the Education Corporation level and submit the same spreadsheet for each of the schools.

EDUCATION CORPORATIONS WITH MORE THAN ONE SCHOOL SHOULD COMPLETE THE EXCEL SPREADSHEET FOR THE EDUCATION CORPORATION AS A WHOLE, NOT FOR THE INDIVIDUAL SCHOOLS. PLEASE SUBMIT THE SAME EXCEL SPREADSHEET FOR EACH OF THE SCHOOLS.

PLEASE NOTE: This is a required task, and it is marked optional for administrative purposes only.

Entry 4c – Additional Financial Documents

Incomplete - Hidden from applicant

Regents, NYCDOE and Buffalo BOE authorized schools must upload financial documents and submit by November 1, 2023. The items listed below should be uploaded, with an explanation if not applicable or available. For example, a "federal Single Audit was not required because the school did not expend federal funds of more than the \$750,000 Threshold."

- 1. Advisory and/or Management letter
- 2. Federal Single Audit
- 3. Agreed-Upon Procedure Report
- 4. Evidence of Required Escrow Account for each school [1]
- 5. Corrective Action Plan for Audit Findings and Management Letter Recommendations

[1] Note: For BOR schools chartered or renewed after the 2017-2018 school year, the escrow account per school is \$100,000.

PLEASE NOTE: This is a required task, and it is marked optional for administrative purposes only.

Entry 4d - Financial Contact Information

Incomplete - Hidden from applicant

Regents, NYCDOE, and Buffalo BOE authorized schools should enter financial contact information directly into the form within the portal by **November 1, 2023**.

Form for "Financial Contact Information"

1. School Based Fiscal Contact Information

School Based Fiscal Contact Name	School Based Fiscal Contact Email	School Based Fiscal Contact Phone

2. Audit Firm Contact Information

School Audit Contact Name	School Audit Contact Email	School Audit Contact Phone	Years Working With This Audit Firm

3. If applicable, please provide contact information for the school's outsourced financial services firm.

Firm	Name Co	ontact	Mailing	Email	Phone	Years With
	Pe	erson	Address			Firm

Entry 5 – Fiscal Year 2023-2024 Budget

Incomplete

<u>SUNY-authorized charter schools</u> should download the <u>2023-2024 Budget and Quarterly Report Template and the 2023-2024 Budget Narrative Questionnaire</u> from the SUNY website and upload the completed templates into the Annual Report Portal and into the Epicenter document management system. **Due November 1, 2023**.

<u>Regents, NYCDOE, and Buffalo BOE authorized charter schools</u> should upload a copy of the school's FY22 Budget using the <u>2023-2024 Budget Template</u> into the Annual Report Portal or from the Annual Report website. **Due November 1, 2023**.

The Assumptions column should be completed for all revenue and expense items unless the item is self-explanatory. Where applicable, reference the page number or section in the application narrative that indicates the assumption being made. For instance, student enrollment would reference the applicable page number in Section I, C of the application narrative.

PLEASE NOTE: This is a required task, and it is marked optional for administrative purposes only.

Entry 6 – Board of Trustees Disclosure of Financial Interest Form

Completed - Oct 11 2023

Required of ALL Charter Schools

Each member of the charter school's Board of Trustees who served on a charter school education corporation governing one or more charter schools for any period during the 2022-2023 school year must complete and sign a Trustee <u>Disclosure of Financial Interest Form</u> is due on August 1, 2023. Acceptable signature formats include:

- Digitally certified PDF signature (i.e., DocuSign)
- Manual signature (1. download to print, 2. manually sign, 3. scan signed document to PDF, and 4. upload into portal)

All completed forms must be collected and uploaded in .PDF format for each individual member. The education corporation is responsible for ensuring that each member who served on the board during the 2022-2023 school year completes the form.

Charter schools **must** submit the latest version of the form. Forms completed from past years will not be accepted.

Trustees serving on an education corporation that governs more than one school are not required to complete a separate disclosure for each school governed by the education corporation. In the Trustee Disclosure of Financial Interest Form, trustees must disclose information relevant to any of the schools served by the governing education corporation.

<u>Trustee Annual Disclosure Form Jesi Miller</u>

Filename: Trustee_Annual_Disclosure_Form_Jesi_Miller.pdf Size: 132.1 kB

<u>Trustee Annual Disclosure Form Javeena Edwards</u>

Filename: Trustee Annual Disclosure Form Jav 5pKKDHu.pdf Size: 607.7 kB

Trustee Annual Disclosure Form Goldberg

Filename: Trustee_Annual_Disclosure_Form_Goldberg.pdf Size: 655.8 kB

Trustee Annual Disclosure Form Robazza

Filename: Trustee_Annual_Disclosure_Form_Robazza.pdf Size: 607.2 kB

Trustee Annual Disclosure Form Trey Thompson

Filename: Trustee Annual Disclosure Form Tre WjEEFbn.pdf Size: 603.9 kB

Trustee Annual Disclosure Form Bruno

Filename: Trustee_Annual_Disclosure_Form_Bruno.pdf Size: 603.1 kB

Trustee Annual Disclosure Form Baetzhold

Filename: Trustee_Annual_Disclosure_Form_Baetzhold.pdf Size: 623.0 kB

Trustee Annual Disclosure Form Hinton

Filename: Trustee_Annual_Disclosure_Form_Hinton.pdf Size: 604.7 kB

Trustee Annual Disclosure Form Davis

Filename: Trustee_Annual_Disclosure_Form_Davis.pdf Size: 605.5 kB

Trustee Annual Disclosure Form Paez

Filename: Trustee_Annual_Disclosure_Form_Paez.pdf Size: 606.7 kB

Entry 7 BOT Membership Table

Completed - Aug 24 2023

Instructions

Required of ALL charter schools

ALL charter schools or education corporations governing multiple schools must complete the Board of Trustees Membership Table within the online portal. Please be sure to include and identify parents who are members of the Board of Trustees and indicate whether parents are voting or non-voting members.

Entry 7 BOT Table

- 1. SUNY-AUTHORIZED charter schools are required to provide information for VOTING Trustees only.
- 2. REGENTS, NYCDOE, and BUFFALO BOE-AUTHORIZED charter schools are required to provide information for all --VOTING and NON-VOTING-- trustees.

Authorizer:

Who is the authorizer of your charter school?

SUNY

1. 2022-2023 Board Member Information (Enter info for each BOT member)

	Trustee Name	Trustee Email Address	Position on the Board	Committe e Affiliation s	Voting Member Per By- Laws (Y/N)	Number of Complet ed Terms Served	Start Date of Current Term (MM/DD/ YYYY)	End Date of Current Term (MM/DD/ YYYY)	Board Meetings Attended During 2022- 2023
1	Trey Thompso n		Chair	All (Ex- Officio)	Yes	1	01/19/20	06/30/20 24	11
2	Krystle Hinton		Secretar y	Governa nce, Develop ment	Yes	1	01/19/20	06/30/20 24	10
3	Jesi Miller		Vice Chair	Develop ment, Academi c Excellen ce	Yes	1	06/22/20 22	06/30/20 25	11
4	Kevin Southern		Trustee/ Member	Finance, Academi c Excellen ce	Yes	1	06/22/20 22	06/30/20 25	5 or less
5	Danielle Bruno		Trustee/ Member	Academi c Excellen ce	Yes	1	06/22/20 22	06/30/20 25	9
6	Latricia Davis		Trustee/ Member	Academi c Excellen ce	Yes	1	06/22/20 22	06/30/20 25	10
7	Sabrina Robazza		Trustee/ Member	Develop ment	Yes	1	03/21/20 23	06/30/20 26	5 or less

8	Mark Baetzhol d	Trustee/ Member	Develop ment	Yes	1	03/21/20	06/30/20 26	5 or less
9	Royce Woods	Trustee/ Member	Finance	Yes	1	06/15/20 23	06/30/20 26	5 or less

1a. Are there more than 9 members of the Board of Trustees?

1)	10

2. INFORMATION ABOUT MEMBERS OF THE BOARD OF TRUSTEES

- 1. SUNY-AUTHORIZED charter schools provide response relative to VOTING Trustees only.
- 2. REGENTS, NYCDOE, and BUFFALO BOE-AUTHORIZED charter schools provide a response relative to all trustees.

a. Total Number of BOT Members on June 30, 2023	9
b.Total Number of Members Added During 2022-2023	4
c. Total Number of Members who Departed during 2022- 2023	4
d.Total Number of members, as set in Bylaws, Resolution or Minutes	13

3. Number of Board meetings held during 2022-2023

12

4. Number of Board meetings scheduled for 2023-2024
12
Total number of Voting Members on June 30, 2023:
9
Total number of Voting Members added during the 2022-2023 school year:
4
Total number of Voting Members who departed during the 2022-2023 school year:
4
Total Maximum Number of Voting members in 2022-2023, as set by the board in bylaws, resolution, or minutes:
13
Thank you.

Entry 8 Board Meeting Minutes

Incomplete - Hidden from applicant

Instructions - Required of Regents, NYCDOE, and Buffalo BOE Authorized Schools ONLY

Schools must upload a complete set of monthly board meeting minutes (July 2022-June 2023), which should <u>match</u> the number of meetings held during the 2022-2023 school year, as indicated in the above table. The minutes provided must be the final version approved by the school's Board of Trustees and may be uploaded individually or as one single combined file. Board meeting minutes must be submitted by **August 1**, **2023**.

Entry 9 Enrollment & Retention

Completed - Aug 24 2023

Instructions for submitting Enrollment and Retention Efforts

Required of ALL Charter Schools

Describe the good faith efforts the charter school has made in 2022-2023 toward meeting targets to attract and retain the enrollment of Students with Disabilities (SWDs), English Language Learners (ELLs), and students who are economically disadvantaged. In addition, describe the school's plans for meeting or making progress toward meeting its enrollment and retention targets in 2023-2024.

*SUNY-authorized charter schools

The education corporation must include a plan for the charter to meet or exceed enrollment and retention targets established by the SUNY Trustees for students with disabilities, ELLs, and students who are eligible to participate in the FRPL program. See the <u>enrollment and retention target calculator</u> to find specific targets.

Entry 9 Enrollment and Retention of Special Populations

	Describe Recruitment Efforts in 2022-2023	Describe Recruitment Plans in 2023- 2024
Economically Disadvantaged	- Flyers - Website - Social Media - Print Ads - Radio Ads - Door-to-door - Group Meetings with families of four-year-olds currently enrolled at various daycare/Head Start programs and elementary schools in Buffalo Tabling at places like Headstarts, daycares in predominantly lowincome neighborhoods, faith-based organizations, at key times of day such as drop-off or dismissal. Additionally, more general visibility at farmers' markets, Juneteenth, Taste of Diversity, and Elmwood Village Arts Festival.	Same as 2022-23, but with stronger community relationships and more targeted areas based on previous data.
English Language Learners	- Same as above when applicable - Flyers - We distribute flyers in appropriate languages at community-based organizations that serve large populations of ELL families such as local resettlement agencies like Jewish Family Services, Jericho Road, and others Website - our website has a translation feature Social Media - Meetings with families of students that qualify as ELL brokered through the four resettlement agencies and relevant community- based organizations. Translators provided.	Same as 2022-23, but with stronger community relationships and more targeted areas based on previous data.

	- Targeted tabling is done at places like resettlement agencies and the Refugee Roundtable Meetings.	
Students with Disabilities	- Same as above when applicable - Flyers Website - Social Media - Print Ads - Radio Ads - Door-to-door - Meetings with families of students that qualify as SPED brokered through contacts with relevant community based-organizations Targeted tabling is done at community-based organizations that serve SPED students like People Inc., or Gateway-Longview.	Same as 2022-23, but with stronger community relationships and more targeted areas based on previous data.

	Describe Retention Efforts in 2022- 2023	Describe Retention Plans in 2023- 2024
Economically Disadvantaged	- Hire, develop and retain effective general education teachers Consistently disaggregate and analyze internal student performance data according to race and socioeconomic status Create a school calendar that is conscious of cultural holidays and traditions Provide professional development for faculty in differentiation and culturally responsive pedagogy, and antibias education to support students' academic, social, and cultural needs Offer professional development for faculty in trauma-informed care to accommodate students who are refugees or who have been exposed to significant hardship/and or violence Cultivate diversity of the student body so that students have an increased sense of belonging Curricula in which children of different backgrounds and abilities see themselves as important members of the community Exhibits throughout the school of students' home languages and cultural artifacts Have a school leader personally meet new students, either at the student's home or at the school, to build trust and a sense of belonging Build relationships with families via phone and email, personal conferences, and school events Conduct annual parent surveys to	Same as 2022-23, but with stronger community relationships and more targeted areas based on previous data.

	assess student and family needs.	
English Language Learners	 - Hire, develop and retain effective ENL teachers. Select core curricula that offer robust support for instruction of ELL students. - Consistently disaggregate and analyze internal student performance data according to ENL level (i.e,. emerging, proficient, etc.). - Provide professional development for faculty in the principles of Sheltered Instruction Observation Protocol. - Include ELL students in general school activities as often as possible. - Conduct differentiated parent workshops that address needs of ELL students. - Whenever possible, provide translation services. - Regularly evaluate family satisfaction with internal systems that meet the needs of ELL students and families. 	Same as 2022-23, but with stronger community relationships and more targeted areas based on previous data.
Students with Disabilities	 Hire, develop, and retain effective SPED teachers. Select core curricula that offer robust support for instruction of students with special needs. Consistently disaggregate and analyze internal student performance data according to SPED classification (i.e., learning disabled, other health impaired, etc.). Provide professional development for faculty in Marilyn Friend's models of co-teaching. Include SPED students in general school activities as often as possible. 	Same as 2022-23, but with stronger community relationships and more targeted areas based on previous data.

- Conduct differentiated parent workshops that address needs of SPED students.
- Regularly evaluate family satisfaction with internal systems that meet the needs in each student's IEP or 504.

Entry 10 – Teacher and Administrator Attrition

Completed - Aug 18 2023

Form for "Entry 10 – Teacher and Administrator Attrition" Revised to Employee Fingerprint Requirements Attestation

A. TEACH System - Employee Clearance

Required of ALL Charter Schools

Charter schools must ensure that all prospective employees[1] receive clearance through the NYSED Office of School Personnel Review and Accountability (OSPRA) prior to employment. This includes paraprofessionals and other school personnel who are provided or assigned by the district of location, or related/contracted service providers. After an employee has been cleared, schools are required to maintain proof of such clearance in the file of each employee. For the safety of all students, charter schools must take immediate steps to terminate the employment of individuals who have been denied clearance. Once the employees have been terminated, the school must terminate the request for clearance in the TEACH system.

In the Annual Report, charter schools are asked to confirm that all employees have been cleared through the NYSED TEACH system; and, if denied clearance, confirm that the individual or employee has been removed from the TEACH system, and is <u>not</u> employed by the school.

1. Emergency Conditional Clearances

Charter schools are **strongly discouraged** from using the emergency conditional clearance provisions for prospective employees. This is because the school must request clearance through NYSED TEACH, and the school's emergency conditional clearance of the employee terminates <u>automatically</u> once the school receives notification from NYSED regarding the clearance request. Status notification is provided for all prospective employees through the NYSED TEACH portal within 48 hours after the clearance request is submitted. Therefore, at most, a school's emergency conditional clearance will be valid for only 48 hours after approval by the board.

Schools are not permitted to renew or in any way re-establish a prospective employee's emergency conditional clearance after status notification is sent by NYSED through the TEACH portal.

Schools are asked to attest that they have reviewed and understand these requirements. More information can be found in the memo at NYSED CSO Employee Clearance and Fingerprint Memo 10-2019.

[1] Employees who must be cleared include, but are not limited to, teachers, administrative staff, janitors, security personnel and cafeteria workers, and other staff who are present when children are in the school building. This includes paraprofessionals and other school personnel that are provided or assigned by the district of location, as well as related/contracted service providers. See NYSED memorandum dated October 1, 2019 at http://www.nysed.gov/common/nysed/files/programs/charter-schools/employeefingerprintoct19.pdf or visit the NYSED website at: http://www.highered.nysed.gov/tsei/ospra/fingerprintingcharts.html for more information regarding who must be fingerprinted. Also see, 8 NYCRR §87.2.

B. Emergency Conditional Clearances

Emergency Conditional Clearances

Charter schools are **strongly discouraged** from using the emergency conditional clearance provisions for prospective employees. This is because the school must request clearance through NYSED TEACH, and the school's emergency conditional clearance of the employee terminates <u>automatically</u> once the school receives notification from NYSED regarding the clearance request. Status notification is provided for all prospective employees through the NYSED TEACH portal within 48 hours after the clearance request is submitted. Therefore, at most, a school's emergency conditional clearance will be valid for only 48 hours after approval by the board.

Schools are not permitted to renew or in any way re-establish a prospective employee's emergency conditional clearance after status notification is sent by NYSED through the TEACH portal.

Schools are asked to attest that they have reviewed and understand these requirements. More information can be found in the memo at NYSED CSO Employee Clearance and Fingerprint Memo 10-2019.

Attestation

Responses Selected:

I hereby attest that the school has reviewed, understands, and will comply with these requirements.

Entry 11 Percent of Uncertified Teachers

Incomplete - Hidden from applicant

Instructions

Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools ONLY

The table below reflects the information collected through the online portal for compliance with New York State Education Law 2854(3)(a-1) for teaching staff qualifications. Uncertified teachers are those not certified pursuant to the State Certification Requirements established by the NYSED Commissioner of Education.

Enter the relevant full-time equivalent (FTE) count of teachers in each column. For example, a school with 20 full-time teachers and 5 half-time teachers would have an FTE count of 22.5.

Entry 11 Uncertified Teachers

School Name:

Instructions for Reporting Percent of Uncertified Teachers

Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools ONLY

The table below reflects the information collected through the online portal for compliance with New York State Education Law 2854(3)(a-1) for teaching staff qualifications. Uncertified teachers are those not certified pursuant to the State Certification Requirements established by the NYSED Commissioner of Education.

Enter the relevant full-time equivalent (FTE) count of teachers in each column. For example, a school with 20 full-time teachers and 5 half-time teachers would have an FTE count of 22.5.

If more than one line applies to a teacher, please include in only one FTE uncertified category. Please do not include paraprofessionals, such as teacher aides.

CATEGORY A. 30% OR 5 UNCERTIFIED TEACHERS WHICHEVER IS LESS

	FTE Count
i. FTE count of uncertified teacher with at least three years of elementary, middle or secondary classroom teaching experience (as of June 30, 2023)	
ii. FTE count of uncertified teachers who are tenured or tenure track college faculty (as of June 30, 2023)	
iii. FTE count of uncertified teachers with two years of Teach for America experience (as of June 30, 2023)	
iv. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (as June 30, 2023)	
Total Category A: 5 or 30% whichever is less	0

CATEGORY B. PLUS FIVE UNCERTIFIED TEACHERS IN MATHEMATICS, SCIENCE, COMPUTER SCIENCE, TECHNOLOGY OR CAREER AND TECHNICAL EDUCATION.

	FTE Count
i. Mathematics	
ii. Science	
iii. Computer Science	
iv. Technology	
v. Career and Technical Education	
Total Category B: not to exceed 5	0

CATEGORY C: PLUS 5 ADDITIONAL UNCERTIFIED TEACHERS

	FTE Count
i. FTE count of uncertified teacher with at least three years of elementary, middle or secondary classroom teaching experience (as of June 30, 2023)	
ii. FTE count of uncertified teachers who are tenured or tenure track college faculty (as of June 30, 2023)	
iii. FTE count of uncertified teachers with two years of Teach for America experience (as of June 30, 2023)	
iv. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (as June 30, 2023)	
Total Category C: not to exceed 5	0

TOTAL FTE COUNT OF **UNCERTIFIED** TEACHERS (Sum of Categories A, B AND C)

(Include teachers who do not fit in one of these categories or if did fit would exceed the numerical limits for that category)

	FTE Count
Total	

CATEGORY D: TOTAL FTE COUNT OF UNCATEGORIZED, UNCERTIFIED TEACHERS

(Include teachers who do not fit in one of these categories or if did fit would exceed the numerical limits for that category)

	FTE Count
Total Category D	

CATEGORY E: TOTAL FTE COUNT OF <u>CERTIFIED</u> TEACHERS

	FTE Count
Total Category E	

CATEGORY F: TOTAL FTE COUNT OF ALL TEACHERS

Please do not include paraprofessionals, such as teacher aides.

	FTE Count
Total Category F	



Thank you.

Entry 12 Organization Chart

Incomplete - Hidden from applicant

Instructions

Required of Regents, NYCDOE, and Buffalo BOE Authorized Charter Schools ONLY

Upload the 2022-2023 **Organization Chart.** The organization chart should be a graphic representation (A list will not be accepted.) and should include position titles and reporting (hierarchical) relationships. Employee names should **not** appear on the chart.

Entry 13 School Calendar

Completed - Aug 18 2023

Instructions for submitting School Calendar

Required of ALL Charter Schools

If the charter school has a tentative calendar based on available information and guidance at the time, please submit with the August 1, 2023 submission. Charter schools must upload a final school calendar into the portal and may do so at any time but no later than **September 15, 2023**.

School calendars must meet the <u>minimum instructional requirements</u> as required of other public schools "... unless the school's charter requires more instructional time than is required under the regulations."

Board of Regents-authorized charter schools also are required to submit school calendars that clearly <u>indicate the start and end date of the instructional year AND</u> the number of instructional hours and/or instructional days for each <u>month (also used to align to schools with extended days/years referenced in their mission statements/key design elements)</u>, See an example of a calendar showing the requested information. Schools **must** use a calendar format and ensure there is a monthly tally of instructional days.

PLEASE NOTE: This is a required task, and it is marked optional for administrative purposes only.

BCCS School Calendar 2023-2024 - Final - Sheet1 (1)

Filename: BCCS_School_Calendar_2023-2024_-_F_GKsTIHc.pdf Size: 169.3 kB

Entry 14 Staff Roster

Incomplete - Hidden from applicant

INSTRUCTIONS

Required of Regents and NYCDOE-authorized Charter Schools ONLY

Please click on the MS Excel <u>Faculty/Staff Roster Template</u> and provide the following information for **ANY and ALL** instructional and non-instructional employees (all faculty and staff employed by the school during the 2022-2023 school year).

Use of the 2022-2023 Annual Report Faculty/Staff Roster Template is required. Each of the data elements, with the exception of the Notes, are required, and use of the drop-down options, when provided, is also required. Reminders: Please use the Notes section provided to add any additional information as deemed necessary. Failure to adhere to the guidelines and validations in the Faculty/Staff Roster Template will result in a resubmission of a fully corrected roster.

Here is the complete list of data elements in the roster template and an explanation of what information is required to correctly complete this task.

Roster Data Elements

Authorizer

NOTE: MUST BE DONE FIRST

School Name and Institution ID

Faculty/Staff First Name

Faculty/Staff Last Name

TEACH ID

Role in School

Explanations

Select your school's authorizer from the drop-down list

first, before completing the roster.

Select your school's name from the **drop-down list**.

Enter the first name of the Faculty/Staff person.

Enter the last name of the Faculty/Staff person.

Enter the **7 digit TEACH ID** for the Faculty/Staff person.

Select the best choice of role of the Faculty/Staff person from the **drop-down list**.

CPR/AED Certification Status

Hire Date

Start Date

Total Years' Experience in this Role

Total Years at this School

Out-of-Certification Justification

Subject Taught

Notes

Select the appropriate choice from the drop-down list.

Enter the date that the Faculty/Staff person was hired.

Enter the date that the Faculty/Staff person actually began employment in this school.

Enter Total Years of Experience that the Faculty/Staff person has in their current role.

Enter the Total Years that the Faculty/Staff person has been employed in this school.

Select the appropriate choice from the drop-down list.

Select the appropriate choice from the drop-down list.

Optional

Optional Additional Documents to Upload (BOR)

Incomplete

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	For the	\pm 2021 calendar year, or tax year beginning $$ JUL $1,$ 2021 $$ and 0	ending J	<u>UN 30, 2022</u>	
	Check if applicabl	C Name of organization		D Employer identific	cation number
	Addre chang	BUFFALO COMMONS CHARTER SCHOOL			<u> </u>
	Name chang	Doing business as			
	Initial return Final return	833 MTCHTCAN AVENUE	Room/suite	E Telephone numbe	r
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	382,668.
	Amen			H(a) Is this a group re	
	Applic		IGTON	for subordinates	
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	—
$\overline{\Gamma}$	Tax-ex	empt status: X 501(c)(3) 501(c) ()	or 527		list. See instructions
		e: WWW.BUFFALOCOMMONSCHARTER.ORG		H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Year		A State of legal domicile: NY
	art I	Summary	1 =		class of regar dominator
	1	Briefly describe the organization's mission or most significant activities: ESTAR	BLISH	AND OPERATE	A CHARTER
Governance		SCHOOL TO PREPARE OUR DIVERSE COMMUNITY O			
nar	2	Check this box if the organization discontinued its operations or dispos			
Ver	3			3	7
	4	Number of independent voting members of the governing body (Part VI, line 1b)			7
જ જ		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			3
itie		Total number of volunteers (estimate if necessary)			7
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
⋖		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
a)	8	Contributions and grants (Part VIII, line 1h)		194,932.	382,668.
ğ	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		194,932.	382,668.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
s	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		104,091.	181,084.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
be	. в	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		96,305.	198,277.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		200,396.	379,361.
	19	Revenue less expenses. Subtract line 18 from line 12		-5,464.	3,307.
Net Assets or	3		Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		370,063.	219,327.
ASS	21	Total liabilities (Part X, line 26)		375,527.	221,484.
Ret	22	Net assets or fund balances. Subtract line 21 from line 20		-5,464.	-2,157.
Pa	art II	Signature Block			
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
Sig	n	Signature of officer		Date	
Her	е	DANIEL BRINK-WASHINGTON, EXECUTIVE DIR	ECTOR		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN
Paid		DONNA M. GONSER, CPA DONNA M. GONSER,	CPA 0		ed
-	parer	Firm's name LUMSDEN & MCCORMICK, LLP		Firm's EIN ▶	
Use	Only	Firm's address 369 FRANKLIN STREET		, _	46\056 0555
		BUFFALO, NY 14202		Phone no. (7	16)856-3300
May	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No

Form	n 990 (2021) BUFFALO COMMONS CHARTER SCHOOL	85-4160029 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	ESTABLISH AND OPERATE A CHARTER SCHOOL TO PREPARE	OUR DIVERSE
	COMMUNITY OF STUDENTS TO SUCCEED ACADEMICALLY AND	PROFESSIONALLY
	REGARDLESS OF BACKGROUND AND CIRCUMSTANCE.	
2	Did the organization undertake any significant program services during the year which were not liste	ed 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	m services?
•	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
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to report the amount of grants and allocated to the section 501(c)(4) organizations are required to the section 501(c)(4) organizations are required to the section 501(c)(4) organization 501(c)(4) or	
	revenue, if any, for each program service reported.	tions to others, the total expenses, and
40		0 •) (Revenue \$)
4a	(Code:) (Expenses \$	
		THE CHARTER SCHOOL IS
	AN ACADEMICALLY RIGOROUS, CREATIVE, AND COLLABORAT	
	COMMUNITY THAT USES RESEARCH-BASED TEACHING PRACTI	
	PROGRAMMING TO ELIMINATE THE OPPORTUNITY GAP AND T	
	STUDENT BODY FOR SUCCESSFUL LIVES THAT STRENGTHEN	THEIR COMMUNITIES.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	·	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$	
4e	Total program service expenses ▶ 111,076.	
		Form 990 (2021)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
Ū	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	├		
′		7		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			_V
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			٦,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	 -		
ızu	, ,	12a		x
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
b		12b		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		21	х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			.
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			.,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
		_		

BUFFALO COMMONS CHARTER SCHOOL 85-4160029 Page 4 Form 990 (2021) Part IV | Checklist of Required Schedules (continued) Yes No 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 Х 22 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 X 23 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 Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х 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 Х 25b 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% Х controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, 27 creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Х entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 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? If "Yes." complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? |f "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b

	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
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	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

If "Yes," complete Schedule R, Part V, line 2

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

132004 12-09-21

36

37

Form 990 (2021)

Х

36

(gambling) winnings to prize winners?

BUFFALO COMMONS CHARTER SCHOOL
Statements Regarding Other IRS Filings and Tax Compliance (continued) 85-4160029 Page 5 Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Х
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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 account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	35		
	Print 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	"		
Ū	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12	4		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	40-		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
	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.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	1		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Form **990** (2021) 6 2021.05080 BUFFALO COMMONS CHARTER S R0227701

BUFFALO COMMONS CHARTER SCHOOL 85-4160029 Form 990 (2021) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	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) available
	for public inspection. Indicate how you made these available. Check all that apply.

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

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

20	State the name, address, and telephone number of the person who possesses the organization's books and records	
	DANIEL BRINK-WASHINGTON - 716-222-0127	

NY

14203

833 MICHIGAN AVENUE, BUFFALO,

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

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

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

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

(A) Name and title	(B) Average hours per week	box offi	, unle	Pos heck i ss per	more rson i	than o s both or/trus	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) DANIEL BRINK-WASHINGTON	40.00	1								
EXECUTIVE DIRECTOR	1 00			X				105,436.	0.	10,407
(2) ARI GOLDBERG	1.00	l								
CHAIR	1 00	Х		Х				0.	0.	0
(3) MICHAEL STEVENS	1.00	٠,,		7,7					0	•
VICE CHAIR	1.00	Х		Х		_		0.	0.	0
(4) TREY THOMPSON TREASURER	1.00	х		х				0.	0.	0
(5) KRYSTLE HINTON	1.00	Α		Δ				0.	0.	0
SECRETARY	1.00	Х		Х				0.	0.	0
(6) DANIELLE BRUNO	1.00							0.	0.	0
TRUSTEE	1.00	х						0.	0.	0
(7) CHERISH DAVIS	1.00	<u></u>								<u> </u>
TRUSTEE		х						0.	0.	0
(8) JAVEENA EDWARDS	1.00									
TRUSTEE		Х						0.	0.	0
		1								
		1								
		1								
		1								
		1								
		<u> </u>								
		1								
		1								
		1								
		Ì								

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85-4160029

(A) Name and title	(B) (C) Average hours per (do not check more than one box, unless person is both an							(F) Estimated amount of				
	week (list any hours for related organizations below line)				irecto	Highest compensated complexed employee	tee)	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC 1099-NEC)	/	otl compe from organ and re	ner nsation n the ization elated zations
			_									
		•										
1b Subtotal c Total from continuation sheets to Part VII, Section A				>	105,436.	().		407.			
d Total (add lines 1b and 1c) Total number of individuals (including but n							o re	105,436. eceived more than \$100.).	10,	407.
compensation from the organization											Y	1 es No
3 Did the organization list any former officer,											3	X
line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	ım of reportabl	е со	mpe	ensa	tion	and	oth	er compensation from t	he organization			
and related organizations greater than \$150Did any person listed on line 1a receive or a),000? <i>If</i> " <i>Yes,</i> accrue compen	" co sati	<i>mple</i> on fr	ete S om	Sche any	edule unre	J fo	or such individualed organization or individual	dual for services		4	X
rendered to the organization? If "Yes." come Section B. Independent Contractors	plete Schedule	e J fo	or su	ıch <u>ı</u>	oers	on .					5	<u> </u>
Complete this table for your five highest co the organization. Report compensation for	•	-							· · · · · · · · · · · · · · · · · · ·	nsati	on from	
(A) Name and business			ONE		10.11	<u> </u>		(B) Description of s		Cc	(C)	ation
		110	<u> </u>					·				
							\dashv					
2 Total number of independent contractors (ii \$100,000 of compensation from the organization from the organiza	•	ot lin	nited	to t	_	se lis	ted	above) who received mo	ore than			
+ 100,000 of compensation from the organiz						_				F	orm 99	0 (2021)

Form 990 (2021)
Part VIII

		Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
				,	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenuè excluded from tax under
						function revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			1b					
جَ ق		Membership dues	1c					
ts,		Fundraising events						
ig ig		Related organizations	1d	337,384.				
ns, Sim		Government grants (contributions)		337,304.				
er j	Ť	All other contributions, gifts, grants, and		45 204				
듗된		similar amounts not included above	1f	45,284.				
d of	_	Noncash contributions included in lines 1a-1f	1g \$		200 660			
<u>8 0</u>	h	Total. Add lines 1a-1f			382,668.			
				Business Code				
9	2 a							
e <u>Š</u>	b							
Sugar	С							
e A	d							
Program Service Revenue	е	· <u></u>						
Ā.	f	All other program service revenue						
		Total. Add lines 2a-2f						
	3	Investment income (including divide						
		other similar amounts)						
	4	Income from investment of tax-exen						
	5	Royalties	-					
	•	() ()	i) Real	(ii) Personal				
	6 2	Gross rents6a	.,	()				
		Less: rental expenses 6b						
		· · · · · · · · · · · · · · · · · · ·						
		Rental income or (loss) 6c						
			Securities	(ii) Other				
	/ a		becurries	(ii) Other				
		assets other than inventory 7a						
	b	Less: cost or other basis						
ng		and sales expenses						
) Ne	С	Gain or (loss) 7c						
her Revenue		Net gain or (loss)	I .					
je	8 a	Gross income from fundraising events (not					
₽		including \$	_ of					
		contributions reported on line 1c). S						
		Part IV, line 18						
	b	Less: direct expenses	8b					
	С	Net income or (loss) from fundraising	g events					
	9 a	Gross income from gaming activities						
		Part IV, line 19	9a					
	b	Less: direct expenses	9b					
	С	Net income or (loss) from gaming ac	tivities					
	10 a	Gross sales of inventory, less return	s					
		and allowances	10a					
	b	Less: cost of goods sold						
		Net income or (loss) from sales of in						
		<u> </u>		Business Code				
Snc	11 a							
Miscellaneous Revenue	b							
ella ve	c							
isc.		All other revenue						
Σ		Total. Add lines 11a-11d		>				
	12	Total revenue. See instructions			382,668.	0.	0.	0.

Part IX Statement of Functional Expenses

Do r	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
^	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16				
4 =	Benefits paid to or for members Compensation of current officers, directors,				
5	trustees, and key employees	108,083.		108,083.	
6	Compensation not included above to disqualified	100,003.		100,003.	
U	persons (as defined under section 4958(f)(1)) and				
7	Other salaries and wages	58,566.	58,566.		
8	Pension plan accruals and contributions (include	,			
-	section 401(k) and 403(b) employer contributions	2,249.	2,249.		
9	Other employee benefits	12,186.	12,186.		
0	Payroll taxes	,	,		
1	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	23,933.		23,933.	
2	Advertising and promotion	51,555.		51,555.	
3	Office expenses	15,799.		15,799.	
4	Information technology	14,363.		14,363.	
5	Royalties				
6	Occupancy	36,439.		36,439.	
7	Travel				
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 4 0 5 5	44.055		
9	Conferences, conventions, and meetings	14,075.	14,075.	0 550	
0	Interest	8,750.		8,750.	
1	Payments to affiliates	1 010		1 010	
2	Depreciation, depletion, and amortization	1,810.		1,810.	
3	Insurance	7,553.		7,553.	
4	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.) EDUCATION CONSULTANTS	24,000.	24,000.		
a		44,000•	44,000.		
b					
c d					
	All other expenses				
е 5	Total functional expenses. Add lines 1 through 24e	379,361.	111,076.	268,285.	(
<u>5</u> 6	Joint costs. Complete this line only if the organization	377,301.	<u> </u>	200,203	<u>'</u>
,	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Part X	•	Balance Sneet					
		Check if Schedule O contains a response or ne	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
1	ı	Cash - non-interest-bearing			173,390.	1	159,010
2		Savings and temporary cash investments				2	
3		Pledges and grants receivable, net			194,532.	3	
4		Accounts receivable, net				4	
5		Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of th	ese pers	ons		5	
6	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe		6			
တ္ 7	7	Notes and loans receivable, net				7	
Assets	3	Inventories for sale or use				8	
₹ 9					2,141.	9	13,908
10)a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		48,219.			
	b	Less: accumulated depreciation	. 10b	1,810.	0.	10c	46,409
11	ı	Investments - publicly traded securities		11			
12	2	Investments - other securities. See Part IV, line		12			
13	3	Investments - program-related. See Part IV, line		13			
14		Intangible assets				14	
15		Other assets. See Part IV, line 11				15	
16		Total assets. Add lines 1 through 15 (must ed			370,063.	16	219,327
17		Accounts payable and accrued expenses	25,527.		57,361		
18		Grants payable		18	151 100		
19		Deferred revenue		19	164,123		
20		Tax-exempt bond liabilities				20	
21		Escrow or custodial account liability. Complete				21	
ဖ္မ 22		Loans and other payables to any current or for					
┋		trustee, key employee, creator or founder, sub					
Liabilities		controlled entity or family member of any of th				22	
23		Secured mortgages and notes payable to unre				23	
24		Unsecured notes and loans payable to unrelat				24	
25		Other liabilities (including federal income tax, p	•				
		parties, and other liabilities not included on line	es 17-24)	. Complete Part X	250 000		0
				·····	350,000.	25	0
26		Total liabilities. Add lines 17 through 25			375,527.	26	221,484
တ္		Organizations that follow FASB ASC 958, ch	neck her	e 🏲 🛕			
ے ا		and complete lines 27, 28, 32, and 33.			E 161		2 157
<u> 27 27 27 27 27 27 27 27</u>					-5,464.		-2,157
<u>ති</u> 28		Net assets with donor restrictions		28			
ָב <u></u>		Organizations that do not follow FASB ASC					
<u></u>		and complete lines 29 through 33.				00	
S 29		Capital stock or trust principal, or current fund				29	
88 30		Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances 25 28 29 31 35 35 36 36 36 36 36 36 36 36 36 36 36 36 36		Retained earnings, endowment, accumulated			-5,464.	31	-2,157
		Total liabilities and not assets (fund balances			370,063.	32	219,327
33	<u> </u>	Total liabilities and net assets/fund balances			370,003.	33	Eorm 990 (201

Form **990** (2021)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	382	, 66	58.
2	Total expenses (must equal Part IX, column (A), line 25)	2	379		
3	Revenue less expenses. Subtract line 2 from line 1	3	3	, 30	7.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-5	, 46	54.
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)				
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	, 15	57 .
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:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	\rightarrow	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	\rightarrow	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	•			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	\rightarrow	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	- 1	

132012 12-09-21

SCHEDULE A

(Form 990)

<u>Total</u>

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of	the organization						r identification number				
			S CHARTER SCI				35-4160029				
Part I	Reason for Public	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.					
The orga	nization is not a private found	lation because it is: (l	For lines 1 through 12, cl	neck only	one box.)						
1	A church, convention of ch	urches, or association	n of churches described	in sectio	n 170(b)(1	I)(A)(i).					
2 X	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)							
3	A hospital or a cooperative)(b)(1)(A)(ii	i).					
4	A medical research organiz					•	r the hospital's name,				
	city, and state:	·				A A A A A	, ,				
5	An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental unit describ	ned in				
•	section 170(b)(1)(A)(iv).			o. opo.a.							
e [1		aantal unit daaarihad in	ootion 17	70/6\/4\/4\	(A)					
6	A federal, state, or local go	-									
7	An organization that norma	•	ntial part of its support if	om a gove	emmentai	unit or irom the general	public described in				
	section 170(b)(1)(A)(vi). (C										
8	A community trust describe			•							
9	An agricultural research org				_	-	•				
	or university or a non-land-	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of the colleg	e or				
	university:										
10	An organization that norma	•					-				
	activities related to its exer	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support	from gross investment				
	income and unrelated busi	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the organization	after June 30, 1975.				
	See section 509(a)(2). (Complete Part III.)										
11	An organization organized	and operated exclusi	ively to test for public sat	ety. See	section 50	09(a)(4).					
12	An organization organized	and operated exclusi	ively for the benefit of, to	perform t	he function	ns of, or to carry out the	purposes of one or				
	more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box on				
	lines 12a through 12d that	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and 12g.					
а	Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving				
	the supported organization	•			-						
	organization. You must o			, ,							
b 🗌	Type II. A supporting org			ion with its	s supporte	ed organization(s), by ha	vina				
	control or management of	•					-				
	organization(s). You mus			and perce	110 11101 001	narago aro cap	portod				
с	Type III functionally inte	-		in connect	tion with a	and functionally integrat	ed with				
c _	its supported organizatio					• •	ea with,				
a [_ `` `		·				ization(a)				
d L	Type III non-functionally					• • • • • •	* *				
	that is not functionally int	-		•		•	iveness				
	requirement (see instruct	•	•	•							
e L	Check this box if the orga					Type I, Type II, Type III					
	functionally integrated, o	* *	nally integrated supportir	ng organiz	ation.						
	ter the number of supported of	•									
g Pro	ovide the following information		d organization(s). (iii) Type of organization	(iv) Is the ora:	anization listed	[(-) Amazinat of managed and	(vi) Amazumt of other				
	(i) Name of supported organization	(ii) EIN	(described on lines 1-10	in your governi	ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
	organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)				

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

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

36(tion A. Public Support		<u> </u>	•			
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.						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						_
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3)	
	organization, check this box and stop	here					>
Sec	tion C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2021 (li	ine 6, column (f), d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2021. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶∟
b	33 1/3% support test - 2020. If the o						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organize	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		>
b	10% -facts-and-circumstances test	- 2020. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is 1	0% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, che	ck this box and st	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	ımstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	>

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.)

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to r expended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.1	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

132023 01-04-22

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 EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

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

		Yes	No
	1		
	2		
	За		
	3b		
	3с		
	4a		
	4b		
	4-		
	4c		
	Fo		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
مان	A (Form	n 000)	2021

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

of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

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Pal	T V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrated	d Type III supporting orga	nization (see
	instructions).	-		

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service **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

2021

Name of the organization	Employer identification number
BUFFALO COMMONS CHARTER SCHOOL	85-4160029

Organization type (check one):			
Filers of	:	Section:	
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 99	0-PF	501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.	
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or	
	property) from any	one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.	
Special	Rules		
	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one 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; line 1. Complete Parts I and II.	
	contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.	
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively, etc., contributions totaling \$5,000 or more during the year	
answer '	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).	

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Name of organization Employer identification number

BUFFALO COMMONS CHARTER SCHOOL

85-4160029

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$337,384.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 32,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization Employer identification number

BUFFALO COMMONS CHARTER SCHOOL

85-4160029

(a) No. from Part I	(6.)		
Faiti	(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

Name of organization Employer identification number

BUFFAL	O COMMONS CHARTER SCHOO)L		85-4160029	
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)	ons to organizations described in s	ntry. For organizations	at total more than \$1,000 for the yea	
	completing Part III, enter the total of exclusively religious, or Use duplicate copies of Part III if additional s	charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. once	± ► \$	
(a) No.		•			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		(e) Transfer of git	 ft		
		(c) Transfer of gr			
	Transferee's name, address, an	d ZIP + 4	Relationship of tran	sferor to transferee	
(a) No. from	(h) Dumage of with	(a) Has at with	(d) Dooo	vintion of how wift in hold	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		-			
		(e) Transfer of gi	ft		
\vdash	Transferee's name, address, an	nd ZIP + 4	Relationship of tran	sferor to transferee	
(a) Nia					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
Part I					
F					
		(e) Transfer of gi	t		
	Transferee's name, address, an	nd ZIP + 4	Relationship of trar	sferor to transferee	
			•		
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, an	nd ZIP + 4	Relationship of trar	nsferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

BUFFALO COMMONS CHARTER SCHOOL

Employer identification number 85-4160029

Pai	t I Organizations Maintaining Donor Advised I	Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6	S.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ting that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's exc	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advi	sors in writing that grant funds can be u	ised only
	for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other purpose c	onferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the organ	nization answered "Yes" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	(check all that apply).	
	Preservation of land for public use (for example, recreation	n or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form o	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	•		
С	Number of conservation easements on a certified historic struct		
d	Number of conservation easements included in (c) acquired after		I I
	listed in the National Register		
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation easen	•	
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it ho		
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	ndling of violations, and enforcing conse	ervation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, handling	g of violations, and enforcing conservati	on easements during the year
	▶ \$ Does each conservation easement reported on line 2(d) above s	ation the requirements of coation 170/b	\/4\/D\/:\
8		•	
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation	ageoments in its revenue and expense s	
3	balance sheet, and include, if applicable, the text of the footnote	·	
	organization's accounting for conservation easements.	to the organization 3 infancial statement	nts that describes the
Pai	t III Organizations Maintaining Collections of A	rt, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Form 99		
1a	If the organization elected, as permitted under FASB ASC 958,		nd balance sheet works
	of art, historical treasures, or other similar assets held for public	•	
	service, provide in Part XIII the text of the footnote to its financia	,	'
b	If the organization elected, as permitted under FASB ASC 958,		
	art, historical treasures, or other similar assets held for public ex	·	
	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 treasu		
	the following amounts required to be reported under FASB ASC	,	-
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions for		Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

46,409.

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

Schedule D (Form 990) 2021 BUFFALO COM	MONS CHARTER	SCHOOL	85-4160029 Page 3
Part VII Investments - Other Securities. Complete if the organization answered "Yes"	on Form 000 Port IV line	11h Coo Form 000 Port V line 1	2
(a) Description of security or category (including name of security)	(b) Book value		st or end-of-year market value
(1) Financial derivatives	(b) Book value	(e) Modried of Valuation.	or or one or your marker value
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) Total (Col. (h) must agual Form 000, Port V. col. (P) line 12)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11c. See Form 990. Part X. line 1	3.
(a) Description of investment	(b) Book value		st or end-of-year market value
(1)			•
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part X. line 1	5.
	Description		(b) Book value
(1)	1		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		>
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X	, line 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
<u>(7)</u>			
(8)			I

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Schedule D (Form 990) 2021

(9)

Schedule D (Form 990) 2021

SCHEDULE E

(Form 990)

Part I

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

BUFFALO COMMONS CHARTER SCHOOL

Employer identification number 85-4160029

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
	homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II THE SCHOOL'S NONDISCRIMINATORY POLICY IS PRESENTED ON ITS	3	Х	
	WEBSITE.			
	December a construction are single the fallowing O			
_	Does the organization maintain the following? Records indicating the recipil composition of the student bady, faculty, and administrative staff?	40	Х	
d	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4a 4b	22	Х
n	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	40		 ^
C		4c	х	
ч	with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
u	If you answered "No" to any of the above, please explain. If you need more space, use Part II.	40	25	
	QUESTION 4B IS NOT APPLICABLE AS THE SCHOOL DOES NOT PROVIDE			
	SCHOLARSHIPS OR FINANCIAL ASSISTANCE.			
	SCHOLARSHIPS OR FINANCIAL ASSISTANCE.			
	Does the organization discriminate by race in any way with respect to:			v
	Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a		X
	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies?	5b		Х
a b c	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff?	5b 5c		X
b c d	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance?	5b 5c 5d		X X
a b c d	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	5b 5c 5d 5e		X X X
b c d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities?	5b 5c 5d 5e 5f		X X X X
a b c d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g		X X X X
a b c d e f g	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f		X X X X
b d e f	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g		X X X X
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	X X	X X X X
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	X	X X X X X
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h	X	X X X X X X X
a b c d e f g h	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	X	X X X X X

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

Schedule E (Form 990) 2021

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

BUFFALO COMMONS CHARTER SCHOOL

Employer identification number 85-4160029

20111120 0011101(8 01111111111 0011001 00 1110101)
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ACADEMICALLY AND PROFESSIONALLY REGARDLESS OF BACKGROUND AND
CIRCUMSTANCE.
FORM 990, PART VI, SECTION B, LINE 11B:
MANAGEMENT AND THE BOARD OF TRUSTEES REVIEW AND APPROVE THE 990 PRIOR TO
FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
ALL BOARD MEMBERS ARE REQUIRED TO COMPLETE CONFLICT OF INTEREST FORMS
ANNUALLY AS REQUIRED BY THE NEW YORK STATE EDUCATION DEPARTMENT.
FORM 990, PART VI, SECTION B, LINE 15:
THE BOARD OF DIRECTORS USE COMPARATIVE SALARY INFORMATION FROM SIMILAR
POSITIONS IN OTHER LOCAL CHARTER SCHOOLS, AMONG OTHER FACTORS AND
INFORMATION, TO DETERMINE KEY EMPLOYEE COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19:
ALL GOVERNING DOCUMENTS AND POLICIES ARE AVAILABLE UPON REQUEST.
FORM 990, PART XII, LINE 2C
THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Disclosure of Financial Interest by a Current or Former Trustee

Tr	ustee Name:
	Jesi Miller
Na	me of Charter School Education Corporation:
	Buffalo Commons Charter School
_	
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).
	Vice chair
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation?
	Yes No If Yes, please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if the student could benefit from your participation.
	Parent
	Na

4.	Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if this person could benefit from your participation.
5.	Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?
	Yes No
	If Yes , please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.

X None

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

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

None None

Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest
Arts for Learning	Arts		Role @ A4L Program Courdinator	

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Business Telephone:	
Business Address:	
E-mail Address:	
Home Telephone:	<u>_</u>
Home Address:	
J	
4	
	8/23/23
Signature	Date

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

Tr	Frustee Name:					
Ja	veena Edwards					
Na	ame of Charter School Education Corporation:					
Ja	veena A Edwards					
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).					
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation?					
	Yes No If Yes, please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.					
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation? Yes No					
	If Yes , please describe the nature of your relationship and if the					

Javeena A Edwards - Javeena Edwards

4.	benefit from your participation as a board member of the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if this person could benefit from your participation.
5.	Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?
	
	If Yes , please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

Javeena A Edwards - Javeena Edwards

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

Javeena A Edwards Javeena Edwards

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

Javeena A Edwards - Javeena Edwards

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Signature	Date	
(Aug 23, 2023 17:00 EDT)	8/23/2023	
Home Address:		
Llama Address:	· · · · · · · · · · · · · · · · · · ·	
Home Telephone:		
E-mail Address:		
Business Address:		
Business Telephone:		

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

Tr	ustee Name:		
	ri Goldberg		
	Name of Charter School Education Corporation: Ari/Goldberg		
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).		
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation? Yes No If Yes, please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.		
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation? Yes No If Yes, please describe the nature of your relationship and if the student could benefit from your participation.		

Ari/Goldberg - Ari Goldberg

4.	Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation? Yes No If Yes, please describe the nature of your relationship and if this person could benefit from your participation.
5.	Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities? Yes No If Yes, please provide a description of the position(s) you hold, your
	responsibilities, your salary and your start date.

Ari/Goldberg - Ari Goldberg

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

Ari/Goldberg _ Ari Goldberg

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

Ari/Goldberg - Ari Goldberg

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Business Telephone:	
Business Address:	
E-mail Address:	
Home Telephone:	
Home Address:	
6	
	august 24, 2023
Signature	Date

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

Tr	ustee Name:
	abrina Robazza
Na	ame of Charter School Education Corporation:
Вι	uffalo Commons Charter School
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation? Yes No If Yes, please describe the nature of your relationship and the person's
	position, job description, and other responsibilities with the school.
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if the student could benefit from your participation.

4.	Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if this person could benefit from your participation.

5. Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?

Yes V No

If **Yes**, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Signature	Date	
S EDT)	8/24/2023	
	·	
Home Address:		
<u></u>		
Home Telephone:		
E-mail Address:		
Business Address:		
Business Telephone:		

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

_	For all on Manua				
	ustee Name:				
1 r —	rey Thompson				
NI.	one of Charter Cabool Edwartian Company tions				
	ame of Charter School Education Corporation:				
В	uffalo Commons Charter School				
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).				
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation?				
	Yes No				
	If Yes , please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.				
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation?				
	Yes No If Yes, please describe the nature of your relationship and if the				
	student could benefit from your participation				

4.	Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if this person could benefit from your participation.

5. Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?

Yes	No
162	INC

If **Yes**, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Date	
8/24/23	
	_
	_
	_
-	_
	_
	8/24/23 Date

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

Tr	ustee Name:
Da	anielle Bruno
Na	ame of Charter School Education Corporation:
Βι	uffalo Commons Charter School
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation? Yes No If Yes, please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation? Yes No If Yes, please describe the nature of your relationship and if the

4. Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation?
Yes No
If Yes, please describe the nature of your relationship and if this person could benefit from your participation.

5. Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?

Yes No

If **Yes**, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Business relepnone:	
	 -
Business Address:	
	 -
E-mail Address:	
	 -
Home Telephone:	
	 -
Home Address:	
	 -
Da Aug 24, 2023 19:18 EDT)	

Date

Acceptable signature formats include:

Signature

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

	Trustee Name: Mark Baetzhold		
	ame of Charter School Education Corporation: uffalo Commons Charter School		
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).		
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation? Yes No If Yes, please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.		
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation? Yes No If Yes, please describe the nature of your relationship and if the student could benefit from your participation.		

4. Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation?
Yes No
If Yes, please describe the nature of your relationship and if this person could benefit from your participation.

5. Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?

Yes No

If **Yes**, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Signature	Date
· ·	August 25, 2023
Home Address:	
Home Telephone:	
E-mail Address:	
business Address:	
Business Address:	
Business Telephone:	

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

_				
	Trustee Name:			
Kı	rystle Hinton			
NI.	owe of Charter Cabool Education Comparation.			
	ame of Charter School Education Corporation:			
В	uffalo Commons Charter School			
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).			
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation? Yes No			
	If Yes , please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.			
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation?			
	Yes No If Yes, please describe the nature of your relationship and if the student could benefit from your participation.			

4.	Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if this person could benefit from your participation.
	benefit from your participation.
_	
5.	Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?
	Yes No

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Signature	Date
K 45 EDT)	August 30th 2023
Home Address:	
Home Telephone:	
E-mail Address:	
Business Address:	
Business Telephone:	

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

Disclosure of Financial Interest by a Current or Former Trustee

Tr	Frustee Name:					
La	atricia Davis					
Na	ame of Charter School Education Corporation:					
La	tricia Davis					
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).					
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation? Yes No If Yes, please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.					
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any student currently enrolled in a school operated by the education corporation? Yes No If Yes, please describe the nature of your relationship and if the					

Latricia Davis - Latricia Davis

4.	Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation?
	Yes No If Yes, please describe the nature of your relationship and if this person could benefit from your participation.
5.	Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities?
	Yes No
	If Yes , please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

Latricia Davis - Latricia Davis

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

Latricia Davis Latricia Davis

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

Latricia Davis - Latricia Davis

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Business Telephone:		
Business Address:		
E-mail Address:		
Home Telephone:		
Home Address:		
	9/10/2023	
Signature	Date	

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF

Disclosure of Financial Interest by a Current or Former Trustee

Tr	Гrustee Name:					
Jc	sefina Paez					
Na	ame of Charter School Education Corporation:					
Jo	sefina Paez					
1.	List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).					
2.	Are you related, by blood or marriage, to any person employed by the school and/or education corporation?					
	Yes No					
	If Yes , please describe the nature of your relationship and the person's position, job description, and other responsibilities with the school.					
3.	Are you related by blood, or marriage, or legal adoption/guardianship to any					
-	student currently enrolled in a school operated by the education corporation?					
	☐ Yes ✓ No					
	If Yes , please describe the nature of your relationship and if the student could benefit from your participation.					

Josefina Paez - Josefina Paez

4. Are you related, by blood or marriage, to any person that could otherwise benefit from your participation as a board member of the education corporation? **V** No Yes If Yes, please describe the nature of your relationship and if this person could benefit from your participation. **5.** Are you a past, current, or prospective employee of the charter school, education corporation, and/or an entity that provides comprehensive management services ("CMO"), whether for-profit or not-for-profit, which contracts, or may contract, with the charter school or education corporation; or do you serve as an employee, officer, or director of, or own a controlling interest in, a business or entity that contracts, or does business with, or plans to contract or do business with, the charter school, education corporation, and/or a CMO, whether for-profit or not-for-profit, including, but not limited to, the lease of real or personal property to the said entities? Yes If Yes, please provide a description of the position(s) you hold, your responsibilities, your salary and your start date.

Josefina Paez - Josefina Paez

6. Identify each interest/transaction (and provide the requested information) that you, any of your immediate family members, and/or any persons who you reside with have held or engaged in with the charter school(s) operated by the education corporation during the time you have served on the Board, and in the six months prior to such service. If there has been no such interest or transaction, check **None**.



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

Josefina Paez Josefina Paez

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



Organization conducting business with the school(s)	Nature of business conducted	Approximate value of the business conducted	Name of Trustee and/or immediate family member of household holding an interest in the organization conducting business with the school(s) and the nature of the interest	Steps taken to avoid conflict of interest

Josefina Paez - Josefina Paez

This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.

Signature	Date	
J 3 EDT)	9/7/2023	
Home Address:		
Home Telephone:		
E-mail Address:		
Business Address:		
Business Telephone:		

Acceptable signature formats include:

- Digitally certified PDF signature
- Print form, manually sign, scan to PDF



School Year 2023-24 Calendar

			JUL	-							JAN	1		
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		DAYS IN	SESSION		
Month	Teacher	Student	Month	Teacher	Student
JUL	0	0	JAN	21	20
AUG	9	0	FEB	16	16
SEP	20	19	MAR	20	20
OCT	21	21	APR	17	17
NOV	18	18	MAY	22	22
DEC	16	16	JUN	19	17
	T	OTALS		199	186

IMPORTA	NT DATES
August	January (cont.)
21-31 - Teacher Workdays	
September	2 - Teacher Workday
1 - Teacher Workday (cont.)	15 - MLK Day Observed
4 - Labor Day Observed	26 - End of 2nd Quarter (Full Day)
5-7 - Orientation Days (Early Dismissal)	February
8 - First Full Day of Classes	19-23 - Midwinter Recess
27 - Early Dismissal	28 - Early Dismissal
October	March
9 - Indigenous Peoples &	27 - Early Dismissal
Italian-Heritage Day Observed	28 - End of 3rd Quarter (Full Day)
25 - Early Dismissal	29 - Spring Recess
November	April
3 - End of 1st Quarter (Full Day)	1-5 - Spring Recess (con't)
7 - Election Day	24 - Early Dismissal
10 - Veterans' Day Observed	May
15 - Early Dismissal	15 - Early Dismissal
23-24 - Thanksgiving Recess	27 - Memorial Day Observed
December	June
20 - Early Dismissal	14 - End of 4th Quarter (Full Day)
25-29 - Winter Recess	19 - Juneteenth Observed
January	26 - Last Day of Classes
1 - New Years' Day Observed	27-28 - Teacher Workdays

	KE	Υ	
Te	eacher Workday (No Students)		Early Dismissal (12:00PM)
Sc	chool is Closed		End of Term (Full Day)

	CONTACT
Phone	716-815-2672
Email	hello@buffalocommonscharter.org
Website	www.buffalocommonscharter.org

All Together Different.

The University of the State of New York
THE STATE EDUCATION DEPARTMENT

revised 11.12.2020

State Office of Religious and Independent Schools - Room 1078 Education Building Annex Albany, New York 12234

NONPUBLIC FIRE AND BUILDING SAFETY REPORT

Per NYS Education Law 807-A(1) All school buildings containing classroom, dormitory, laboratory, physical education, dining or recreational facilities for student use, which are owned, operated, or leased by nonpublic schools must be inspected at least annually for hazards which may endanger the lives of students, teachers and employees therein and for compliance with applicable sections of 8NYCRR155 Regulations of the Commissioner of Education and for compliance with the 2020 Building Code of New York State, 2020 Fire Code of New York State and the 2020 Property Maintenance Code of New York State.

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INSTRUCTIONS

- Read the "Manual for Nonpublic School Facility Fire & Building Safety Inspections" prior to inspecting the facility and complete a separate report for each facility/building and location.
- Part I: General Information. School officials must complete this section annually.
- Part II:
 - Items 08A-2 through 08E-2 on the Non-Conformance Report Sheet Must be completed for facilities with electrically operated partitions per Regulations of the Commissioner 155.25
 - Items 09A-2 through 26 on the Non-Conformance Report Sheet Must be completed for all facilities per 2020 Fire Code of New York State and the 2020 Property Maintenance Code of New York State.
- Part III (A, B, C & D) Certifications -To be completed by individuals as indicated.

A copy of this form must be kept on file at the school for three years and must be available for public review.

Part I: General Information and Fire/Life Safety History (complete annually) **Inspection Date** 04/11/23 Note: Please insert the date the actual inspection took place. Inspections shall be performed between July 1st and December 1st of the current school year. 1. Please indicate the primary use of this facility: ✓ STUDENT INSTRUCTION OTHER STUDENT USE Please Specify: O NO 2. Is there a fire sprinkler system in this facility? Ø YES **Ø** YES If 'yes', is the sprinkler alarm connected with the building alarm? NO 3. Is there a fire hydrant system for facility protection? **Ø** YES O NO If YES, indicate ownership of system (select one): public owned school owned other (please specify) 4. Indicate the ownership of this facility Ø LEASED O OWNED 5. What is the current gross Square footage of this facility? 10,350 (to the nearest whole ten feet) 6. Fire and Emergency Drills a. Per Section 807, paragraph 2 of the New York State Education Law entitled Fire and Emergency Drills, confirm that a copy of Section 807 has been printed and distributed as guidance to teaching staff as required _____YES __ b. Provide dates of twelve fire and emergency drills required by Section 807 of Education Law held between September 1st and June 30th of the previous school year:

FIRE & EMERGENCY DRILLS

NOTE Eight (8) are required between September 1, and December 31 Eight (8) drills are required to be evacuation drills. Four (4) drills are required to be lockdown drills

	Date	Evacuation	Lockdown
1	NA		
2	10		
3			
4			
5			
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12			

c. If the required number of fire and emergency drills were not held during this reporting cycle, please describe the reason:

Average time to evacuate this facility was:		
A versue time to evacuate this facility was:	minutes	1
i. Average time to evacuate this facility was.	minutes	seconds
the Education Law (revised 9/1/05) which requires	every school in New York Star	te to provide a
	YES	NO
Have there been any fires in this facility since the last a	nnual fire safety inspection repo	ort? ′ NO
a. If YES, indicate:		
b.	total numl	ber of injuries
•	the Education Law (revised 9/1/05) which requires minimum of 45 minutes of instruction in arson at safety for each month that school is in session. Confirm that employee fire prevention, evacuati records maintained are being maintained in accord code ve there been any fires in this facility since the last a a. If YES, indicate: b	Confirm that employee fire prevention, evacuation and fire safety training was records maintained are being maintained in accordance with Section F406 of Code YES ve there been any fires in this facility since the last annual fire safety inspection repo YES a. If YES, indicate:total no

	ctotal cost of property date	mage
8.	If the fire alarm system was activated since the last fire safety inspection, was the fire department immediately notified in accordance with Section F401.3.2 of the NYS Fire Code?	
	NA YES	_NO

Part II: Nonpublic School Fire & Building Safety Non-Conformance Report Sheet

School Name BUGGALO COMMONS CHATTE Building Name 833 MICHIGAN AVE

Item #	Non- Conformanc	Date Corrected	Item #	Non- Conformanc	Date Corrected		Item #	Non- Conformanc	Date Corrected	
08A-2	-	- 1	14A-2				20A-1		-	
08B-2			14B-2				20B-1			
08C-2			14C-2				20C-1			
08D-2			14D-1							4
08E-2			14E-1		-		21A-3			THE SECOND
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12H-1			18C-2							
12I-1			18D-2				55			
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12K-1		1.00	19A-3				-	T	4	
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12M-1			19C-1			KARLES E		inspector ed with a		
12N-1		191	19D-1			dolesi		us year's		
120-2			19E-1					safety re		111 6
			19F-1			All si	8	saicty 16	port.	
13A-2		337	19G-1				Yes	1	No	
13B-2	1	804	19H-2	1		100000000000000000000000000000000000000	E 10_			

Part III: NonPublic School Certifications All sections are required to be completed: Section III-A; III-B III-C & III-D

Which method(s) did the school authorities use to complete the annual fire safety inspection for this building?
Check appropriate box or boxes
Inspection by the fire department of the city, town, village or fire district in which the building is located
☐ Inspection by a fire corporation whose territory includes the school building
☐ Inspection by the county fire coordinator , or the officer performing the powers and duties of a county fire
eoordinator pursuant to a local law, of the county in which the building is located
Inspection by a fire inspector (Building Safety Inspector or Code Enforcement Official) who holds a valid
certification
For additional information regarding these methods, please see: https://www.nysenate.gov/legislation/laws/EDN/807-A
Section III-B-Fire Inspection by Local Fire Department, Fire District, Fire Corporation, County Fire
Coordinator and/ or Fire Inspector (Building Safety Inspector or Code Enforcement official) who holds a valid
certification.
The individual noted below inspected this building on 4/11/23 (date) and the information in this Report
represents, to the best of their knowledge and belief, an accurate description of the building and conditions they
observed. The individual that performed this inspection has maintained their certification requirements pursuant to 19
NYCRR 1208-3.1.
Inspector's Name: Marcia, Spates Title: Lieutanant
Signature: Date: 4/11/2023
Date. 11 1 2025
Inspector's Organization
Inspector's Organization: VCI44 of Bottolo, Rottelo File
1 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Inspector's Telephone #: 11 851 5707 Inspector's Email: mispetes @ bidny.ueq
, , , , , ,
Inspector's Code Enforcement Certification # 1070 - 6340
(as assigned by the NYS Department of State)
Section III-C Contact info for the Authority-Having-Jurisdiction [AHJ] Local Municipality, Town or Village
Name of Local/Municipal Code Enforcement Office: CITY OF BUFFALO, BUFFALO FIRE
Address: 65 NIAGARA SQUARE #321
RUFFACO, NY 14202
Name of contact person: MARVIN SPATES Title: LIEUTENANT
Telephone #: 7/6-851-507 Email address: MSPATES@BEDNY.ORG
Section III-D School or Building Administrator, Director, or Headmaster
The individual noted below certifies that this building was inspected as indicated in Section III-A above and
hereby submits this fire inspection report on behalf of the Board of Trustees and certifies that:
1. Public notice of report availability has been published, and that
2. Any nonconformances noted as corrected on the <i>Nonpublic School Fire Safety Non-Conformance Report</i>
Sheet portion of this report were corrected on the date indicated, and that
3. Violations which were not corrected immediately shall be corrected within an accepted period of time as
approved by the Commissioner.
Name: ASH / GOMANS Title: OPERATIONS ASST
Signature: Telephone #:
Email: AYEOMAN S (2) BUFFFALOCOMMONSCHARTER.ORG



CERTIFICATE OF OCCUPANCY

VALID FOR FACILITY:

#8-001 LEASED CLASSROOMS
2 & 3RD FLRS=BENNETT FAMILY LIFE CNTR
BUFFALO, NEW YORK 14203

Building ID: 140600948001

DISTRICT:

BUFFALO COMMONS CHARTER SCHOOL DANIEL BRINK-WASHINGTON 833 MICHIGAN AVE-3RD FL BUFFALO, NEW YORK 14203

Issuance Date: July 05, 2023

Effective Date: March 01, 2023

Expiration Date: March 01, 2024



OBTAIN FIRE SAFETY REPORT FROM DISTRICT OFFICE

THIS CERTIFICATE VOIDS ANY PREVIOUSLY ISSUED