

# Application: KIPP Albany Community Charter School

Jen Pasek - jen@pasekconsulting.com  
2021-2022 Annual Report

## Summary

**ID:** 0000000212  
**Last submitted:** Nov 1 2022 09:15 PM (EDT)  
**Labels:** SUNY Trustees

## Entry 1 School Info and Cover Page

**Completed** Aug 1 2022

### 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 Annual Report portal. 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 2021-2022 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) before 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, 2022)** or you may not be assigned the correct tasks.

## BASIC INFORMATION

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**a. SCHOOL NAME**

(Select name from the drop down menu)

ALBANY COMMUNITY CHARTER SCHOOL 800000059310

**a1. Popular School Name**

KIPP Albany Community

**b. CHARTER AUTHORIZER (As of June 30th, 2021)**

Please select the correct authorizer as of June 30, 2022 or you may not be assigned the correct tasks.

SUNY BOARD OF TRUSTEES

**d. DISTRICT / CSD OF LOCATION**

ALBANY CITY SD

**e. DATE OF INITIAL CHARTER**

12/2005

**f. DATE FIRST OPENED FOR INSTRUCTION**

9/2006



**c. School Unionized**

Is your charter school unionized?

No

**h. SCHOOL WEB ADDRESS (URL)**

<https://www.kippcapital.org/>

**i. Total Approved Charter Enrollment for 2021-2022 School Year (exclude Pre-K program enrollment)**

675

**j. Total Enrollment on June 30, 2022 (exclude Pre-K program enrollment)**

676

**k. Grades Served during the 2021-2022 School Year (exclude Pre-K program students)**

Check all that apply

Grades Served

K, 1, 2, 3, 4, 5, 6, 7, 8

I1. DOES THE SCHOOL CONTRACT WITH A CHARTER OR EDUCATIONAL MANAGEMENT ORGANIZATION?

No

FACILITIES INFORMATION

m. FACILITIES

Will the school maintain or operate multiple sites in 2022-2023?

	Yes, 2 sites
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ALBANY COMMUNITY CHARTER SCHOOL 800000059310

School Site 1 (Primary)

## 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 coming year (K-5, 6-9, etc.)	Receives Rental Assistance for Which Grades (If yes, enter the appropriate grades. If no, enter No).
Site 1	"65 Krank Street Albany, NY 12202"	518-433-1500	Albany	K-5	No

### m1a. Please provide the contact information for Site 1.

	Name	Title	Work Phone	Alternate Phone	Email Address
School Leader	Chrisheena Hill	Principal	518-433-1500		<a href="mailto:chill@kipppcapital.org">chill@kipppcapital.org</a>
Operational Leader	Iesha Owens (ES)	Director of Operations	518-433-1500		<a href="mailto:iowens@kipppcapital.org">iowens@kipppcapital.org</a>
Compliance Contact	Jon Thatcher	COO	518-791-4550		<a href="mailto:jthatcher@kipppcapital.org">jthatcher@kipppcapital.org</a>
Complaint Contact	Jon Thatcher	COO	518-791-4550		<a href="mailto:jthatcher@kipppcapital.org">jthatcher@kipppcapital.org</a>
DA A Coordinator	Kelsey Flood		518-433-1500		<a href="mailto:Kflood@kipppcapital.org">Kflood@kipppcapital.org</a>
Phone Contact for After Hours Emergencies	Stephanie Valle	Regional Executive Director	202-271-2176		<a href="mailto:svalle@kipppcapital.org">svalle@kipppcapital.org</a>

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

Private Space

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**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, 2021.**

- **Fire inspection certificates must be updated annually. For the upcoming school year 2022-2023, the fire inspection certificate must be dated after July 1, 2021.**
- **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, 2022.**

**Site 1 Certificate of Occupancy (COO)**

[Krank-COO1 1461859223-COO ACCS.pdf](#)

**Filename:** Krank-COO1 1461859223-COO ACCS.pdf **Size:** 86.0 kB

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**Site 1 Fire Inspection Report**

[KACCES 21.22 Fire Inspections - Krank.pdf](#)

**Filename:** KACCES 21.22 Fire Inspections - Krank.pdf **Size:** 1.6 MB

**KIPP Albany Community**

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**School Site 2**

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## m2. SCHOOL SITES

Please provide information on Site 2 for the upcoming school year.

	Physical Address	Phone Number	District/CSD	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, enter No).
Site 2	42 S. Dove St Albany, NY 12202	518-433-1500	Albany	6-8	No

### m2a. Please provide the contact information for Site 2.

	Name	Title	Work Phone	Alternate Phone	Email Address
School Leader	Tommy Henley	Principal 6-8	518-433-1500		<a href="mailto:thenley@kippcapital.org">thenley@kippcapital.org</a>
Operational Leader	Jonathan Salls	Director of Operations	518-433-1500		<a href="mailto:jsalls@kippcapital.org">jsalls@kippcapital.org</a>
Compliance Contact	Jon Thatcher	COO	518-791-4550		<a href="mailto:jthatcher@kippcapital.org">jthatcher@kippcapital.org</a>
Complaint Contact	Jon Thatcher	COO	518-791-4550		<a href="mailto:jthatcher@kippcapital.org">jthatcher@kippcapital.org</a>
DA A Coordinator	Kelsey Flood		518-433-1500		<a href="mailto:kflood@kippcapital.org">kflood@kippcapital.org</a>
Phone Contact for After Hours Emergencies	Stephanie Valle	Regional ED	202-271-2176		<a href="mailto:svalle@kippcapital.org">svalle@kippcapital.org</a>

**m2b. Is site 2 in public (co-located) space or in private space?**

Private Space

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**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, 2022.**

- **Fire inspection certificates must be updated annually. For the upcoming school year 2022-2023, the fire inspection certificate must be dated after July 1, 2022.**
- **If the fire inspection certificate expires after the August 1, 2022 submission of the Annual Report, please submit the new certificate with the Annual Report entries due on November 1, 2022. Please note in the portal that this is the case**

**Site 1 Certificate of Occupancy (COO)**

[Dove St COO.pdf](#)

**Filename:** Dove St COO.pdf **Size:** 30.1 kB

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**Site 2 Fire Inspection Report**

[KACCMS 21.22 Fire Inspections - S Dove.pdf](#)

**Filename:** KACCMS 21.22 Fire Inspections - S Dove.pdf **Size:** 1.6 MB

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**CHARTER REVISIONS DURING THE 2021-2022 SCHOOL YEAR**

**n1. Were there any revisions to the school's charter during the 2021-2022 school year? (Please include approved or pending material and non-material charter revisions).**

Yes

**n2. Summary of Charter Revisions**

	Category (Select Best Description)	Specific Revision (150 word limit)	Date Approved by BOT (if applicable)	Date Approved by Authorizer (if applicable)
1	Other	Merger with Troy Prep	June 16, 2021	March 17, 2022
2				
3				
4				
5				

**More revisions to add?**

No

**o. Has your school's Board of Trustee's approved a budget for the 2021-2022 FY?**

Yes

**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	Jen Pasek
Position	Consultant
Phone/Extension	518-542-9810
Email	<a href="mailto:jen@pasekconsulting.com">jen@pasekconsulting.com</a>

**p. 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

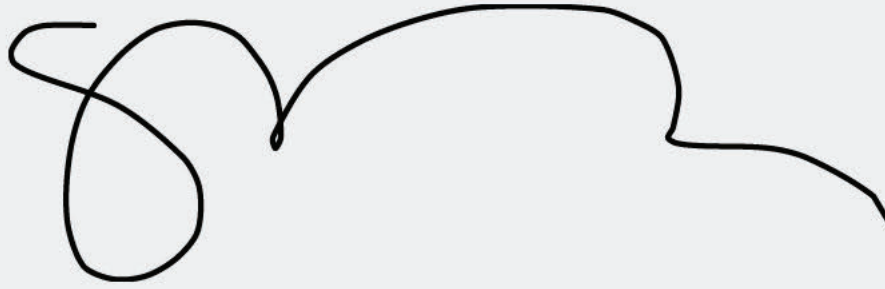
**q. Our signatures (Executive Director/School Leader/Head of School and Board President)** below attest that all of the information contained herein is truthful and accurate and that this charter school is in compliance with all aspects of its charter, and with all pertinent Federal, State, and local 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



**Signature, Head of Charter School**



**Signature, President of the Board of Trustees**



**Date**

(No response)

**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 SUNY Epicenter system by **September 15, 2022**. SUNY CSI will forward to NYSED CSO.

**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 SUNY Epicenter system no later than **November 1, 2022**. SUNY CSI will forward to NYSED CSO. **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 [Annual Report Portal](#) no later than **November 1, 2022**. Upload the independent auditor's report, any advisory and/or management letter, and the internal controls report one submission, combined into 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 2022 but will be identified as a required task thereafter and due on November 1, 2022. This is a required task, and it is marked optional for administrative purposes only.**

## **Entry 4a - Audited Financial Report Template (SUNY)**

**Incomplete**

### **Instructions - SUNY-Authorized Charter Schools ONLY**

SUNY-authorized schools must download the Excel spreadsheet entitled "Audited Financial Report Template" at <http://www.newyorkcharters.org/fiscal/>. After completing, schools must upload the document into the SUNY Epicenter system no later than **November 1, 2022**. SUNY CSI will forward to NYSED CSO.

**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

**Instructions - Regents, NYCDOE and Buffalo BOE authorized schools** must upload financial documents and submit by **November 1, 2022**. The items listed below should be uploaded, with an explanation if not applicable or available. For example, "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. CSP Agreed-Upon Procedure Report
4. Evidence of Required Escrow Account for each school<sup>[1]</sup>
5. Corrective Action Plan for Audit Findings and Management Letter Recommendations

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<sup>[1]</sup> 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 Services 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, 2022**.

## Form for "Financial Services 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	Contact Person	Mailing Address	Email	Phone	Years With Firm

## Entry 5 - Fiscal Year 2022-2023 Budget

### Incomplete

**SUNY-authorized charter schools** should download the [2022-23 Budget and Quarterly Report Template and the 2022-23 Budget Narrative Questionnaire](#) from the SUNY website and upload the completed template into Epicenter. SUNY CSI will forward to NYSED CSO. **Due November 1, 2022.**

**Regents, NYCDOE, and Buffalo BOE authorized charter schools** should upload copy of the school's FY22 Budget using the [2022-2023 Budget Template](#) in the portal or from the Annual Report website. **Due November 1, 2022.**

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** Aug 1 2022

Due on August 1, 2022, 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 2021-2022 school year must complete and sign a [Trustee Disclosure of Financial Interest Form](#). 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 completing the form for trustees who left the board during the reporting year.**

Forms completed from past years will not be accepted. **Only the latest version of the form** (updated in April, 2022) is acceptable.).

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 Disclosure of Financial Interest Form, trustees must disclose information relevant to any of the schools served by the governing education corporation.

### Dr

**Filename:** Dr. Shai Butler KIPP.pdf **Size:** 62.4 kB

### Don Applyrs KIPP Alb

**Filename:** Don Applyrs KIPP Alb.pdf **Size:** 524.1 kB

### Kimbrough - KIPP Alb

**Filename:** Kimbrough KIPP Alb.pdf **Size:** 523.9 kB

### Guy Alonge III KIPP Alb

**Filename:** Guy Alonge III KIPP Alb.pdf **Size:** 525.4 kB

### Robert Bellafiore KIPP Alb

**Filename:** Robert Bellafiore KIPP Alb.pdf **Size:** 526.2 kB

### Kathryn Marie Hohman KIPP ALB

**Filename:** Kathryn Marie Hohman KIPP ALB.pdf **Size:** 525.3 kB

### Kelly Walborn KIPP Alb

**Filename:** Kelly Walborn KIPP Alb.pdf **Size:** 525.6 kB

## [Ron Mexico KIPP Alb](#)

**Filename:** Ron Mexico KIPP Alb.pdf **Size:** 522.4 kB

## [John Reilly KIPP Alb](#)

**Filename:** John Reilly KIPP Alb.pdf **Size:** 524.2 kB

## [Young - KIPP Alb](#)

**Filename:** Young KIPP Alb.pdf **Size:** 525.0 kB

## [Strianese - KIPP Alb](#)

**Filename:** Strianese KIPP Alb.pdf **Size:** 528.0 kB

# Entry 7 BOT Membership Table

**Completed** Aug 1 2022

## 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.

**ALBANY COMMUNITY CHARTER SCHOOL 800000059310**

### Authorizer:

Who is the authorizer of your charter school?

SUNY

### 1. 2021-2022 Board Member Information (Enter info for each BOT member)

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	Trustee Name	Trustee Email Address	Position on the Board	Committee Affiliations	Voting Member Per By-Laws (Y/N)	Number of Terms Served	Start Date of Current Term (MM/DD /YYYY)	End Date of Current Term (MM/DD /YYYY)	Board Meetings Attended During 2021-2022
1	John P. Reilly		Chair	Finance	Yes	6	7/1/2019	6/30/2022	10
2	Dr. Shai Butler		Vice Chair	Finance	Yes	2	7/1/2018	6/30/2022	9
3	Carl Young		Secretary	Governance	Yes	4	7/1/2020	6/30/2023	8
4	Guy Alonge III		Treasurer	Finance	Yes	1	1/15/2020	6/30/2022	9
5	Dr. Don-Lee Applys		Trustee/Member	Development	Yes	2	7/1/2021	6/30/2024	8
	Katie		Trustee/	Governance			1/15/20	6/30/20	

6	Hohman		Member	nce	Yes	1	20	22	6
7	Kelly Kimbrough		Trustee/Member	Development	Yes	2	7/1/2021	6/30/2024	5 or less
8	Ron Mexico		Trustee/Member	Finance	Yes	2	7/1/2021	6/30/2024	9
9	Michael Strianese		Trustee/Member	Finance	Yes	5	7/1/2021	6/30/2022	9

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

Yes

## 1b. Board Member Information

	Trustee Name	Trustee Email Address	Pos t on on the Board	Commit tee Affiliatio ns	Vot ng Member Per By-Laws (Y/N)	Number of Terms Served	Start Date of Current Term (MM/DD /YYYY)	End Date of Current Term (MM/DD /YYYY)	Board Meeting s Attende d During 2021-2022
10	Kelly Walborn		Trustee/ Member	Governa nce	Yes	3	7/1/2021	6/30/2024	5 or less
11	Robert Bellafor e		Trustee/ Member	Develop ment	Yes	1	12/10/2021	6/30/2024	5 or less
12	LaSone Garland -Bryan		Trustee/ Member		Yes	4	7/1/2020	4/27/2022	5 or less
13	Juanita Nabors		Trustee/ Member	Ad ocac y	Yes	6	7/1/2020	9/22/2021	5 or less
14									
15									

## 1c. Are there more than 15 members of the Board of Trustees?

No



## 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, 2022	11
b.Total Number of Members Added During 2021-2022	1
c. Total Number of Members who Departed during 2021-2022	2
d.Total Number of members, as set in Bylaws, Resolution or Minutes	11

### 3. Number of Board meetings held during 2021-2022

10

### 4. Number of Board meetings scheduled for 2022-2023

12

### Total number of Voting Members on June 30, 2022:

11

### Total number of Voting Members added during the 2021-2022 school year:

1

Total number of Voting Members who departed during the 2021-2022 school year:

2

Total Maximum Number of Voting members in 2021-2022, as set by the board in bylaws, resolution, or minutes:

11

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 2021-June 2022), which should match the number of meetings held during the 2021-2022 school year, 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, 2022**.

## Entry 9 Enrollment & Retention

**Completed** Aug 1 2022

### **Instructions for submitting Enrollment and Retention Efforts**

#### **Required of ALL Charter Schools**

Describe the good faith efforts the charter school has made in 2021-2022 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 2022-2023.

## Entry 9 Enrollment and Retention of Special Populations

### **Recruitment/Attraction Efforts Toward Meeting Targets**

	Describe Recruitment Efforts in 2021-2022	Describe Recruitment Plans in 2022-2023
Economically Disadvantaged	<p>We continue to recruit from low income neighborhoods surrounding the school and throughout the district. We offer free breakfast and lunch to all students. A parent coordinator is available to assist families in completing all necessary registration paperwork.</p>	<p>In 2021-2022, our percentage of ED students was 77% and our district was 70%. Going forward, we will continue with the strategies at the left.</p>
English Language Learners	<p>We have an enrollment preference in place for English Language Learners. We also do the following to attract and enroll ELLS:</p> <ul style="list-style-type: none"> <li>-Other advertising (e.g. radio, TV, flyer) in languages other than English</li> <li>- Outreach by multi-lingual staff</li> <li>- Outreach to immigrant community/ies</li> <li>- Outreach to specialized feeder schools and programs</li> <li>-Advertising and school materials are translated as needed</li> <li>- Targeted social media marketing to non-English speaking communities. A Google language translator dropdown has been added to the school website</li> <li>- School information session(s) will be held in trusted cultural centers in the community to attract more families who speak a language other than English</li> <li>- Advertising materials will be distributed in the primary languages other than English spoken in the area</li> <li>- With notice, translators will be made available for families at</li> </ul>	<p>Going forward, we will continue with current practices.</p>

	school events, such as parent-teacher conferences.	
Students with Disabilities	<p>We also offer an enrollment lottery preference to Students with Disabilities. Our school website mentions our special needs services.</p> <ul style="list-style-type: none"> <li>-Other advertising (e.g. radio, TV, flyer) that mentions special needs</li> <li>-Outreach to specialized feeder schools and programs.</li> </ul>	<p>In 2021-2022, our percentage of SWD was 3%.</p> <p>Going forward, we will adding a Director of Special Education, a regional leadership position, who will help build and strengthen our school-based SPED programs.</p>

### Retention Efforts Toward Meeting Targets

	Describe Retention Efforts in 2021-2022	Describe Retention Plans in 2022-2023
Economically Disadvantaged	<p>KIPP Albany Community provides a safe learning environment where students' individual social and academic learning needs are addressed and where parents are treated as partners. We have an open door policy for parents to visit classrooms. The family-based atmosphere with strong community engagement produces an environment where families want to stay enrolled.</p> <ul style="list-style-type: none"> <li>• Free meal program for all students that emphasizes healthy eating</li> <li>• Extended day programming, eliminating the need for working families to provide after school childcare</li> <li>• Access to full time Social Worker to help with social emotional needs of children, including trauma</li> <li>• The school schedule offers academic intervention periods</li> </ul>	<p>Our retention rate for ED students was 86% between 2020-21 and 2021-22.</p> <p>Going forward, we are continuing to engage with families and our communities as a component of our retention strategy. As our scholars return to the classroom after remote learning, we are especially concerned with supporting at-risk groups with academic support as well as social-emotional needs. We are confident that the programs we have in place, including daily interventions, family workshops, and after-school will promote the</p>

	<p>twice during the day.</p> <ul style="list-style-type: none"> <li>• There is extended-day programing and, after-school tutoring.</li> <li>• The school offers workshops for parents on topics such as how to support student literacy at home."</li> </ul>	retention of this group.
English Language Learners	<p>ELL students are provided enriching and appropriate instruction according to their level of English Language Proficiency. We monitor the progress and success of all at-risk students. Teachers are aware of their students' progress toward meeting English language proficiency goals. The Principal and Director of Student Support Services and our full-time ENL teacher monitors the progress of all ENL students via regularly administered assessments in ELA and mathematics. Based on student performance and progress on assessments, our teachers collaborate to adjust services to fit the needs of students. All entering students are screened for eligibility for ELL services via the NYSITELL. Students are administered the New York State English as a Second Language Achievement Test ("NYSESLAT") at the end of the year to determine their eligibility for ELL services in the following year.</p> <p>1) Robust family engagement and outreach program which include home visits, student conferences and monthly</p>	<p>Our retention rate for ELLs was 100% between 2020-21 and 2021-22.</p> <p>As with ED students, we are particularly focused on supporting our ELLs with the transition back to in-person learning in the 2021-22 school year. We will continue to implement the strategies stated on the left.</p>

	<p>meetings with school leadership</p> <ul style="list-style-type: none"> <li>• Bilingual staff members that are present at events to help with translations and questions</li> <li>• Documents that are sent home to families are translated in the predominate language</li> <li>• Programs within school for supporting ELLs</li> <li>• Dedicated ELL Coordinator and two Intervention Specialists serving this population</li> </ul> <p>2) KIPP AC provides professional development for all teachers to support the academic, social, and emotional needs of ELL students.</p> <p>-School materials are differentiated for students as needed. Going forward, we are making improvements to our instructional program for English Language Learners.</p>	
	<ul style="list-style-type: none"> <li>•ACCS currently provides support and early identification for students who exhibit learning and behavior needs by applying the approach of Response to Intervention. This process begins with high-quality instruction and universal screening of all students through direct observation and data collection. Once identified, learners performing below level are provided with academic interventions at the appropriate level of intensity to accelerate their rate of learning and help students meet grade level standards. These intervention services are provided by a variety of personnel, including general education teachers,</li> </ul>	

## Students with Disabilities

special educators, Academic Intervention specialists and school social workers. Some services include counseling, small group work, individual check-ins, behavior plans, differentiated and targeted questions, differentiated lessons. Progress is closely monitored to assess both the learning rate and level of performance of individual students.

1 )We provide training, professional development and collaborative support to identify at-risk students and help teachers meet students' needs. Special education professionals meet and plan with teachers on a weekly basis during all grade level meetings, and intervention blocks are built into the daily schedule for ELA and Math. The special education teachers provide resources and additional training to instructional staff for best practices in supporting students with disabilities.

2) ACCS provides a consultant teacher model, with a SPED-certified teacher who in pushes into ELA and Math classrooms as well as provides resource room support for SWD learners. In addition we provide speech and occupational therapist to support students speech and language and occupational needs.

3) ACCS has a co-teaching model with two educators in every classroom. The coteaching model maximizes the potential for differentiated instruction by allowing for frequent, flexible small-group instruction.

Our retention rate for SWD was 88% between 2020-21 and 2021-22.

As stated above, we are focused on providing our SWD population with the necessary academic and social-emotional supports to ensure they have the tools they need to experience success in the learning environment.

---

## Entry 10 - Teacher and Administrator Attrition

Completed Aug 1 2022

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

#### A. TEACH System - Employee Clearance

Charter schools must ensure that all prospective employees<sup>[1]</sup> 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 not employed by the school.

<sup>[1]</sup> 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/employee-fingerprint-oct19.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 automatically 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, 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

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, 2022)	
ii. FTE count of uncertified teachers who are tenured or tenure track college faculty (as of June 30, 2022)	
iii. FTE count of uncertified teachers with two years of Teach for America experience (as of June 30, 2022)	
iv. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (as of June 30, 2022)	
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	
. Technology	
. 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, 2022)	
ii. FTE count of uncertified teachers who are tenured or tenure track college faculty (as of June 30, 2022)	
iii. FTE count of uncertified teachers with two years of Teach for America experience (as of June 30, 2022)	
. FTE count of uncertified teachers with exceptional business, professional, artistic, athletic, or military experience (as June 30, 2022)	
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 CERTIFIED 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 2021-2022 **Organization Chart**. The organization chart should include position titles and reporting relationships. Employee names should **not** appear on the chart.

## Entry 13 School Calendar

Completed Aug 1 2022

### [Instructions for submitting School Calendar](#)

#### **Required of ALL Charter Schools**

If the charter school has tentative calendar based on available information and guidance at the time, please submit with the August 1, 2022 submission. Charter schools must upload final school calendar into the portal and may do so at any time but no later than **September 15, 2022**.

School calendars must meet the [minimum instructional requirements](#) 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 indicate the start and end date of the instructional year AND the number of instructional hours and/or instructional days for each month. See an example of calendar showing the requested information. Schools are encouraged to use calendar template and ensure there is monthly tally of instructional days.

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

### **KIPP Cap Calendar 2022-23**

Filename: KIPP Cap Calendar 2022 23.pdf Size: 214.4 kB

## Entry 14 Links to Critical Documents on School Website

Completed Aug 1 2022

### 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 [link](#) 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;
4. 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 building level safety plan (as per the September 2021 [Emergency Response Plan Memo](#));
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 14 Links to Critical Documents on School Website

**School Name: KIPP Albany Community 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:**

	Link to Documents
1. Current Annual Report (i.e., 2021-2022 Annual Report)	<a href="https://app2.boardontrack.com/public/tG1l81/home">https://app2.boardontrack.com/public/tG1l81/home</a>
2. Board meeting notices, agendas and documents	<a href="https://www.kippcapital.org/about/board-of-trustees/">https://www.kippcapital.org/about/board-of-trustees/</a>
3. New York State School Report Card	<a href="https://www.kippcapital.org/alumni-community/">https://www.kippcapital.org/alumni-community/</a>
4. Authorizer-approved DASA Policy and NYSED-Approved School Discipline Policy (For Regents, NYCDOE, and Buffalo BOE-Authorized Charter Schools ONLY)	<a href="https://www.kippcapital.org/alumni-community/">https://www.kippcapital.org/alumni-community/</a>
5. District-wide safety plan, not a building level safety plan (as per the September 2021 Emergency Response Plan Memo	<a href="https://www.kippcapital.org/wp-content/uploads/2021/09/KIPP_Albania_Website-DRAFT_KIPP_Albania_DISTRICT_EOP_FINAL-s_1339483.pdf">https://www.kippcapital.org/wp-content/uploads/2021/09/KIPP Albany Website-DRAFT KIPP Albany DISTRICT EOP FINAL-s_1339483.pdf</a>
6. Authorizer-approved FOIL Policy	<a href="https://www.kippcapital.org/alumni-community/">https://www.kippcapital.org/alumni-community/</a>
7. Subject matter list of FOIL records. (Example: See NYSED Subject Matter List)	<a href="https://www.kippcapital.org/alumni-community/">https://www.kippcapital.org/alumni-community/</a>

Thank you.



## Entry 15 Staff Roster

**Incomplete** Hidden from applicant

### INSTRUCTIONS

#### **Required of Regents and NYCDOE-authorized Charter Schools ONLY**

Please click on the MS Excel [Faculty/Staff Roster Template](#) and provide the following information for **ANY and ALL** instructional and non-instructional employees.

**Use of the 2021-2022 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 deemed necessary. Failure to adhere to the guidelines and validations in the Staff Roster Template will result in resubmission of fully corrected roster.

Please note the roster should include all staff employed any point from July 1, 2021 to June 30, 2022, including those employed on June 30th.

**KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS**

**ALBANY, NEW YORK**

**AUDITED FINANCIAL STATEMENTS**

**OTHER FINANCIAL INFORMATION**

**AND**

**INDEPENDENT AUDITOR'S REPORTS**

**JUNE 30, 2022**

**(With Comparative Totals for 2021)**



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## INDEPENDENT AUDITOR'S REPORT

Board of Trustees  
KIPP Albany Community Public Charter Schools

### **Report on the Financial Statements**

#### ***Opinion***

We have audited the financial statements of KIPP Albany Community Public Charter Schools which comprise the statement of financial position as of June 30, 2022 and the related statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of KIPP Albany Community Public Charter Schools as of June 30, 2022, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

#### ***Basis for Opinion***

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of KIPP Albany Community Public Charter Schools and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### ***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about KIPP Albany Community Public Charter Schools' ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

### ***Auditor's Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of KIPP Albany Community Public Charter Schools' internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about KIPP Albany Community Public Charter Schools' ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

### ***Report on Summarized Comparative Information***

We have previously audited KIPP Albany Community Public Charter Schools' June 30, 2021 financial statements, and we expressed an unmodified opinion on those audited financial statements in our report dated October 22, 2021. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2021 is consistent, in all material respects, with the audited financial statements from which it has been derived.

### ***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated October 27, 2022 on our consideration of KIPP Albany Community Public Charter Schools' internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering KIPP Albany Community Public Charter Schools' internal control over financial reporting and compliance.

*Mengel, Metzger, Baw & Co. LLP*

Rochester, New York  
October 27, 2022

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF FINANCIAL POSITION

JUNE 30, 2022

(With Comparative Totals for 2021)

<u>ASSETS</u>	June 30,	
	<u>2022</u>	<u>2021</u>
<u>CURRENT ASSETS</u>		
Cash and cash equivalents	\$ 12,242,566	\$ 12,566,300
Grants and contracts receivable	2,783,398	1,230,187
Accounts receivable, net of allowance for uncollectible accounts of \$800,000 and \$429,000, respectively	1,245,602	914,697
Prepaid expenses	92,481	100,059
Inventory	87,902	136,093
TOTAL CURRENT ASSETS	16,451,949	14,947,336
<u>PROPERTY AND EQUIPMENT, net</u>	28,782,919	28,604,662
<u>OTHER ASSETS</u>		
Restricted cash - debt services reserve fund	131,665	131,666
Cash designated by Board for operating reserve	351,393	351,357
Cash in escrow	150,335	150,335
Security deposits	3,280	3,280
	636,673	636,638
TOTAL ASSETS	\$ 45,871,541	\$ 44,188,636
<u>LIABILITIES AND NET ASSETS</u>		
<u>CURRENT LIABILITIES</u>		
Current portion of loan payable	\$ 389,985	\$ 371,004
Accounts payable	890,669	698,724
Accrued expenses	107,427	82,446
Accrued payroll and benefits	711,912	544,483
Deferred revenue	5,000	-
TOTAL CURRENT LIABILITIES	2,104,993	1,696,657
<u>OTHER LIABILITIES</u>		
Long-term debt including loan premium of \$4,318,156 and \$4,470,115, respectively, net of loan issuance costs of \$295,299 and \$305,691, respectively	27,610,164	28,141,717
TOTAL LIABILITIES	29,715,157	29,838,374
<u>NET ASSETS</u>		
Without donor restrictions	16,123,132	14,321,068
With donor restrictions	33,252	29,194
TOTAL NET ASSETS	16,156,384	14,350,262
TOTAL LIABILITIES AND NET ASSETS	\$ 45,871,541	\$ 44,188,636

The accompanying notes are an integral part of the financial statements.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS

YEAR ENDED JUNE 30, 2022  
(With Comparative Totals for 2021)

	Without donor restrictions	With donor restrictions	Year ended June 30,	
			2022	2021
			Total	Total
Operating revenue and support:				
Public School District:				
Resident student enrollment	\$ 25,040,203	\$ -	\$ 25,040,203	\$ 22,973,680
Students with disabilities	363,711	-	363,711	232,978
Grants and contracts:				
Federal - Title and IDEA	665,870	-	665,870	606,169
Federal - Other	3,541,328	-	3,541,328	1,240,870
Food service / Child Nutrition Program	1,529,210	-	1,529,210	490,959
TOTAL OPERATING REVENUE AND SUPPORT	31,140,322	-	31,140,322	25,544,656
Expenses:				
Program services:				
Regular education	19,793,302	-	19,793,302	14,724,994
Special education	1,421,185	-	1,421,185	617,365
Other education	2,682,229	-	2,682,229	2,824,796
Management and general	5,860,542	-	5,860,542	4,527,888
TOTAL EXPENSES	29,757,258	-	29,757,258	22,695,043
SURPLUS FROM SCHOOL OPERATIONS	1,383,064	-	1,383,064	2,849,613
Other income (expense):				
Fundraising	21,127	-	21,127	34,027
Contributions	208,959	32,775	241,734	253,659
Interest income	141	-	141	1,744
Other income	160,056	-	160,056	96,925
Debt issuance costs written off and loan prepayment fees	-	-	-	(1,053,697)
Paycheck Protection Program loan forgiveness	-	-	-	1,171,320
Net assets released from restriction	28,717	(28,717)	-	-
	419,000	4,058	423,058	503,978
CHANGE IN NET ASSETS	1,802,064	4,058	1,806,122	3,353,591
Net assets at beginning of year	14,321,068	29,194	14,350,262	-
Net assets at beginning of year, KIPP Tech Valley Charter School	-	-	-	1,024,838
Transfer in of Albany Community Charter School net assets at beginning of year	-	-	-	9,971,833
	14,321,068	29,194	14,350,262	10,996,671
NET ASSETS AT END OF YEAR	\$ 16,123,132	\$ 33,252	\$ 16,156,384	\$ 14,350,262

The accompanying notes are an integral part of the financial statements.



KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF FUNCTIONAL EXPENSES

**YEAR ENDED JUNE 30, 2022**  
(With Comparative Totals for 2021)

	No of Positions	Year ended June 30,					
		2022			2021		
		Program Services			Supporting Services		
		Regular Education	Special Education	Other Education	Sub-total	Management and General	Total
Personnel services costs:							
Administrative Staff Personnel	89	\$ 2,892,766	\$ 289,277	\$ 578,554	\$ 3,760,597	\$ 2,746,429	\$ 6,507,026
Instructional Personnel	135	7,033,460	754,176	-	7,787,636	-	7,787,636
Non-Instructional Personnel	31	-	-	496,923	496,923	345,864	842,787
Total salaries and staff	255	9,926,226	1,043,453	1,075,477	12,045,156	3,092,293	15,137,449
Fringe benefits and payroll taxes							
Retirement		2,800,355	91,999	361,545	3,253,899	361,545	3,615,444
Legal services		450,543	15,244	58,223	524,010	58,223	582,233
Accounting / Audit services		-	-	-	-	116,991	116,991
Other purchased / professional / consulting services		-	-	-	-	141,144	141,144
Repairs and maintenance		632,874	90,901	28,395	752,170	550,959	1,303,129
Insurance		756,604	24,021	97,578	878,203	97,578	975,781
Utilities		-	-	-	-	193,797	193,797
Supplies / materials		333,724	9,304	43,106	386,134	43,106	429,240
Leased equipment		461,982	15,074	-	477,056	-	477,056
Staff development		70,307	967	4,833	76,107	37,445	113,552
Marketing / recruitment		467,273	-	-	467,273	51,920	519,193
Food service		-	-	-	-	100,494	100,494
Student services		-	-	683,520	683,520	-	683,520
Bad debt expense		1,380,632	47,297	-	1,427,929	-	1,427,929
Board expenses		-	-	-	-	371,000	371,000
Office expense		-	-	-	-	11,000	11,000
Depreciation and amortization		162,091	5,201	20,912	188,204	329,496	517,700
Interest		979,508	32,207	126,464	1,138,179	126,464	1,264,643
Dues and subscriptions		826,400	27,539	106,742	960,681	106,742	1,067,423
Other		544,783	17,978	70,345	633,106	70,345	703,451
		-	-	5,089	5,089	-	5,089
		\$ 19,793,302	\$ 1,421,185	\$ 2,682,229	\$ 23,896,716	\$ 5,860,542	\$ 29,757,258
							\$ 22,695,043

The accompanying notes are an integral part of the financial statements

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF CASH FLOWS

YEAR ENDED JUNE 30, 2022  
(With Comparative Totals for 2021)

	Year ended June 30,	
	<u>2022</u>	<u>2021</u>
<u>CASH FLOWS - OPERATING ACTIVITIES</u>		
Change in net assets	\$ 1,806,122	\$ 3,353,591
Adjustments to reconcile change in net assets to net cash provided from operating activities:		
Bad debt expense	371,000	310,230
Depreciation and amortization	1,264,643	969,638
Bond trust account written off	-	1,000
Unamortized debt issuance costs written off	-	872,435
Loan premium accretion reducing interest expense	(151,959)	88,643
Prepayment fees included as part of debt refinancing	-	181,262
Paycheck Protection Program loan forgiveness	-	(1,171,320)
Amortization of loan issuance costs included in interest expense	10,392	6,062
Changes in certain assets and liabilities affecting operations:		
Grants and contracts receivable	(1,553,211)	(873,648)
Accounts receivable	(701,905)	(664,579)
Prepaid expenses	7,578	(59,755)
Inventory	48,191	42,947
Accounts payable and accrued expenses	146,266	486,620
Accrued payroll and benefits	167,429	135,354
Deferred revenue	5,000	-
NET CASH PROVIDED FROM OPERATING ACTIVITIES	<u>1,419,546</u>	<u>3,678,480</u>
<u>CASH FLOWS - INVESTING ACTIVITIES</u>		
Purchases of property and equipment	(1,372,240)	(576,438)
Transfer of cash from Albany Community Charter School	-	7,225,399
Transfer of restricted cash from Albany Community Charter School	-	360,095
Transfer of dissolution escrow from Albany Community Charter School	-	75,050
NET CASH (USED FOR) PROVIDED FROM INVESTING ACTIVITIES	<u>(1,372,240)</u>	<u>7,084,106</u>
<u>CASH FLOWS - FINANCING ACTIVITIES</u>		
Borrowings on long term debt	-	54,537,152
Premium received as part of debt refinancing	-	4,558,757
Repayment of long term debt	(371,005)	(57,224,439)
Termination of interest rate swap as part of debt refinancing	-	(1,374,860)
Debt issuance costs incurred	-	(350,890)
Loan issuance costs incurred	-	(311,753)
NET CASH USED FOR FINANCING ACTIVITIES	<u>(371,005)</u>	<u>(166,033)</u>
NET (DECREASE) INCREASE IN CASH, CASH EQUIVALENTS AND RESTRICTED CASH	<u>(323,699)</u>	<u>10,596,553</u>
Cash, cash equivalents, and restricted cash at beginning of year	<u>13,199,658</u>	<u>2,603,105</u>
CASH, CASH EQUIVALENTS, AND RESTRICTED CASH AT END OF YEAR	<u><u>\$ 12,875,959</u></u>	<u><u>\$ 13,199,658</u></u>

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF CASH FLOWS, Cont'd

YEAR ENDED JUNE 30, 2022  
(With Comparative Totals for 2021)

	<u>Year ended June 30,</u>	
	<u>2022</u>	<u>2021</u>
<u>SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION</u>		
Reconciliation of cash, cash equivalents and restricted cash reported within the statement of financial position that sum to the total amounts shown in the statement of cash flows:		
Cash and cash equivalents	\$ 12,242,566	\$ 12,566,300
Restricted cash - debt service reserve fund	131,665	131,666
Cash designated by Board for operating reserve	351,393	351,357
Cash in escrow	<u>150,335</u>	<u>150,335</u>
Total cash, cash equivalents, and restricted cash shown in the statement of cash flows	<u>\$ 12,875,959</u>	<u>\$ 13,199,658</u>
Cash paid during the year for interest	<u>\$ 1,208,990</u>	<u>\$ 1,037,727</u>
<u>NON-CASH OPERATING AND INVESTING ACTIVITIES</u>		
Purchase of property and equipment through accounts payable	<u>\$ 70,660</u>	<u>\$ -</u>
Non-cash transactions:		
Transfer of assets and liabilities from Albany Community Charter School to KIPP Tech Valley Charter School:		
Accounts receivable	\$ -	\$ 248,909
Inventory	-	175,846
Security deposit	-	3,280
Property and equipment	-	12,227,757
Accounts payable and accrued expenses	-	(120,699)
Accrued payroll and benefits	-	(199,981)
Long-term debt	-	(9,042,227)
Paycheck Protection Program loan payable	-	(1,151,800)
Unamortized debt issuance costs	-	170,204
Unrestricted net assets	-	<u>(9,971,833)</u>
Cash received	<u>\$ -</u>	<u>\$ (7,660,544)</u>

The accompanying notes are an integral part of the financial statements.



## KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

### NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2022

(With Comparative Totals for 2021)

#### NOTE A: THE CHARTER SCHOOL AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

##### The Charter School

KIPP Albany Community Public Charter Schools (the “Charter School”) is an education corporation operating charter schools in Albany, New York.

The Charter School is comprised of Albany Community Charter School (“ACCS”) and KIPP Tech Valley Charter School (“KIPP Tech Valley”). Effective July 1, 2020, ACCS merged with KIPP Tech Valley, with KIPP Tech Valley being the surviving education corporation under the amended name KIPP Albany Community Public Charter Schools.

ACCS was organized in 2006 to operate a charter school for grades K-5, pursuant to Article 56 of the New York State Education Law and in accordance with related charter agreements with the Board of Regents of the University of the State of New York. In January 2012, ACCS received approval to modify its charter renewal and add a middle school program to its existing elementary school program, adding grades 6 through 8 in subsequent years through June 30, 2017. A charter renewal was granted in 2016 and again in 2021, extending the school’s operations for an additional five years, expiring in July 2026.

KIPP Tech Valley was organized in 2004 to operate a charter school for grades 5 through 8, pursuant to Article 56 of the New York State Education Law and in accordance with related charter agreements with the Board of Regents of the University of the State of New York. In 2015, KIPP Tech Valley received approval to modify its charter to include kindergarten through grade 4. A charter renewal was granted in 2010, 2015, and 2020 extending the school’s operations for an additional five years, expiring June 30, 2025.

The Charter School is governed by a Board of Trustees in accordance with the Charter School’s by-laws. The Charter School is a member of Knowledge is Power Program (KIPP) a network of nationally recognized private sector schools through a trademark license agreement with the KIPP Foundation. KIPP provides support and member services to the Charter School to assist the Charter School in fulfilling its mission of preparing all students for future opportunities.

##### Basis of accounting

The accompanying financial statements are prepared on the accrual basis of accounting, in accordance with accounting principles generally accepted in the United States of America (“GAAP”).

##### Classification of net assets

To ensure observance of limitations and restrictions placed on the use of resources available to the Charter School, the accounts of the Charter School are maintained in accordance with the principles of accounting for not-for-profit organizations. This is the procedure by which resources are classified for reporting purposes into net asset groups, established according to their nature and purpose. Accordingly, all financial transactions have been recorded and reported by net asset group.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE A: THE CHARTER SCHOOL AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Cont'd

The assets, liabilities, activities, and net assets are classified based on the existence or absence of donor or grantor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

*Net Assets Without Donor Restrictions*

Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions. The Board of Trustees has discretionary control to use these in carrying on operations in accordance with the guidelines established by the Charter School.

*Net Assets With Donor Restrictions*

Net assets subject to donor (or certain grantor) imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Net assets with donor restrictions were \$33,252 and \$29,194 at June 30, 2022 and 2021 respectively.

Revenue recognition

Revenue from Exchange Transactions: The Charter School recognizes revenue in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Update (ASU) 2014-09, Revenue from Contracts with Customers, as amended. ASU 2014-09 applies to exchange transactions with customers that are bound by contracts or similar arrangements and establishes a performance obligation approach to revenue recognition.

The Charter School records substantially all revenues over time as follows:

State and local per pupil revenue

The Charter School recognizes revenue as educational programming is provided to students throughout the year. The Charter School earns state and local per pupil revenue based on the approved per pupil tuition rate of the public school district in which the pupil resides. The amount received each year from the resident district is the product of the approved per pupil tuition rate and the full-time equivalent student enrollment of the Charter School. Each NYS school district has a fixed per pupil tuition rate which is calculated annually by NYSED in accordance with NYS Education Law. Amounts are billed in advance every other month and payments are typically received in six installments during the year. At the end of each school year, a reconciliation of actual enrollment to billed enrollment is performed and any additional amounts due or excess funds received are agreed upon between the Charter School and the district(s) and are paid or recouped. Additional funding is available for students requiring special education services. The amount of additional funding is dependent upon the length of time and types of services provided by the Charter School to each student, subject to a maximum amount based upon a set rate for each district as calculated by NYSED.

Contract balances consisted of \$1,245,602, net of allowances, \$914,697, net of allowances, and \$356,539 of grants and contracts receivable at June 30, 2022, 2021, and 2020, respectively.

## KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

### NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

#### NOTE A: THE CHARTER SCHOOL AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Cont'd

##### Contributions

Contributions received are recorded as without donor restrictions or with donor restrictions support depending on the existence and/or nature of any donor-imposed restrictions. The Charter School reports grants of cash and other assets as restricted support if they are received with stipulations that limit their use. When a restriction expires, that is, when a stipulated time or purpose restriction is accomplished, donor restricted net assets are reclassified to without donor restriction net assets and reported in the Statement of activities as net assets released from restrictions. The Charter School reports restricted grants as unrestricted support whenever the restrictions are met in the same year the grants are received.

##### Grant revenue

Some of the Charter School's revenue is derived from cost-reimbursable federal and state contracts and grants, which are conditioned upon certain performance requirements and/or the incurrence of allowable qualifying expenses. Amounts received are recognized as revenue when the Charter School has incurred expenditures in compliance with specific contract or grant provisions. Certain grants are subject to audit and retroactive adjustments by its funders. Any changes resulting from these audits are recognized in the year they become known. Qualifying expenditures that have been incurred but are yet to be reimbursed are reported as grants receivable in the accompanying statement of financial position.

##### Cash and cash equivalents

Cash and cash equivalents balances are maintained at financial institutions located in New York and are insured by the Federal Deposit Insurance Corporation up to \$250,000 at each institution. Cash equivalents include all high liquid instruments with maturities of three months or less when acquired. In the normal course of business, the cash account balances at any given time may exceed insured limits. However, the Charter School has not experienced any losses in such accounts and does not believe it is exposed to significant risk in cash and cash equivalents.

##### Cash in escrow

The Charter School maintains cash in an escrow account in accordance with the terms of its charter agreements. The amount in escrow was \$150,335 at both June 30, 2022 and 2021. The agreement requires a balance be maintained to fund any audit and legal expenses incurred should the Charter School cease operations and dissolve.

##### Grants, contracts and accounts receivables

Grants, contracts and accounts receivables are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts based on its assessment of the current status of individual receivables from grants, agencies and others. Balances that are still outstanding after management has used reasonable collection efforts are written off against the allowance for doubtful accounts. Management has recorded an allowance of \$800,000 as of June 30, 2022 and 2021.

##### Inventory

Inventory consists of student uniforms and clothing available for use in the Charter School's everyday operation. The inventory is stated at the lower of cost (on a first-in, first-out basis) or net realizable value and is based on a physical inventory taken by management at June 30, 2022 and 2021.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE A: THE CHARTER SCHOOL AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Cont'd

Property and equipment

Property and equipment are recorded at cost. Depreciation and amortization are computed using the straight-line method on a basis considered adequate to depreciate the assets over their estimated useful lives, which range from three to forty years.

Major renewals and betterments are capitalized, while repairs and maintenance are charged to operations as incurred. Upon sale or retirement, the related cost and allowances for depreciation are removed from the accounts and the related gain or loss is reflected in operations.

Contributed services

The Charter School receives contributed services from volunteers to develop its academic program and to serve on the Board of Trustees. These services are not valued in the financial statements because they do not require “specialized skills” and would typically not be purchased if they were not contributed. In addition, the Charter School received donated services from unpaid volunteers who assisted in fundraising, office administration and program activities. The Charter School was unable to determine a value for these services.

Tax exempt status

The Charter School is a tax-exempt organization under section 501(c)(3) of the Internal Revenue Code and applicable state regulation and, accordingly, is exempt from federal and state taxes on income.

The Charter School files Form 990 tax returns in the U.S. federal jurisdiction. The tax returns for the years ended June 30, 2019 through June 30, 2022 are still subject to potential audit by the IRS. Management of the Charter School believes it has no material uncertain tax positions and, accordingly it will not recognize any liability for unrecognized tax benefits.

Marketing costs

The Charter School expenses marketing costs as they are incurred. Total marketing costs approximated \$100,000 and \$84,000 for the years ended June 30, 2022 and 2021 respectively.

In-kind contributions

Gifts and donations other than cash are recorded at fair market value at the date of contribution. There were no in-kind contributions received for the years ended June 30, 2022 and 2021.

Use of estimates in the preparation of financial statements

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE A: THE CHARTER SCHOOL AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Cont'd

Adoption of new accounting standard - gifts-in-kind

In September 2020, the FASB issued a new accounting update to improve transparency in the reporting of contributed nonfinancial assets, also known as gifts-in-kind. The update requires not-for-profit entities to present contributed nonfinancial assets separately on the statement of activities, apart from contributions of cash and other financial assets. In addition, the update requires not-for-profit entities to disclose in the notes to the financial statements a breakout of the different types of gifts-in-kind recognized, any donor restrictions associated with the gift, the valuation technique(s) used to arrive at the fair value measure, whether or not the gift-in-kind was monetized, and any policies on monetization. The update is effective for fiscal years beginning after June 15, 2021 and will be applied on a retrospective basis. The Charter School adopted this standard during the year ended June 30, 2022 with no impact on the financial statements.

New accounting pronouncement - leases

In February 2016, the FASB issued a new standard related to leases to increase transparency and comparability among entities by requiring the recognition of right-of-use ("ROU") assets and lease liabilities on the statement of financial position. Most prominent among the changes in the standard is the recognition of ROU assets and lease liabilities by lessees for those leases classified as operating leases under current U.S. GAAP. For nonpublic entities, the FASB voted on May 20, 2020 to extend the guidance in this new standard to be effective for fiscal years beginning after December 15, 2021, and interim periods within fiscal years beginning after December 15, 2022. The Charter School is currently evaluating the provisions of this standard to determine the impact the new standard will have on the Charter School's financial position or results of operations.

Comparatives for period ended June 30, 2021

The financial statements include certain prior year summarized comparative information in total but not by functional classification. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Charter School's financial statements for the period ended June 30, 2021, from which the summarized information was derived.

Reclassifications

Certain prior year amounts have been reclassified to conform with the current year presentation.

Subsequent events

The Charter School has conducted an evaluation of potential subsequent events occurring after the statement of financial position date through October 27, 2022, which is the date the financial statements are available to be issued. No subsequent events requiring disclosure were noted.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE B: LIQUIDITY AND AVAILABILITY

The Charter School regularly monitors liquidity required to meet its operating needs and other contractual commitments. The Charter School's main source of liquidity is its cash accounts.

For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Charter School considers all expenditures related to its ongoing activities of teaching, and public service as well as the conduct of services undertaken to support those activities to be general expenditures.

In addition to financial assets available to meet general expenditures over the next 12 months, the Charter School operates with a surplus budget and anticipates collecting sufficient revenue to cover general expenditures not covered by donor-restricted resources. Refer to the statement of cash flows which identifies the sources and uses of the Charter School's cash and shows positive cash generated by operations for fiscal year 2022 and 2021.

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, comprise the following at June 30, 2022 and 2021:

		June 30,	
		2022	2021
Cash and cash equivalents		\$ 12,242,566	\$ 12,566,300
Grants and contracts receivable		2,783,398	1,230,187
Accounts receivable		<u>1,245,602</u>	<u>914,697</u>
	Total financial assets available to management within one year	16,271,566	14,711,184
Less:			
Amounts unavailable for general expenditures within one year, due to:			
	Donor restrictions	<u>(33,252)</u>	<u>(29,194)</u>
	Total financial assets available to management for general expenditures within one year	<u>\$ 16,238,314</u>	<u>\$ 14,681,990</u>

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE C: NET ASSETS

At June 30, 2022 and 2021, net assets without donor restrictions consisted of the following

	June 30,	
	2022	2021
Undesignated	\$ 10,670,813	\$ 9,407,655
Cash designated by Board for operating reserve	351,393	351,357
Invested in property and equipment, net of related debt excluding premium	5,100,926	4,562,056
	<u>\$ 16,123,132</u>	<u>\$ 14,321,068</u>

At June 30, 2022 and 2021, net assets with donor restrictions are as follows:

	June 30,	
	2022	2021
KIPP Foundation - Rebranding	\$ 14,477	\$ 23,000
KIPP Foundation - COVID-19	-	6,194
Relay GSE Leadership Program	18,775	-
	<u>\$ 33,252</u>	<u>\$ 29,194</u>

NOTE D: PROPERTY AND EQUIPMENT

Property and equipment at June 30, 2022 and 2021 consisted of the following:

	June 30,	
	2022	2021
Land	\$ 3,430,892	\$ 3,430,892
Buildings and improvements	28,551,596	28,198,170
Other depreciable property	72,044	72,044
Furniture and equipment	3,373,668	2,284,194
	<u>35,428,200</u>	<u>33,985,300</u>
Less accumulated depreciation and amortization	<u>6,645,281</u>	<u>5,380,638</u>
	<u>\$ 28,782,919</u>	<u>\$ 28,604,662</u>

Depreciation and amortization expense for the years ended June 30, 2022 and 2021 was \$1,264,643 and \$969,638 respectively.



KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE E: CONTINGENCY

Certain grants and contracts may be subject to audit by funding sources. Such audits might result in disallowance of costs submitted for reimbursement by the Charter School. Management is of the opinion that such disallowances, if any, will not have a material effect on the accompanying financial statements. Accordingly, no amounts have been provided in the accompanying financial statements for such potential claims.

NOTE F: CONCENTRATIONS

At June 30, 2022 and 2021, approximately 100% of grants and contracts receivable were due from federal agencies relating to certain grants. In addition, 63% of gross accounts receivable is due from three school districts at June 30, 2022 and 67% of gross accounts receivable is due from two school districts at June 30, 2021.

For the years ended June 30, 2022 and 2021, approximately 82% and 91% of total operating revenue and support came from per-pupil funding provided by New York State. The per-pupil rate is set annually by the State based on the school district in which the Charter School's students are located.

NOTE G: LOAN PAYABLE

On July 1, 2020, the Charter School refinanced and consolidated all of the debt of both ACCS and KIPP Tech Valley. The total amount of the bridge loan was \$30,000,000, with payments of interest only starting August 2020, at an interest rate of LIBOR plus 3%, with a floor of 1% LIBOR.

This consolidation resulted in the termination of an interest rate swap agreement of \$1,374,860.

In addition, the Charter School wrote off all unamortized debt issuance costs of approximately \$522,000 associated with the debt refinanced July 1, 2020. The Charter School incurred prepayment penalties of approximately \$181,000. These amounts are included in debt issuance costs written off and loan prepayment fees on the accompanying statement of activities and changes in net assets for the year ended June 30, 2021.

On December 1, 2020, the Charter School obtained financing of \$24,537,152 from Equitable Facilities Fund, Inc. ("Fund") to refinance the bridge loan. In order to facilitate this refinance, the Fund issued a bond, Obligation #1. The proceeds from the bond issuance were loaned to the Charter School. The loan requires monthly payments including interest at a coupon rate of 5% and are secured by mortgages on the buildings. Loan payable consists of the following at June 30, 2022 and 2021:

	June 30,	
	2022	2021
Obligation #1, coupon rate of 5%, due through December 2050	\$ 23,977,292	\$ 24,348,297
Add: unaccreted loan premium	4,318,156	4,470,115
Less: debt issuance costs, net of accumulated amortization	(295,299)	(305,691)
	28,000,149	28,512,721
Less: current portion of loan payable	(389,985)	(371,004)
	<u>\$ 27,610,164</u>	<u>\$ 28,141,717</u>



KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE G: LOAN PAYABLE, Cont'd

Unaccreted loan premium related to the issuance of Obligation #1 is \$4,318,156 at June 30, 2022. The unaccreted premium costs are accreted over the term of the indebtedness of the total amount issued and are included in loan payable in the statement of financial position. Debt issuance costs, net of accumulated amortization total \$295,299 and \$305,691 as of June 30, 2022 and 2021, respectively and are recorded as a reduction in loan payable on the accompanying statement of financial position.

Debt issuance costs consist of the following at June 30, 2022 and 2021:

	<u>June 30,</u>	
	<u>2022</u>	<u>2021</u>
Debt issuance costs	\$ 311,753	\$ 311,753
Less: accumulated amortization	<u>16,454</u>	<u>(6,062)</u>
	<u>\$ 295,299</u>	<u>\$ 305,691</u>

The aggregate amount of principal payments subsequent to June 30, 2022 are approximately as follows:

<u>Year ending June 30,</u>	<u>Amount</u>
2023	\$ 390,000
2024	410,000
2025	431,000
2026	453,000
2027	476,000
Thereafter	<u>21,817,000</u>
	<u>\$ 23,977,000</u>

In addition, the Charter School wrote off all unamortized debt issuance costs of approximately \$351,000 associated with the debt refinanced on December 1, 2020. These amounts are included in debt issuance costs written off and loan prepayment fees on the accompanying statement of activities and changes in net assets for the year ended June 30, 2021.

In connection with the loan payable, the Charter School is required to maintain certain financial covenants. At June 30, 2022, the Charter School is in compliance with these covenants.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE H: OPERATING LEASES

The Charter School leases office equipment under non-cancelable operating leases that expire through 2025. The monthly lease payments are approximately \$6,800.

Lease expense was \$113,552 and \$77,086 for the years ended June 30, 2022 and 2021 respectively. The approximate minimum annual lease payments are as follows:

<u>Year ending June 30,</u>	<u>Amount</u>
2023	\$ 39,900
2024	23,700
2025	<u>5,900</u>
	<u>\$ 69,500</u>

NOTE I: RETIREMENT PLAN

Albany Community Charter School

The School had adopted a profit-sharing plan under IRC §401(k) covering all eligible employees. The School contributed a matching contribution to each eligible employee's profit-sharing plan at the rate of 4% of the employee's gross compensation for the calendar year. Effective July 1, 2021, the participants of this plan were given the option to roll their balances into the KIPP Tech Valley Charter School 403(b) Plan or receive a distribution. The 401(k) plan was liquidated and closed as of September 30, 2021. No contributions were made to this plan for the year ended June 30, 2022.

KIPP Tech Valley Charter School

The School has a 403(b) tax-deferred annuity retirement plan, which is funded by contributions from both the School and its employees.

The related 401(k) and 403(b) expense for the years ended June 30, 2022 and 2021 was \$582,233 and \$513,417 respectively.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

NOTES TO FINANCIAL STATEMENTS, Cont'd

JUNE 30, 2022

(With Comparative Totals for 2021)

NOTE J: ACCOUNTING IMPACT OF COVID-19 OUTBREAK

On January 30, 2020, the World Health Organization (“WHO”) announced a global health emergency because of a new strain of coronavirus (the “COVID-19 outbreak”) and the risks to the international community as the virus spreads globally beyond its point of origin. In March 2020, the WHO classified the COVID-19 outbreak as a pandemic, based on the rapid increase in exposure globally. The full impact of the COVID-19 outbreak continues to evolve as of the date of this report. As such, it is uncertain as to the full magnitude that the pandemic will have on the Charter School’s financial condition, liquidity, and future results of operations. Management is actively monitoring the global situation on its financial condition, liquidity, operations, suppliers, industry, and workforce. Given the daily evolution of the COVID-19 outbreak and the global responses to curb its spread, the Charter School is not able to estimate the effects of the COVID-19 outbreak on its results of operations, financial condition, or liquidity for fiscal year 2023.

In response to the COVID-19 outbreak, in April 2020 the Kipp Tech Valley Charter School and Albany Community Charter School applied for and were approved by banks for loans of \$1,167,900 and \$1,151,800, respectively, through the Paycheck Protection Program established by the Small Business Administration. The loans had a maturity of 2 years and an interest rate of 1%. The loans had the potential for forgiveness provided certain requirements are met by the Charter School. The loans were funded in April 2020. On December 31, 2020, Kipp Tech Valley Charter School’s loan was forgiven in full by the Small Business Administration. \$1,148,380 of the loan was recognized as revenue for the year ended June 30, 2020. The remaining \$19,520 was recognized as revenue for the year ended June 30, 2021 and is reported as Paycheck Protection Program loan forgiveness on the accompanying statement of activities and changes in net assets for the year ended June 30, 2021. On June 2, 2021, the Albany Community Charter School’s loan was forgiven in full by the Small Business Administration, which is reported as Paycheck Protection Program loan forgiveness on the accompanying statement of activities and changes in net assets for the year ended June 30, 2021.

In response to the COVID-19 outbreak, the Federal Government passed several COVID relief acts which include funding for elementary and secondary education. The Elementary and Secondary School Emergency Relief Fund (ESSER Fund) was established to award grants to state and local educational agencies. The Charter School has recognized \$1,773,959 and \$429,949 of revenue relative to ESSER grants during the years ended June 30, 2022 and 2021, respectively. As of June 30, 2022, the Charter School has approximately \$3,476,657 of ESSER grants available for expenditure through September 30, 2024.

NOTE K: CHARTER SCHOOL MERGER

On June 16, 2021, the Charter School's Board of Trustees voted to approve and authorize the merger with True North Troy Preparatory Charter School effective July 1, 2022. KIPP Albany Community Charter Schools will be the surviving education corporation.

**KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS**

**OTHER CONSOLIDATING FINANCIAL INFORMATION**

INDEPENDENT AUDITOR'S REPORT ON OTHER FINANCIAL INFORMATION

Board of Trustees  
KIPP Albany Community Public Charter Schools

We have audited the financial statements of KIPP Albany Community Public Charter Schools as of and for the year ended June 30, 2022, and we have issued our report thereon dated October 27, 2022, which contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The 2022 other financial information hereinafter is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements for the year ended June 30, 2022, as a whole.

*Mengel, Metzger, Barw & Co. LLP*

Rochester, New York  
October 27, 2022

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF ACTIVITIES BY SCHOOL

JUNE 30, 2022

	<u>KIPP Tech Valley Charter School</u>	<u>Albany Community Charter School</u>	<u>Total</u>
Operating revenue and support:			
Public School District:			
Resident student enrollment	\$ 14,311,422	\$ 10,728,781	\$ 25,040,203
Students with disabilities	264,825	98,886	363,711
Grants and contracts			
Federal - Title and IDEA	399,695	266,175	665,870
Federal - Other	1,375,444	2,165,884	3,541,328
Food service / Child Nutrition Program	<u>886,942</u>	<u>642,268</u>	<u>1,529,210</u>
TOTAL OPERATING REVENUE AND SUPPORT	17,238,328	13,901,994	31,140,322
Expenses:			
Program services:			
Regular education	10,451,643	9,341,659	19,793,302
Special education	990,925	430,260	1,421,185
Other education	1,521,235	1,160,994	2,682,229
Management and general	<u>3,393,502</u>	<u>2,467,040</u>	<u>5,860,542</u>
TOTAL EXPENSES	<u>16,357,305</u>	<u>13,399,953</u>	<u>29,757,258</u>
SURPLUS FROM SCHOOL OPERATIONS	<u>881,023</u>	<u>502,041</u>	<u>1,383,064</u>
Other income:			
Fundraising	11,450	9,677	21,127
Contributions	140,206	101,528	241,734
Interest income	82	59	141
Other income	<u>90,408</u>	<u>69,648</u>	<u>160,056</u>
TOTAL OTHER INCOME	<u>242,146</u>	<u>180,912</u>	<u>423,058</u>
CHANGE IN NET ASSETS	<u>\$ 1,123,169</u>	<u>\$ 682,953</u>	<u>\$ 1,806,122</u>

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF FUNCTIONAL EXPENSES BY SCHOOL – KIPP TECH VALLEY CHARTER SCHOOL

JUNE 30, 2022

	No. of Positions	Program Services				Supporting Services	
		Regular Education	Special Education	Other Education	Sub-total	Management and General	Total
Personnel services costs:							
Administrative Staff Personnel	49	\$ 1,643,378	\$ 164,338	\$ 328,676	\$ 2,136,392	\$ 1,568,831	\$ 3,705,223
Instructional Personnel	72	3,491,777	564,228	-	4,056,005	-	4,056,005
Non-Instructional Personnel	19	-	-	287,960	287,960	226,246	514,206
Total salaries and staff	140	5,135,155	728,566	616,636	6,480,357	1,795,077	8,275,434
Fringe benefits and payroll taxes							
Retirement		1,516,134	59,070	196,901	1,772,105	196,901	1,969,006
Legal services		277,188	10,799	35,998	323,985	35,998	359,983
Accounting / Audit services		-	-	-	-	67,855	67,855
Other purchased / professional / consulting services		-	-	-	-	81,864	81,864
Repairs and maintenance		386,362	76,740	16,769	479,871	317,833	797,704
Insurance		346,932	13,517	45,056	405,505	45,056	450,561
Utilities		-	-	-	-	112,402	112,402
Supplies / materials		152,491	5,451	19,870	177,812	19,870	197,682
Leased equipment		215,578	9,565	-	225,143	-	225,143
Staff development		32,611	-	-	32,611	32,612	65,223
Marketing / recruitment		254,202	-	-	254,202	28,245	282,447
Food service		-	-	-	-	33,721	33,721
Student services		-	-	406,711	406,711	-	406,711
Board expenses		746,360	33,115	-	779,475	-	779,475
Office expense		-	-	-	-	6,380	6,380
Depreciation and amortization		78,468	3,057	10,191	91,716	189,837	281,553
Interest		532,435	20,744	69,147	622,326	69,147	691,473
Dues and subscriptions		476,713	18,573	61,911	557,197	61,911	619,108
Bad debt expense		301,014	11,728	39,093	351,835	39,093	390,928
Other		-	-	-	-	259,700	259,700
		-	-	2,952	2,952	-	2,952
		\$ 10,451,643	\$ 990,925	\$ 1,521,235	\$ 12,963,803	\$ 3,393,502	\$ 16,357,305

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

STATEMENT OF FUNCTIONAL EXPENSES BY SCHOOL – ALBANY COMMUNITY CHARTER SCHOOL

JUNE 30, 2022

	No. of Positions	Program Services				Sub-total	Supporting Services	
		Regular Education	Special Education	Other Education	Management and General			
					Total			
Personnel services costs:								
Administrative Staff Personnel	40	\$ 1,249,388	\$ 124,939	\$ 249,878	\$ 1,624,205	\$ 1,177,598	\$ 2,801,803	
Instructional Personnel	63	3,541,683	189,948	-	3,731,631	-	3,731,631	
Non-Instructional Personnel	12	-	-	208,963	208,963	119,618	328,581	
Total salaries and staff	115	4,791,071	314,887	458,841	5,564,799	1,297,216	6,862,015	
Fringe benefits and payroll taxes								
Retirement		1,284,221	32,929	164,644	1,481,794	164,644	1,646,438	
Legal services		173,355	4,445	22,225	200,025	22,225	222,250	
Accounting / Audit services		-	-	-	-	49,136	49,136	
Other purchased / professional / consulting services		-	-	-	-	59,280	59,280	
Repairs and maintenance		246,512	14,161	11,626	272,299	233,126	505,425	
Insurance		409,672	10,504	52,522	472,698	52,522	525,220	
Utilities		-	-	-	-	81,395	81,395	
Supplies / materials		181,233	3,853	23,236	208,322	23,236	231,558	
Leased equipment		246,404	5,509	-	251,913	-	251,913	
Staff development		37,696	967	4,833	43,496	4,833	48,329	
Marketing / recruitment		213,071	-	-	213,071	23,675	236,746	
Food service		-	-	-	-	66,773	66,773	
Student services		-	-	276,809	276,809	-	276,809	
Board expenses		634,272	14,182	-	648,454	-	648,454	
Office expense		-	-	-	-	4,620	4,620	
Depreciation and amortization		83,623	2,144	10,721	96,488	139,659	236,147	
Interest		447,073	11,463	57,317	515,853	57,317	573,170	
Dues and subscriptions		349,687	8,966	44,831	403,484	44,831	448,315	
Bad debt expense		243,769	6,250	31,252	281,271	31,252	312,523	
Other		-	-	-	-	111,300	111,300	
		\$ 9,341,659	\$ 430,260	\$ 1,160,994	\$ 10,932,913	\$ 2,467,040	\$ 13,399,953	



**KIPP ALBANY COMMUNITY PUBLIC CHARTER**  
**SCHOOLS**

**ALBANY, NEW YORK**

**SCHEDULES REQUIRED BY**  
**GOVERNMENT AUDITING STANDARDS**  
**AND THE UNIFORM GUIDANCE**

**AND**

**INDEPENDENT AUDITOR'S REPORTS**

**JUNE 30, 2022**

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INDEPENDENT AUDITOR’S REPORT ON INTERNAL CONTROL OVER  
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED  
ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE  
WITH *GOVERNMENT AUDITING STANDARDS*

Board of Trustees  
KIPP Albany Community Public Charter Schools

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of KIPP Albany Community Public Charter Schools, which comprise the statement of financial position as of June 30, 2022 and the related statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended and the related notes to the financial statements and have issued our report thereon dated December 14, 2022.

**Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered KIPP Albany Community Public Charter Schools’ internal control over financial reporting (internal control) as a basis for designing procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of KIPP Albany Community Public Charter Schools’ internal control. Accordingly, we do not express an opinion on the effectiveness of KIPP Albany Community Public Charter Schools’ internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity’s financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit, we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

## **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether KIPP Albany Community Public Charter Schools' financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

## **Purpose of This Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Mengel, Metzger, Baw & Co. LLP*

Rochester, New York  
December 14, 2022

INDEPENDENT AUDITOR’S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM;  
REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON THE SCHEDULE OF  
EXPENDITURES OF FEDERAL AWARDS IN ACCORDANCE WITH THE UNIFORM GUIDANCE

Board of Trustees  
KIPP Albany Community Public Charter Schools

**Report on Compliance for Each Major Federal Program**

***Opinion on Each Major Federal Program***

We have audited KIPP Albany Community Public Charter Schools’ compliance with the types of compliance requirements identified as subject to audit in the OMB *Compliance Supplement* that could have a direct and material effect on each of KIPP Albany Community Public Charter Schools’ major federal programs for the year ended June 30, 2022. KIPP Albany Community Public Charter Schools’ major federal programs are identified in the summary of auditor’s results section of the accompanying schedule of findings and questioned costs.

In our opinion, KIPP Albany Community Public Charter Schools’ complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022.

***Basis for Opinion on Each Major Federal Program***

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor’s Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of KIPP Albany Community Public Charter Schools and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of KIPP Albany Community Public Charter Schools’ compliance with the compliance requirements referred to above.

### ***Responsibilities of Management for Compliance***

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules and provisions of contracts or grant agreements applicable to KIPP Albany Community Public Charter Schools' federal programs.

### ***Auditor's Responsibilities for the Audit of Compliance***

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on KIPP Albany Community Public Charter Schools' compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about KIPP Albany Community Public Charter Schools' compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding KIPP Albany Community Public Charter Schools' compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of KIPP Albany Community Public Charter Schools' internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of KIPP Albany Community Public Charter Schools' internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.



## **Report on Internal Control Over Compliance**

*A deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

## **Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance**

We have audited the financial statements of KIPP Albany Community Public Charter Schools as of and for the year ended June 30, 2022, and have issued our report thereon dated December 14, 2022, which contained an unmodified opinion on those financial statements. Our audit was performed for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the financial statements as a whole.

*Mengel, Metzger, Baw & Co. LLP*

Rochester, New York  
December 14, 2022

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

YEAR ENDED JUNE 30, 2022

	<u>Federal AL Number</u>	<u>Pass-through Grantor's Number</u>	<u>Total Federal Expenditures</u>
U.S. Department of Education:			
<u>Passed through New York State Education Department:</u>			
Title I - Grants to Local Educational Agencies	84.010	0021	\$ 524,433
Title IIA - Supporting Effective Instruction State Grant	84.367	0147	54,293
Title IV - Student Support and Academic Enrichment Program	84.424	0204	36,504
<u>Education Stabilization Funds -</u>			
ESSER II - Elementary and Secondary School Emergency Relief Fund	84.425D	5891	656,655
American Rescue Plan - Elementary and Secondary School Emergency Relief	84.425U	5880	<u>1,117,304</u>
<i>Total Education Stabilization Funds</i>			<u>1,773,959</u>
<u>Passed through KIPP Foundation:</u>			
Charter School Program - Replication and Expansion of High-Quality Charter Schools	84.282M	U282M190024	<u>1,118,504</u>
TOTAL U.S. DEPARTMENT OF EDUCATION			3,507,693
U.S. Department of Agriculture:			
<u>Passed through New York State Education Department:</u>			
<i>Child Nutrition Cluster</i>			
School Breakfast Program	10.553	1000001406	420,867
National School Lunch Program	10.555	1000001406	1,013,474
Emergency Operational Cost - COVID	10.555	1000001406	<u>66,210</u>
<i>Total Child Nutrition Cluster</i>			<u>1,500,551</u>
State Pandemic Electronic Benefit Transfer (P-EBT) Administrative Cost Grant	10.649	1000001406	<u>1,202</u>
TOTAL U.S. DEPARTMENT OF AGRICULTURE			1,501,753
Federal Communications Commission:			
<u>Passed through the Universal Service Administrative Company</u>			
Emergency Connectivity Fund Program - COVID	32.009	16067880	<u>648,865</u>
TOTAL FEDERAL COMMUNICATIONS COMMISSION			<u>648,865</u>
TOTAL ALL PROGRAMS			<u>\$ 5,658,311</u>



KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS, Cont'd

YEAR ENDED JUNE 30, 2022

NOTE A: BASIS OF PRESENTATION

The above schedule of expenditures of federal awards includes the federal grant activity of KIPP Albany Community Public Charter Schools and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the basic financial statements.

NOTE B: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following, as applicable, the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

KIPP Albany Community Public Charter Schools has elected not to use the 10 percent de minimis indirect cost rate allowed under the Uniform Guidance.

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

SCHEDULE OF FINDINGS AND QUESTIONED COSTS

YEAR ENDED JUNE 30, 2022

SUMMARY OF AUDITOR'S RESULTS

---

Financial Statements

Type of auditor's report issued: Unmodified

Internal control over financial reporting:

- Material weakness (es) identified? \_\_\_\_\_ yes   x   no
- Significant deficiency(ies) identified that are not considered to be material weaknesses? \_\_\_\_\_ yes   x   none reported

Noncompliance material to financial statements noted? \_\_\_\_\_ yes   x   no

Federal Awards

Internal control over major programs:

- Material weakness (es) identified? \_\_\_\_\_ yes   x   no
- Significant deficiency(ies) identified that are not considered to be material weaknesses? \_\_\_\_\_ yes   x   none reported

Type of auditor's report issued on compliance for major programs: Unmodified

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)? \_\_\_\_\_ yes   x   no

Identification of major program:

*AL Number:*

10.553 10.555  
84.425D

84.425U

*Name of Federal Program or Cluster:*

Child Nutrition Cluster  
ESSER II - Elementary and Secondary School  
Emergency Relief Fund  
American Rescue Plan - Elementary and  
Secondary Emergency Relief Fund

Dollar threshold used to distinguish between type A and type B programs:

\$750,000

Auditee qualified as low-risk auditee? \_\_\_\_\_ yes   x   no

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS, Cont'd  
YEAR ENDED JUNE 30, 2022

FINDINGS – FINANCIAL STATEMENT AUDIT

- NONE

FINDINGS AND QUESTIONED COSTS – MAJOR FEDERAL AWARD PROGRAMS AUDIT

- NONE

SCHEDULE OF PRIOR YEAR FINDINGS AND QUESTIONED COSTS

- NONE



**Charter Schools Institute**  
The State University of New York

FOR INSTITUTE USE ONLY

FILING FOR SCHOOL  
YEAR: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

**DISCLOSURE OF FINANCIAL INTEREST  
BY A NOT-FOR-PROFIT CHARTER SCHOOL  
EDUCATION CORPORATION TRUSTEE**

1. Name of education corporation: KIPP Tech Valley Charter School
2. Trustee's name (print): Shai L Butler
3. Position(s) on board, if any: (e.g., chair, treasurer, committee chair, etc.): Vice Chair

8. Is Trustee an employee of the education corporation? Yes ☒ No ☐. If you checked yes, please provide a description of the position you hold, your salary and your start date.

9. Identify each interest/transaction (and provide the requested information) that you or any of your immediate family members have held or engaged in with the education corporation during the prior school year. If there has been no such financial interest or transaction, please write "None." Please note that if you answered yes to Question 8, you need not disclose again your employment status, salary, etc.

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)	Identity of Person Holding Interest or Engaging in Transaction (e.g., you and/or immediate family member (name))
N/A	None		
Please write "None" if applicable. Do not leave this space blank.			

10. Identify each individual, business, corporation, union association, firm, partnership, committee proprietorship, 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 education corporation *and* in which such entity, during the preceding school year (July 1 – June 30), you and/or your immediate family member(s) had a financial interest or other relationship. If you are a member, director, officer or employee of an organization formally partnered with the education corporation that is doing business with the education corporation through a management or services agreement, you need not list every transaction between such entity and the education corporation that is pursuant to such agreement; rather, please identify only the name of the entity, your position in the entity as well as the relationship between such entity and the education corporation. If there was no financial interest, please write "None."

Entity Conducting Business with the Education Corporation	Nature of Business Conducted	Approximate Value of the Business Conducted	Name of Trustee and/or Immediate Family Holding an Interest in the Entity Conducting Business with the Education Corporation and the Nature of the Interest	Steps Taken to Avoid Conflict of Interest
<i>Please write "None" if applicable. Do not leave this space blank.</i>				

  
Signature

7-22-22  
Date

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Don Applyrs

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Trustee

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**.

☒ **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**.

☒ **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

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

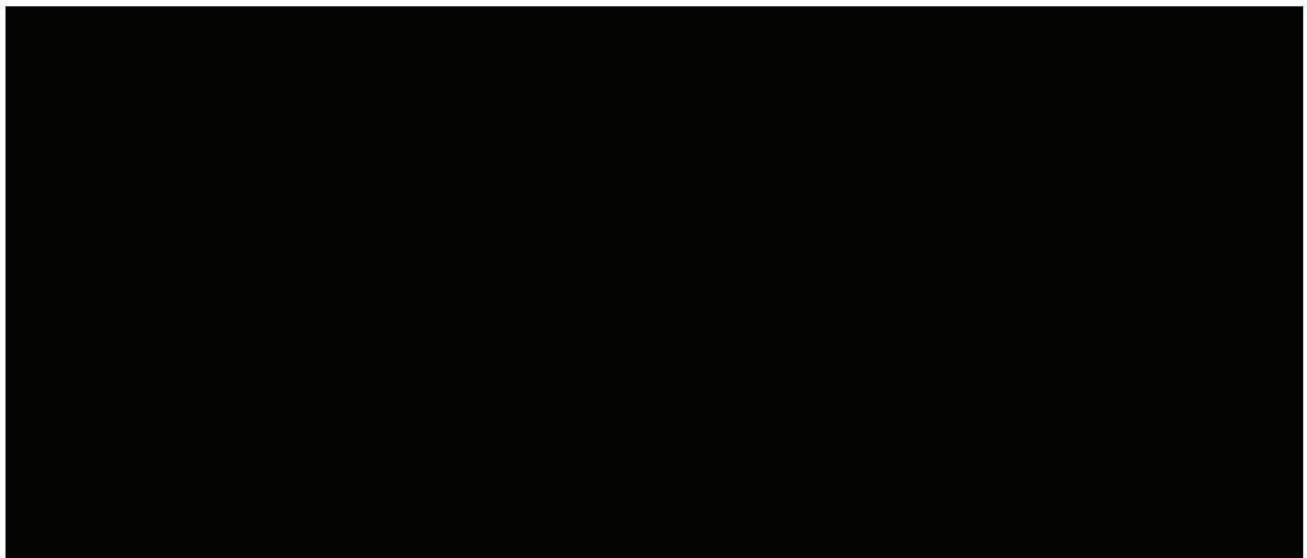
- Don Applyrs

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**Business Telephone:**

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**Business Address:**



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*Don Applyrs*  
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6/22/2022

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**Signature**

**Date**

Acceptable signature formats include:

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- Print form, manually sign, scan to PDF

*last revised 04/2022*

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Guy Alonge III

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Treasurer

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**.

☒ **None**

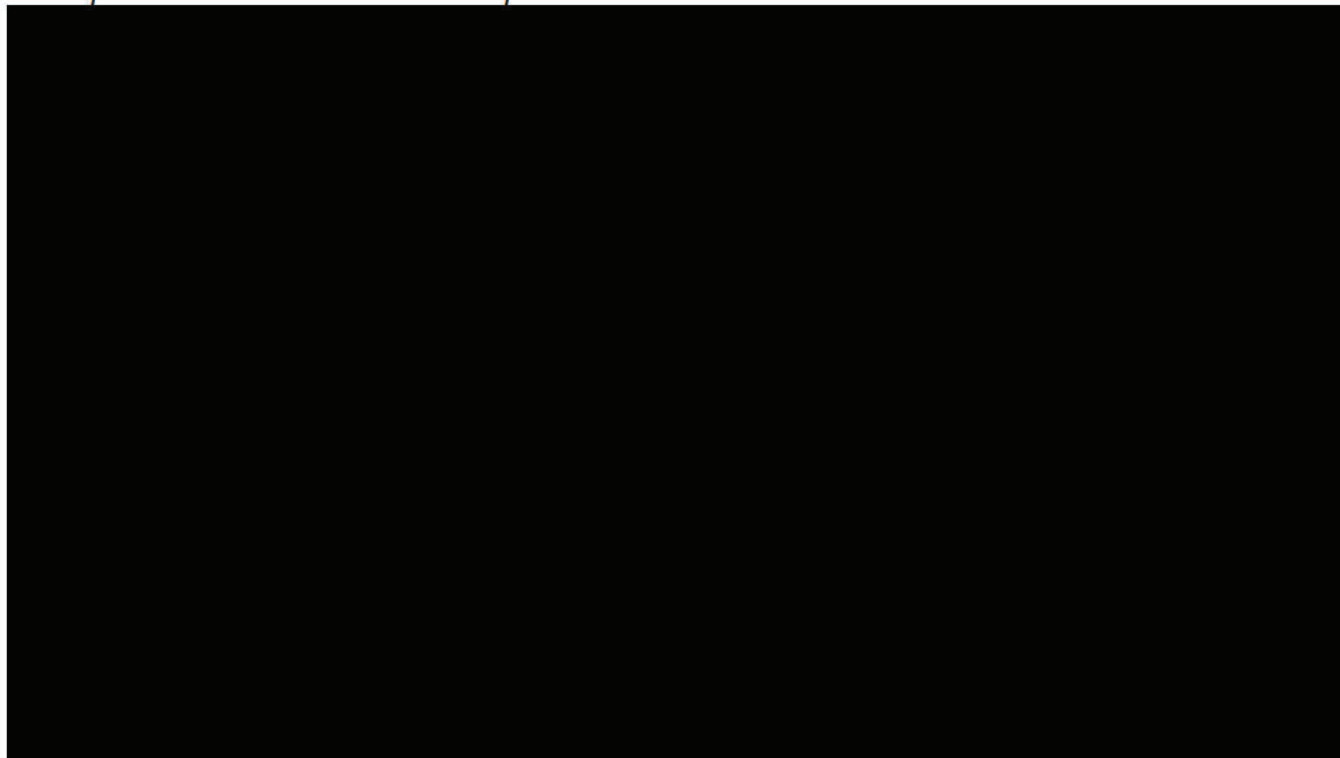
Date(s)	Nature of financial interest / transaction	Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)	Name of person holding interest or engaging in transaction and relationship to you

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**.

☐ **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
AMSURE	HEalth Insurance	40,000	GUY ALONGE	I HAVE NO INVOLVEMENT AT ALL IN THE PLACEMENT OF KIPP'S HEALTH INSURANCE NOR DO I GET ANY TYPE OF PAYMENT AS A RESULT OF THIS RELATIONSHIP

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DocuSigned by:  
*Guy Alonge*  
63709612F3E74C1...

6/23/2022

**Signature**

**Date**

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*last revised 04/2022*

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

John P Reilly

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Board 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.



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**.

☒ **None**

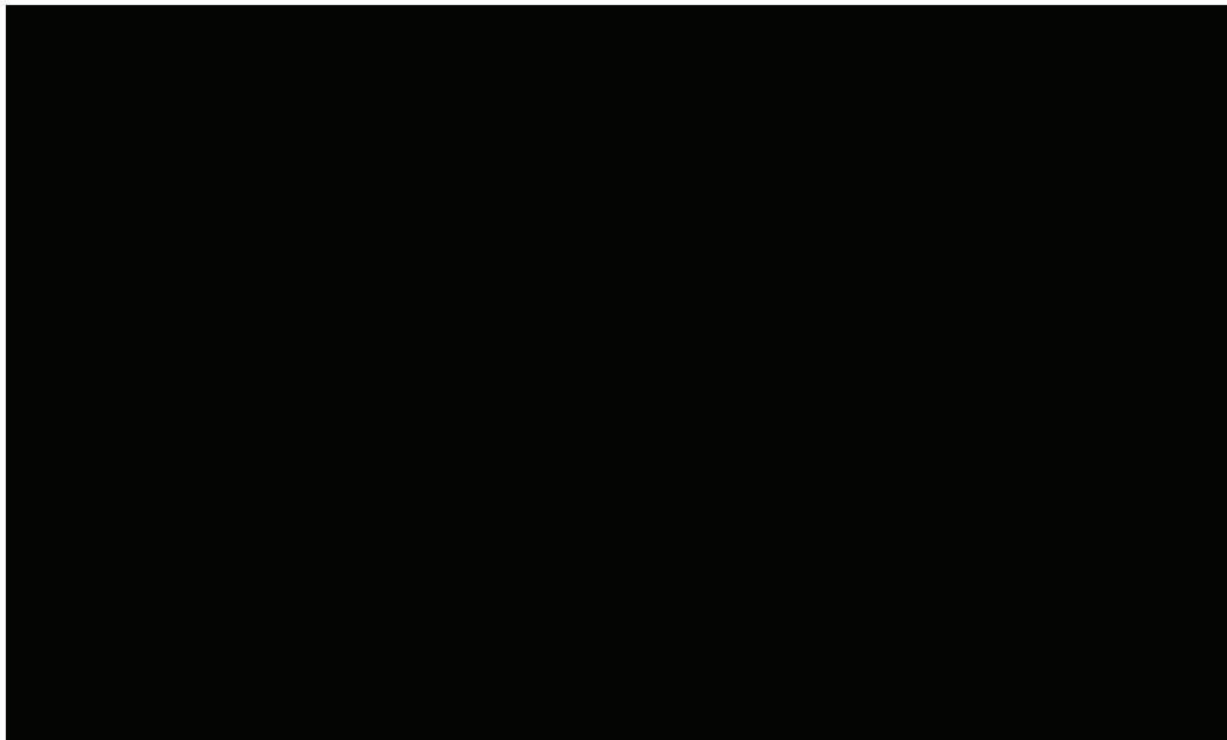
<b>Date(s)</b>	<b>Nature of financial interest / transaction</b>	<b>Steps taken to avoid a conflict of interest, (e.g., did not vote, did not participate in discussion)</b>	<b>Name of person holding interest or engaging in transaction and relationship to you</b>

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**

<b>Organization conducting business with the school(s)</b>	<b>Nature of business conducted</b>	<b>Approximate value of the business conducted</b>	<b>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</b>	<b>Steps taken to avoid conflict of interest</b>

*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.*



DocuSigned by:  
  
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6/22/2022

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**Signature**

**Date**

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

*last revised 04/2022*



<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Sharif Kabir

---

**Name of Charter School Education Corporation:**

True North Troy Preparatory 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.).

Trustee

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.

My first cousin, once removed, Julian Edwards, is a student at Troy Prep High School. He has not to my knowledge or though my actions, benefited as a result of his relationship to me.

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**.

☐ **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
n/a	n/a	n/a	n/a

- Sharif Kabir

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

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
n/a	n/a	n/a	n/a	n/a



True North Troy Preparatory Charter School

- Sharif Kabir

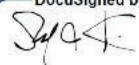
*This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.*

**Business Telephone:**

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**Business Address:**



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7/11/2022

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**Signature**

**Date**

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

*last revised 04/2022*

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Kelly Walborn

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Trustee

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**.

☒ **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**.

☒ **None**

<b>Organization conducting business with the school(s)</b>	<b>Nature of business conducted</b>	<b>Approximate value of the business conducted</b>	<b>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</b>	<b>Steps taken to avoid conflict of interest</b>

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

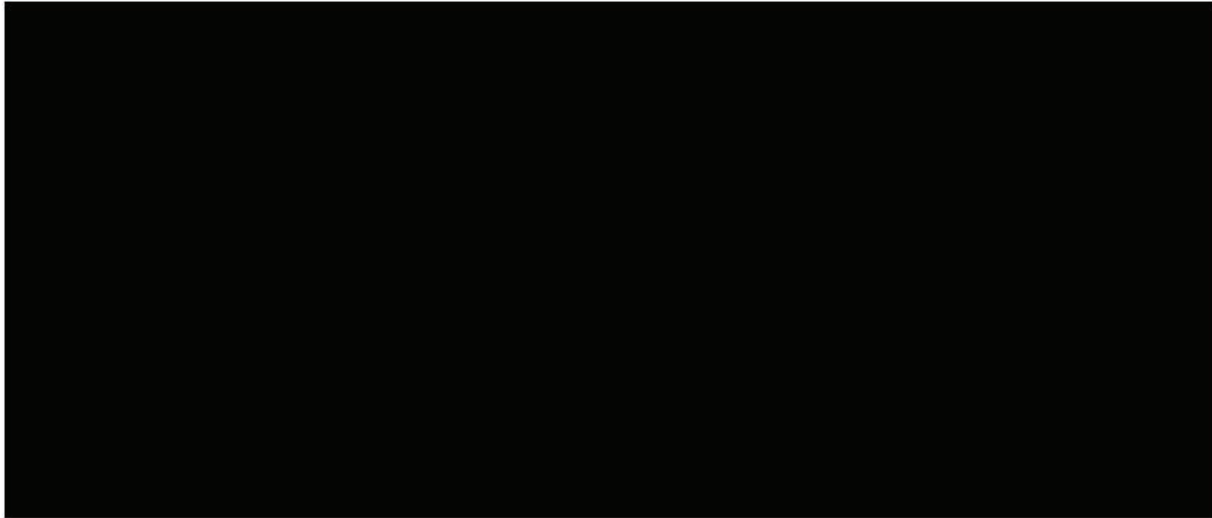
- Kelly Walborn

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**Business Telephone:**

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**Business Address:**



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*Kelly Walborn*  
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6/30/2022

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**Signature**

**Date**

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

*last revised 04/2022*

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Kelly Kimbrough

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Trustee

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**.

☒ **None**

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

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**

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

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

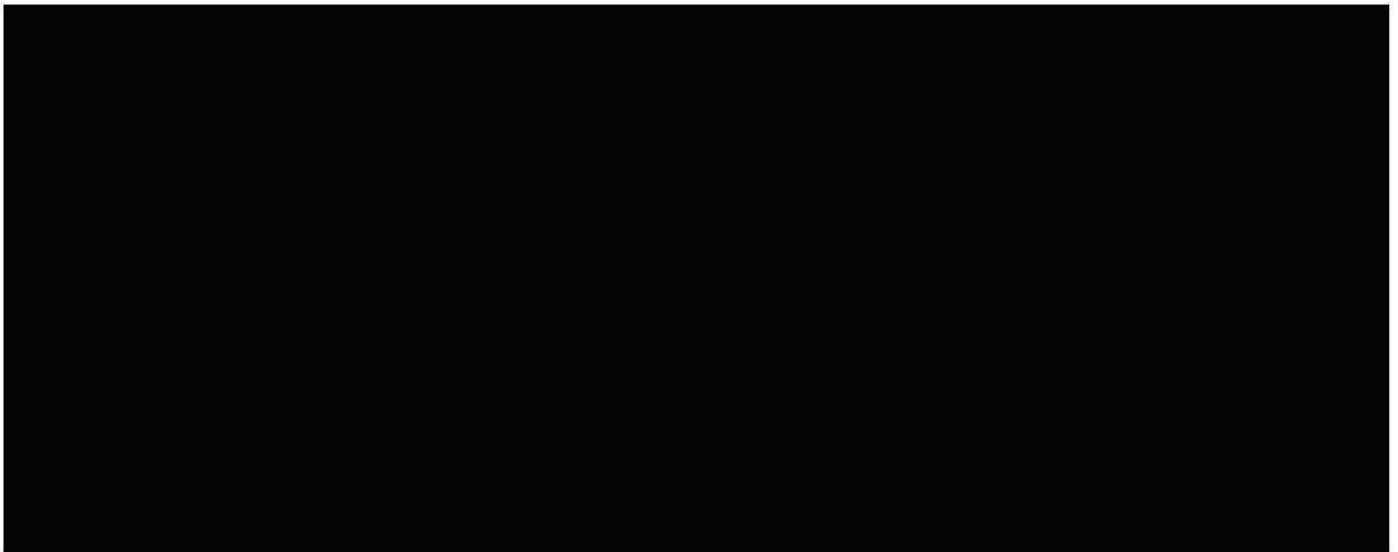
- Kelly Kimbrough

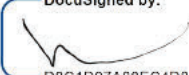
*This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.*

**Business Telephone:**

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**Business Address:**



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6/23/2022

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**Signature**

**Date**

Acceptable signature formats include:

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

*last revised 04/2022*

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Robert Bellafiore

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Trustee

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**.

☒ **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**.

☒ **None**

<b>Organization conducting business with the school(s)</b>	<b>Nature of business conducted</b>	<b>Approximate value of the business conducted</b>	<b>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</b>	<b>Steps taken to avoid conflict of interest</b>



KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

- Robert Bellafiore

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**Business Telephone:**

518-928-8471

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**Business Address:**



DocuSigned by:  
*Robert Bellafiore*  
BA5D59A21C5F409...

6/22/2022

---

**Signature**

**Date**

Acceptable signature formats include:

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

*last revised 04/2022*

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Ronald Mexico

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Trustee

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**.

☒ **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**.

☒ **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

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

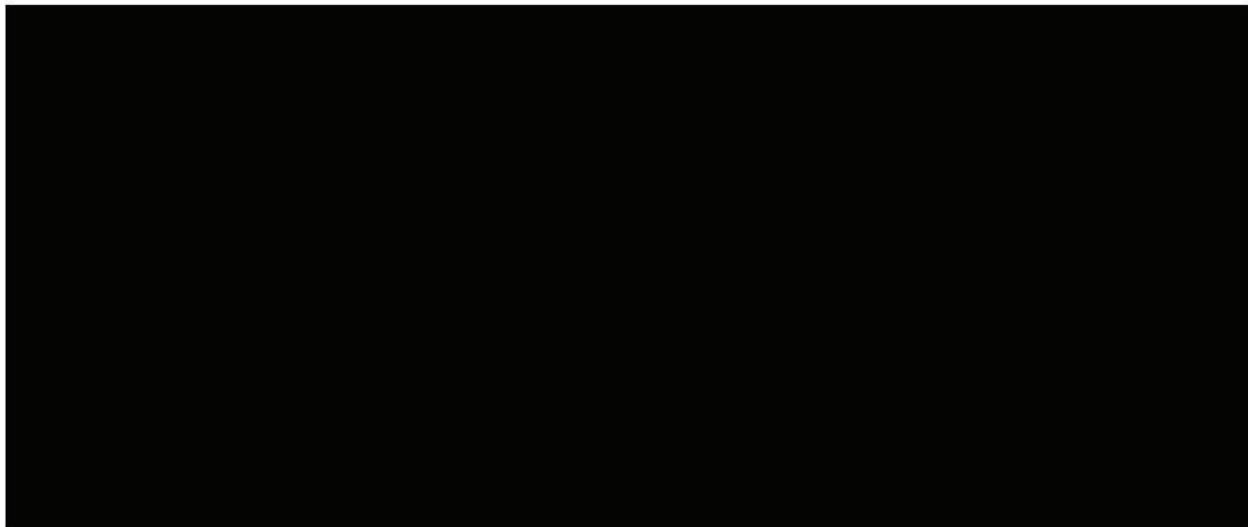
- Ronald Mexico

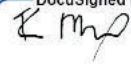
*This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.*

**Business Telephone:**

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**Business Address:**



DocuSigned by:  
  
6C1AFB65AA2E498...

6/23/2022

---

**Signature**

**Date**

Acceptable signature formats include:

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

*last revised 04/2022*

<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Michael J. Strianese

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Trustee

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**.

☒ **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**.

☐ **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
Brighter Choice Foundation	Awarded grant	\$20K	Self, Chair of BCF Board	Recusal from any votes and removal from any conversations
New York Charter Schools Association	Receives membership income	\$15K	Self, CFO of NYCSA	Recusal from any votes and removal from any conversations

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

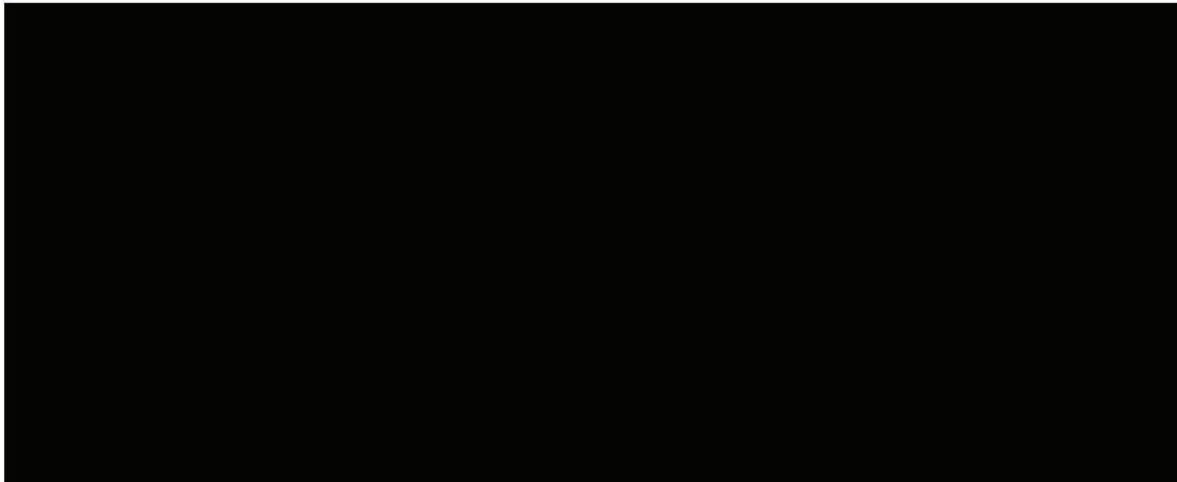
- Michael J. Strianese

*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:**



DocuSigned by:  
*Michael J. Strianese*  
F21004393414480...

6/27/2022

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**Signature**

**Date**

Acceptable signature formats include:

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

*last revised 04/2022*



<b>Disclosure of Financial Interest by a Current or Former Trustee</b>
--

**Trustee Name:**

Carl S. Young

---

**Name of Charter School Education Corporation:**

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

---

1. List all positions held on the education corporation Board of Trustees ("Board") (e.g., chair, vice-chair, treasurer, secretary, parent representative, etc.).

Former Secretary

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**.

☒ **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**.

☒ **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

KIPP ALBANY COMMUNITY PUBLIC CHARTER SCHOOLS

- Carl S. Young

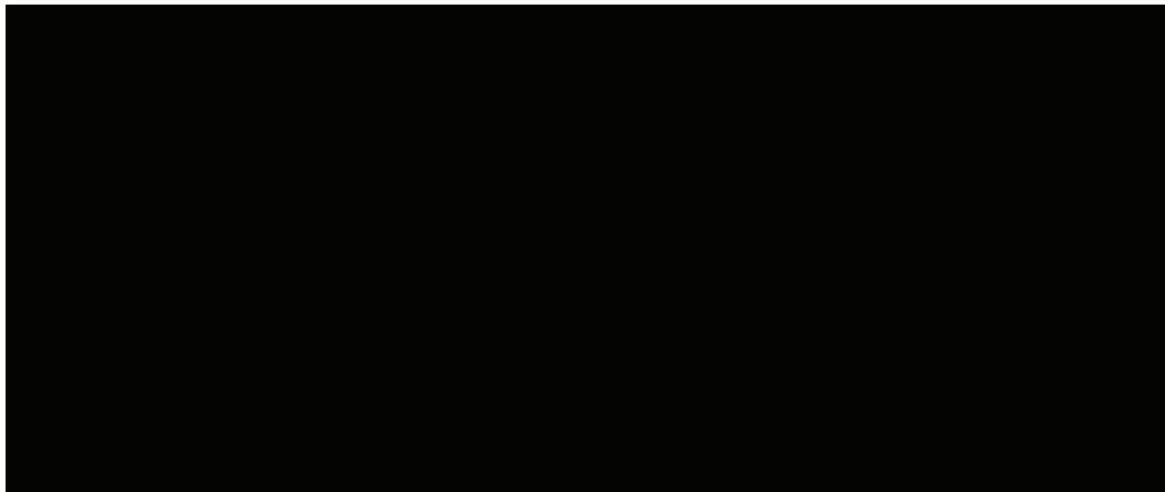
*This document is considered a public record and, as such, may be made available to members of the public upon request under the Freedom of Information Law. The personal contact information provided below will be redacted.*

**Business Telephone:**

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**Business Address:**

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DocuSigned by:  
*Carl S. Young*  
5697682158924B0...

6/26/2022

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**Signature**

**Date**

Acceptable signature formats include:

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

*last revised 04/2022*



## City of Albany

### Division of Buildings and Regulatory Compliance

Albany Community Charter School  
42 South Dove Street  
Albany, NY 12202

### Certificate of Occupancy

Address: 42 South Dove Street

Permit 52887

Parcel 33919

This is to Certify that the building located at 42 South Dove Street in the City of Albany, NY has been inspected and found to be in compliance with the plans on file and with permit application for Change of tenant minor repairs for a Charter School known as Albany Community Charter School.

The following occupancy is permitted at this location:

Area	Use	Uniform Code Classification
Cellar/Basement		
First Floor	School	E
Second Floor	School	E
Third Floor		
Other Floors		

No change in the nature of this parcel, building or use is allowed without a permit and the issuance of a new Certificate of Occupancy.

Zoning District at time of Issuance R-2A

Issuance Recommended By:

Vincent J. DiBiase  
Deputy Chief Inspector

  
Jeffery A. Jamison - Director

Issue Date: Monday, August 06, 2012





**City of Albany**  
**Department of Public Safety**  
**Division of Building and Codes**

Sano Rubin Construction  
624 Delaware Avenue  
Albany, N.Y. 12209

**Certificate of Occupancy**

Address: **65 Krank Street**

Permit **46526**

Parcel **02448**

This is to Certify that the building located at 65 Krank Street in the City of Albany, NY has been inspected and found to be in compliance with the plans on file and with permit application for addition to existing school.

The following occupancy is permitted at this location:

Area	Use	Uniform Code Classification
Cellar/Basement		
First Floor	School/5 classrooms	E
Second Floor		
Third Floor		
Other Floors		

No change in the nature of this parcel, building or use is allowed without a permit and the issuance of a new Certificate of Occupancy.

Zoning District at time of Issuance **LC**

Issuance Recommended By:

R. Preville  
Building Inspector

  
Nicholas A. DiLello, Director

Issue Date: **Friday, November 12, 2010**



**City of Albany**  
**Department of Public Safety**  
**Division of Building and Codes**

Sano-Rubin  
624 Delaware Ave.  
Albany, N.Y. 12209

**Certificate of Occupancy**

Address: **65 Krank Street**

Permit **41104**

Parcel **02448**

This is to Certify that the building located at 65 Krank Street in the City of Albany, NY has been inspected and found to be in compliance with the plans on file and with permit application for Brighter Choice Charter Schools.

The following occupancy is permitted at this location:

Area	Use	Uniform Code Classification
Cellar/Basement		
First Floor	School	E
Second Floor	School	E
Third Floor		
Other Floors		

No change in the nature of this parcel, building or use is allowed without a permit and the issuance of a new Certificate of Occupancy.

Zoning District at time of Issuance **R-2A**

Issuance Recommended By:

R. Preville

Building Inspector

Nicholas A. DiLello, Director

Issue Date: **Friday, September 12, 2008**



### 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.

#### NONPUBLIC SCHOOL BEDS CODE#

0	1	0	1	0	0	8	6	0	8	9	9
---	---	---	---	---	---	---	---	---	---	---	---

#### School Name

A	l	b	a	n	y		C	o	m	m	u	n	i	t	y		C	S										
---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	--	---	---	--	--	--	--	--	--	--	--	--	--

#### Facility/Building Name

A	l	b	a	n	y		C	o	m	m	u	n	i	t	y		C	S										
---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	--	---	---	--	--	--	--	--	--	--	--	--	--

#### Street Address (NO PO Box Numbers)

6	5		K	r	a	n	k		S	t																		
---	---	--	---	---	---	---	---	--	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

#### City/Town/Village

#### Zip Code

A	l	b	a	n	y																							
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

#### Name of Municipality Responsible for Local Code Enforcement

C	i	t	y		o	f		A	l	b	a	n	y															
---	---	---	---	--	---	---	--	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

### 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

8/30/24

**Note: Please insert the date the actual inspection took place.**

*Inspections shall be performed between July 1<sup>st</sup> and December 1<sup>st</sup> of the current school year.*

1. Please indicate the primary use of this facility:

☒ STUDENT INSTRUCTION

☐ OTHER STUDENT USE

Please Specify:

2. Is there a fire sprinkler system in this facility?

☒ YES ☐ NO

If 'yes', is the sprinkler alarm connected with the building alarm?

☒ YES ☐ NO

3. Is there a fire hydrant system for facility protection?

☒ YES ☐ NO

If YES, indicate ownership of system (select one):

Yes

public owned

school owned

other (please specify)

4. Indicate the ownership of this facility

☐ LEASED

☒ OWNED

5. What is the current gross Square footage of this facility?

(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 YES NO

b. Provide dates of twelve fire and emergency drills required by Section 807 of Education Law held between September 1<sup>st</sup> and June 30<sup>th</sup> 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	5-31-21	1.58	
2	6-2-21	1.49	
3	6-3-21	1.52	
4			
5			
6			
7			
8			
9			
10			
11			
12			

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

site was performing virtual learning during this time no fire drills or lock downs were done as no students were on site

d. Average time to evacuate this facility was: 1 minutes 53 seconds

e. Confirm that arson and fire prevention instruction was provided in accordance with Section 808 of the Education Law (revised 9/1/05) which requires every school in New York State to provide a minimum of 45 minutes of instruction in arson and fire prevention; injury prevention and life safety for each month that school is in session.

x YES        NO

f. Confirm that employee fire prevention, evacuation and fire safety training was provided and records maintained are being maintained in accordance with Section F406 of the NYS Fire Code

x YES        NO

7. Have there been any fires in this facility since the last annual fire safety inspection report?

       YES x NO

a. If YES, indicate:        total number of fires

b.        total number of injuries

c. \_\_\_\_\_ total cost of property damage

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?

  x   YES                      NO

School Name Albany Community CS Building Name Albany Community CS  
65 Krask St. Albany NY 12202

5



**Part III: NonPublic School Certifications**

**All sections are required to be completed: Section III-A; III-B III-C & III-D**

**Section III-A Fire Inspection Method**

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 coordinator 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 8/30/2021 (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: Robert Potter Title: FF/Investigator/NYS CEO

Signature: [Signature] Date: 8/30/2021

Inspector's Organization: Albany Fire Dept.

Inspector's Telephone #: 518 221 6560 Inspector's Email: j.potter@albany.ny.gov

Inspector's Code Enforcement Certification # 0321-0094  
(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: Albany Fire Dept

Address: 26 Broad St  
Albany NY 12202

Name of contact person: Robert Potter Title: FF/Investigator/NYS CEO

Telephone #: 518-221-6560 Email address: j.potter@albany.ny.gov

**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 *Nonpublic School Fire Safety Non-Conformance Report 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: Jennifer Brady Title: Sr. Dir. of Regional Ops.

Signature: [Signature] Telephone #: 518-858-1121

Email: jbrady@albanycommunitycs.org



**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

**SYSTEM RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21

Completion Date: 8.6.21

Start Time: 7:00 am

Completion Time: 12:00 pm

**1. PROPERTY INFORMATION**

Name of Property: AlbanyCommunityCharterSchool

Address: 65 Karnak st

Description of Property: School

Name of Property Representative: Nick

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**2. TESTING AND MONITORING ORGANIZATION**

Testing Organization: SHEPHERD COMMUNICATION & SECURITY

Address: 21A RAILROAD AVE, ALBANY

Testing Organization Representative: Gary Czelusniak

License No: 12000302304

Phone: (518)-372-4849

Fax: (315)-533-1258

Email: service@shepherdny.com

Monitoring Organization: USA central station

Monitoring Organization Address: Port Chester

Monitoring Organization Phone: 18004222300

Monitoring Organization Fax: \_\_\_\_\_

Monitoring Organization Email: \_\_\_\_\_

Account Number: 926359

Means of Transmission: Pots

Entity to which alarms are Retransmitted: \_\_\_\_\_

**3. DOCUMENTATION**

Onsite location of the required record documents and site-specific software:

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

**4. DESCRIPTION OF SYSTEM OR SERVICE**

**4.1 Control Unit**

Manufacturer: Simplex

Model Number: 4010

**4.2 Software Firmware Version**

Firmware revision number: 2.02

**4.3 System Power**

**4.3.1 Primary Power**

Nominal Voltage: 120v

Overcurrent Protection Type: Breaker#12

Amps: 20

Disconnecting Location: EC panel LV-1

**4.3.2 Secondary Power**

Type: Battery

Battery Type: SLA

Location: FACP

Standby Power Calculation: Standby Mode 24 Hours, Alarm Mode 5 Minutes

**5. NOTIFICATION MADE PRIOR TO TESTING**

Monitoring Company	Contact: <u>USA</u>	Time: <u>7:30 am</u>
Building Management	Contact: <u>MOD</u>	Time: <u>7:30 am</u>
Building Occupants	Contact: _____	Time: _____
Authority have Jurisdiction	Contact: _____	Time: _____
Other	Contact: _____	Time: _____

**6. TESTING RESULTS**

**6.1 Control Equipment**

	Visual	Functional	Comments
Control Unit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Fuses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Trouble Signals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Disconnect Switches	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ground Fault	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Supervision	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

(Continued from previous page)

Local Annunciator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Remote Annunciator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Remote Power Panels	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____

**6.2 Secondary Power**

	Visual	Functional	Comments
Battery Condition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Load Voltage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Discharge Test	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Charger Test	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Remote Panel Batteries	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____

**6.3 Alarm/Supervisory Initiating Devices**

Attach additional test sheets for all Initiating devices.

**6.4 Notification Appliances**

Attach additional test sheets for all Notification devices.

**6.5 Interface Equipment**

Attach additional test sheets for all supplementary equipment.

**6.6 Supervising Station Monitoring**

	YES	NO	TIME	COMMENTS
Alarm Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8:00 am	_____
Alarm Restore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Trouble Restore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Supervisory Signal	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Supervisory Restore	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Supervision	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____

**6.7 Public Emergency Alarm Reporting System**

	YES	NO	TIME	COMMENTS
Alarm Signal	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Alarm Restore	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Trouble Signal	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

(Continued from previous page)

Trouble Restore	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervisory Signal	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervisory Restore	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervision	<input type="checkbox"/>	<input type="checkbox"/>	_____

**7. NOTIFICATION THAT TESTING IS COMPLETE**

Monitoring Company	Contact: <u>USA</u>	Time: <u>11:00 am</u>
Building Management	Contact: <u>MOD</u>	Time: _____
Building Occupants	Contact: _____	Time: _____
Authority have Jurisdiction	Contact: _____	Time: _____
Other _____	Contact: _____	Time: _____

**8. SYSTEM RESTORED TO NORMAL**

Date: 8.6.21 Time: \_\_\_\_\_

**9. SYSTEM DEFECTS, OR MALFUNCTIONS STILL EXISTING AT THE END OF THE INSPECTION.**

**10. CERTIFICATION**

This system noted above has been inspected and tested according to NFPA 72, edition 2015.

Inspector Signed: 

Print Name: Gary Czelusniak

Title: FA Inspector

Date: 8.6.21

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK**  
**12205**

(518)-372-4849

License Number: 12000302304

**INITIATING DEVICE**  
**SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21  
Start Time: 7:30 am

Completion Date: 8.6.21  
Completion Time: 12:00 pm

**1. PROPERTY INFORMATION**

Name of Property: Albany community charter s  
Address: 65 Krank st

**2. DEVICE INFORMATION**

Device Type	Address	Location	Test Results
Smoke(beam)			
Smoke	3		Pass
"	10		Pass
Heat	11		Pass
Smoke	16		Pass
"	24		Pass
"	33		Pass
"	34		Pass
Heat	35		Pass
Smoke	36		Pass
"	37		Pass
"	38		Pass
"	43		Pass
"	44		Pass
Heat	49		Pass
Smoke	52		Pass
Heat	65		Pass
Smoke	67		Pass
"	69		Pass
"	70		Pass
"	72		Pass

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518)-372-4849

License Number: 12000302304

Device Type	Address	Location	Test Results
Smoke	40		Pass
"	39		Pass
MPS	29		Pass
Smoke	31		Pass
MPS	8		Pass
Smoke	7		Pass
"	6		Pass
"	9		Pass
"	17		Pass
"	18		Pass
"	19		Pass
"	20		Pass
MPS	21		Pass
Smoke	1		Pass
"	2		Pass
"	54		Pass
"	53		Pass
"	50		Pass
"	51		Pass
"	66		Pass
"	78		Pass
"	77		Pass
"	55		Pass
Tamper	26		Pass
"	27		Pass
"	5		Pass
Waterflow	4		Pass
"	23		Pass



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**SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21

Completion Date: 8.6.21

Start Time: 7:30 am

Completion Time: 12:00 pm

**1. PROPERTY INFORMATION**

Name of Property: Albany community charter s

Address: 65 Krank st

**2. DEVICE INFORMATION**

Device Type	Address	Location	Test Results
RTU1	59		Pass
RTU2	60		Pass
RTU3	61		Pass
RTU4	62		Pass
RTU5	63		Pass
RTU6	64		Pass
Smoke	73		Pass
"	74		Pass
RTU7	76		Pass



**SHEPHERD COMMUNICATION AND SECURITY**  
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License Number: 12000302304

**NOTIFICATION DEVICE**  
**SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21  
Start Time: 7:30 am

Completion Date: 8.6.21  
Completion Time: 12:00 am

**1. PROPERTY INFORMATION**

Name of Property: Albany community charter school  
Address: 65 Karnak st

**2. DEVICE INFORMATION**

Appliance Type	Location	Test Results
Horn/Strobe		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
Strobe		Pass
"		Pass
"		Pass
Horn/Strobe		Pass
"		Pass
Strobe		Pass
Horn/strobe		Pass
"		Pass
"		Pass
Strobe		Pass
"		Pass
"		Pass
"		Pass
Horn/strobe		Pass
Strobe		Pass
"		Pass

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License Number: 12000302304

**NOTIFICATION DEVICE**  
**SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21

Completion Date: 8.6.21

Start Time: 7:30 am


Completion Time: 12:00 pm

**1. PROPERTY INFORMATION**

Name of Property: Albany community charter school

Address: 65 Karnak st

**2. DEVICE INFORMATION**

Appliance Type	Location	Test Results
Horn/strobe		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
Strobe		Pass
"		Pass
"		Pass
Horn/strobe		Pass
"		Pass
Strobe		Pass
"		Pass

## Report of Inspection/Test

Annual NFPA 25

2021-08-23

### Property

Albany Community Char. Elementary School  
65 Krank St  
ALBANY NY 12202

Print Date: 2021-08-23

Conducted by: Isaac Clark

RBM-Guardian Fire Protection, INC  
8 Enterprise Drive  
ALBANY NY 12204  
518-463-4340  
danc@rbm-guardian.com



## Report of Inspection/Test General Questions

### OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification, hazard of contents, and/or storage method remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

### FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible and easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC caps and plugs in place and undamaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve free of leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

### SPRINKLER HEADS

Are there the proper number and type of spare sprinklers with a list in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including foreign paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

# Report of Inspection/Test

Annual NFPA 25

2021-08-23

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danc@rbm-guardian.com



## PIPES

Are the visible pipe and fittings in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Do visible pipe and fittings have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free of any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

## CONTROL VALVE AREA

Are the control valves with locks in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with locks locked or is supervision in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the control valves with locks accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with locks free from any leaks?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the control valves with locks have the appropriate wrenches?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with locks properly identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the control valves with electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the control valves with electrical supervision locked or is supervision in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the control valves with electrical supervision accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the control valves with electrical supervision free from any leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the control valves with electrical supervision have the appropriate wrenches?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with electrical supervision properly identified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

## VALVE AREA

Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on system operable and in good working condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves (sprinkler system) in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves (sprinkler system) with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA



# Report of Inspection/Test

Annual NFPA 25

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Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

## DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Low temperature alarms are in good working condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the gauges on systems with/without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the dry pipe valve(s) free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Has the low air pressure alarm passed it's test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Has the quick opening device passed the test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Have the strainers, filters and orifices been inspected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have automatic air maintenance devices passed test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

## BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	
---	---	--

## ALARMS

Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

# Report of Inspection/Test

Annual NFPA 25

2021-08-23

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Is the trim in correct (open or closed) position?

☒ Yes  
☐ No  
☐ NA

Is there no leakage in the retarding chamber or drains?

☒ Yes  
☐ No  
☐ NA

## MAINTENANCE

If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?

☐ Yes  
☐ No  
☒ NA

If conditions were found that required flushing, was flushing of the system conducted?

☐ Yes  
☐ No  
☒ NA

Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?

☐ Yes  
☐ No  
☒ NA

Was a drain test conducted after opening any closed valve?

☒ Yes  
☐ No  
☐ NA

Operating stem of all OS&Y valves lubricated, completely closed and reopened?

☐ Yes  
☐ No  
☒ NA

Have sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems been placed annually?

☐ Yes  
☐ No  
☒ NA

Are dry-pipe systems kept in dry condition?

☒ Yes  
☐ No  
☐ NA

Have auxiliary drains been emptied (before freezing weather) ?

☐ Yes  
☐ No  
☒ NA

Is interior of dry-pipe valves cleaned and in good condition?

☒ Yes  
☐ No  
☐ NA

Have low points been drained before freezing weather?

☐ Yes  
☐ No  
☒ NA

Do the alarm valve(s), strainers, filters and restricted offices pass internal inspection?

☒ Yes  
☐ No  
☐ NA

# Report of Inspection/Test

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## Report of Inspection/Test for System - 3" VICTAULIC S747

### ANTIFREEZE

What does the Antifreeze test at in Fahrenheit NA

## Report of Inspection/Test for System - 4" Reliable Model D

### DRY VALVE

Have automatic air maintenance devices passed test?  
☒ Yes  
☐ No  
☐ NA

### AIR COMPRESSORS

Is the air compressor, piping, wiring free of physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the air compressor anchored properly to the structure or system piping?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For oil-filled air compressors, is the level sufficient?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Does the air compressor operate as intended on the proper drop in pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the air compressor restore normal air pressure in the required time frame?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Does the air compressor operate without overheating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
For oil-filled air compressors, has the oil been replaced or changed per the manufacturer's instructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

### DRY VALVE TRIP TEST

Dry Valve			Size: 4		Year: 2006		Accelerator		Year: N/A		
Make		Model		Serial no.		Make		Model		Serial no.	
reliable		D		48891		N/A		N/A		N/A	
	Time to Trip thru test pipe			Water Pressure	Air Pressure	Trip point air pressure		Time water reached test outlet		Alarm Operated	
Without Accelerator	NA-Partial			78	30	15		NA/partial		Yes	
With Accelerator	N/A			N/A	N/A	N/A		N/A		N/A	

### DRY VALVE TRIP TEST (cont)

Were results comparable to previous test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has it passed air leakage test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---------------------------------	---

# Report of Inspection/Test

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## MAIN DRAIN FLOW TESTS

System	Initial static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Did waterflow alarm operate?	Are results comparable to previous test?
3" VICTAULIC S747	83	70	78	5	Yes		Yes
4" Reliable Model D	83	70	78	5	Yes	Yes	Yes

## INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
3" VICTAULIC S747	Riser	Wet IT	42	Yes	Yes	Yes	Yes	Yes
4" Reliable Model D	Attic	Ball	5sec-through alarm line	Yes	Yes	Yes	Yes	Yes

## VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
3" VICTAULIC S747	Sectional	Riser	Butterfly	3"	Supervision	Yes	Yes	Yes	Yes	N/A	7
4" Reliable Model D	Sectional	Riser	Butterfly	4"	Supervision	Yes	Yes	Yes	Yes	N/A	
	Main	Basement	Butterfly	4"	Supervision	Yes	Yes	Yes	Yes	N/A	
3" VICTAULIC S747	Main	Riser	Butterfly	4"	Supervision	Yes	Yes	Yes	Yes	N/A	7
	Dry	Basement	Butterball	4"	Supervision	Yes	Yes	Yes	Yes	N/A	
	Wet	Basement	Butterfly	3"	Supervision	Yes	Yes	Yes	Yes	N/A	

## DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
	Dry	Basement	Angle Valve		Yes
4" Reliable Model D	Dry drain	Riser	Angle Valve	N/A	Yes
	Wet	Basement	Angle Valve		Yes



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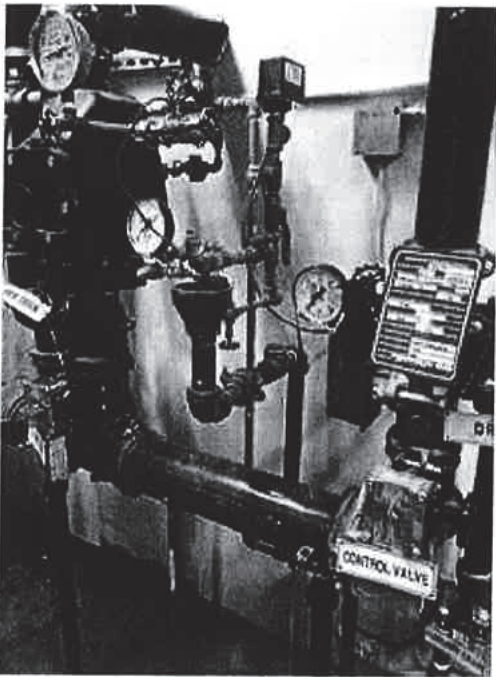


### Questions with Photos and Notes

- Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?

Yes

Notes:



## Report of Inspection/Test

Annual NFPA 25

2021-08-23

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### Deficiencies - General Questions

Dry-type sprinklers replaced or successfully sample tested within last 10 years? - 5.3.1.1.1.6

No

Notes:

### Deficiencies - General Wet System Questions

None

### Deficiencies - General Dry System Questions

None

### Deficiencies - 3" VICTAULIC S747

None

### Deficiencies - 4" Reliable Model D

None

### Deficiencies - 3" Wilkins 375

None

### Deficiencies - Inspectors Test Connection

None

### Deficiencies - Valves

None

### Deficiencies - Drain Valves

None



# Report of Inspection/Test

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Print Date: 2021-08-23

## Inspector Signature

I state that the information on this form is correct at the time and place of my inspection, and all equipment tested at this time was left in operational condition upon completion of this inspection except as noted.

Inspector Name

Signature

Date Completed

Isaac Clark

A handwritten signature in black ink, appearing to be "Isaac Clark", written over a large, faint, stylized "R" watermark.

2021-08-23

## Client Signature

I state that the information on this form is correct at the time and place of my inspection, and all equipment tested at this time was left in operational condition upon completion of this inspection except as noted.

Client Name

Signature

Date Completed

Nick

A handwritten signature in black ink, appearing to be "Nick", written over a large, faint, stylized "R" watermark.

2021-08-23

## Report on Test and Maintenance of Backflow Prevention Device

**PART A**

Please use a separate form for each device.

For the year **2021**

- ☐ Initial test - Complete entire form  
☒ Annual test - Complete Part A only

Public Water Supply <b>lty</b>		Account No.		County	Block	Lot												
Facility Name <b>Albany Community Char. Elementary School</b>				Location of Device														
Address <b>65 Krank St ALBANY 12202</b>				<b>Mechanical room</b>														
Device Information		Manufacturer <b>Wilkins</b>	Type <input checked="" type="checkbox"/> RPZ <input type="checkbox"/> DCV	Model <b>375</b>	Size (in inches) <b>3</b>	Serial Number <b>L38086</b>												
Check Valve No. 1		Check Valve No. 2		Differential Pressure Relief Valve		Line Pressure <b>70</b> psi												
Test before repair	Leaked <input type="checkbox"/> Closed tight <input checked="" type="checkbox"/>		Leaked <input type="checkbox"/> Closed tight <input checked="" type="checkbox"/>		Opened at <b>2.3</b> psid	Date <table border="1"><tr><td>0</td><td>8</td><td>1</td><td>6</td><td>2</td><td>1</td></tr><tr><td>M</td><td>D</td><td colspan="4">Y</td></tr></table>	0	8	1	6	2	1	M	D	Y			
	0	8	1	6	2	1												
M	D	Y																
Pressure drop across first check valve <b>9.2</b> psid																		
Describe repairs and materials used	<b>NA</b>		<b>NA</b>		<b>NA</b>	Repaired by Name <b>NA</b> Lic # <b>NA</b> Date repaired: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>M</td><td>D</td><td colspan="4">Y</td></tr></table>							M	D	Y			
M	D	Y																
Final test	Closed tight <input type="checkbox"/>		Closed tight <input type="checkbox"/>		Opened at <b>NA</b> psid	Date <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>M</td><td>D</td><td colspan="4">Y</td></tr></table>							M	D	Y			
M	D	Y																
Pressure drop across first check valve <b>NA</b> psid																		
Water Meter Number <b>34059773</b>		Meter Reading <b>0086100</b>		Type of Service: (check one) <input checked="" type="checkbox"/> Domestic    Fire    Other _____														
Remarks (Describe deficiencies: bypasses, outlets before the device, connections between the device and point of entry, missing or inadequate airgaps, etc.) <b>2nd check-2.5</b>																		
Certification: This device <input checked="" type="checkbox"/> meets, <input type="checkbox"/> does NOT meet, the requirements of an acceptable containment device at the time of testing I hereby certify the foregoing data to be correct. <b>Isaac Clark</b> <b>11082</b> Print Name    Certified Tester No.    Signature    Expiration Date																		
Property owners (or owners agent) certification that test was performed: <b>Kipp School</b> <b>Nick(maintenance)</b> Print Name    Title    Signature    Telephone																		

**PART B**

Certification that installation is in accordance with the approved plans.

(To be completed by the design engineer or architect or water supplier.)

I hereby certify that this installation is in accordance with the approved plans.

Name	Title	Date	NYS DOH Log #
License Number	Phone (   )	m   d   y	
Representing		Describe minor installation changes	
Address			
City	State    Zip		
Signature			

NOTE: Send one completed copy to the designated health department representative and one copy to the water supplier within 30 days of the testing device.  
Notify owner and water supplier immediately if device fails test and repairs cannot immediately be made.

### 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.

#### NONPUBLIC SCHOOL BEDS CODE#

0	1	0	1	0	0	8	6	0	8	9	9
---	---	---	---	---	---	---	---	---	---	---	---

#### School Name

A	l	b	a	n	y		C	o	m	m	u	n	i	t	y		M	i	d	d	l	e		C	S
---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	--	---	---

#### Facility/Building Name

A	l	b	a	n	y		C	o	m	m	u	n	i	t	y		M	i	d	d	l	e		C	S
---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	--	---	---

#### Street Address (NO PO Box Numbers)

4	2		s	o	u	t	h		D	o	v	e	s	t											
---	---	--	---	---	---	---	---	--	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--

#### City/Town/Village

#### Zip Code

A	l	b	a	n	y																				

#### Name of Municipality Responsible for Local Code Enforcement

C	i	t	y																						
---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

### 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

8/27/21

**Note: Please insert the date the actual inspection took place.**

*Inspections shall be performed between July 1<sup>st</sup> and December 1<sup>st</sup> of the current school year.*

1. Please indicate the primary use of this facility:

☒ STUDENT INSTRUCTION

☐ OTHER STUDENT USE

Please Specify:

2. Is there a fire sprinkler system in this facility?

☒ YES ☐ NO

If 'yes', is the sprinkler alarm connected with the building alarm?

☒ YES ☐ NO

3. Is there a fire hydrant system for facility protection?

☒ YES ☐ NO

If YES, indicate ownership of system (select one):

Yes

public owned

school owned

other (please specify)

4. Indicate the ownership of this facility

☐ LEASED

☒ OWNED

5. What is the current gross Square footage of this facility?



(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 YES NO

b. Provide dates of twelve fire and emergency drills required by Section 807 of Education Law held between September 1<sup>st</sup> and June 30<sup>th</sup> 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	5-31-21	1.53	
2	6-2-21	1.48	
3	6-3-21	1.46	
4			
5			
6			
7			
8			
9			
10			
11			
12			

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

site was performing virtual learning, during this time no fire drills or lock downs were performed as no students were on site

d. Average time to evacuate this facility was: 1 minutes 49 seconds

e. Confirm that arson and fire prevention instruction was provided in accordance with Section 808 of the Education Law (revised 9/1/05) which requires every school in New York State to provide a minimum of 45 minutes of instruction in arson and fire prevention; injury prevention and life safety for each month that school is in session.

x YES NO

f. Confirm that employee fire prevention, evacuation and fire safety training was provided and records maintained are being maintained in accordance with Section F406 of the NYS Fire Code

x YES NO

7. Have there been any fires in this facility since the last annual fire safety inspection report?

YES x NO

a. If YES, indicate: total number of fires

b. total number of injuries

c. \_\_\_\_\_ total cost of property damage

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?

  x   YES                      NO



School Name Albany Community Middle CS Building Name Albany Community middle CS

5

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

**Section III-A Fire Inspection Method**

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 coordinator 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 8/27/2021 (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: Robert Potter Title: FF/Investigator/NYS CEO

Signature: [Signature] Date: 8/27/2021

Inspector's Organization: Albany Fire Dept

Inspector's Telephone #: 518 221 6560 Inspector's Email: j.potter@albanyny.gov

Inspector's Code Enforcement Certification # 0321-0094  
(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: Albany Fire Dept

Address: 26 Broad St  
Albany NY 12202

Name of contact person: Robert Potter Title: FF/Investigator/NYS CEO

Telephone #: 518 221 6560 Email address: j.potter@albanyny.gov

**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 *Nonpublic School Fire Safety Non-Conformance Report 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: Jennifer Brady Title: Sr. Director of Regional Operations

Signature: [Signature] Telephone #: 518-858-1171

Email: jbrady@albanycommunitycs.org

## FIRE DRILLS 2020-2021

[illegible]



## FIRE DRILLS 2020-2021

[illegible]

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

**SYSTEM RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21

Completion Date: 8.6.21

Start Time: 1:00 pm

Completion Time: 3:00 pm

**1. PROPERTY INFORMATION**

Name of Property: Achievement academy charter school

Address: 45 south dove st

Description of Property: School

Name of Property Representative: Nick

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**2. TESTING AND MONITORING ORGANIZATION**

Testing Organization: SHEPHERD COMMUNICATION & SECURITY

Address: 21A RAILROAD AVE, ALBANY

Testing Organization Representative: Gary Czelusniak

License No: 12000302304

Phone: (518)-372-4849

Fax: (315)-533-1258

Email: service@shepherdny.com

Monitoring Organization: USA central station

Monitoring Organization Address: Port Chester

Monitoring Organization Phone: 18004222300

Monitoring Organization Fax: \_\_\_\_\_

Monitoring Organization Email: \_\_\_\_\_

Account Number: 926360

Means of Transmission: Pots

Entity to which alarms are Retransmitted: \_\_\_\_\_

**3. DOCUMENTATION**

Onsite location of the required record documents and site-specific software:

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

**4. DESCRIPTION OF SYSTEM OR SERVICE**

**4.1 Control Unit**

Manufacturer: Honeywell

Model Number: Vista128FB

**4.2 Software Firmware Version**

Firmware revision number: N/A

**4.3 System Power**

**4.3.1 Primary Power**

Nominal Voltage: 120v

Overcurrent Protection Type: Breaker#20

Amps: 20

Disconnecting Location: EC panel "CP2"

**4.3.2 Secondary Power**

Type: Battery

Battery Type: SLA

Location: FACP

Standby Power Calculation: Standby Mode 24 Hours, Alarm Mode 5 Minutes

**5. NOTIFICATION MADE PRIOR TO TESTING**

Monitoring Company  
Building Management  
Building Occupants  
Authority have Jurisdiction  
Other

Contact: USA  
Contact: MOD  
Contact: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Contact: \_\_\_\_\_

Time: 1:00 pm  
Time: \_\_\_\_\_  
Time: \_\_\_\_\_  
Time: \_\_\_\_\_  
Time: \_\_\_\_\_

**6. TESTING RESULTS**

**6.1 Control Equipment**

	Visual	Functional	Comments
Control Unit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Lamps/LEDs/LCDs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Fuses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Trouble Signals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Disconnect Switches	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ground Fault	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Supervision	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____



**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

(Continued from previous page)

Local Annunciator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Remote Annunciator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Remote Power Panels	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____

**6.2 Secondary Power**

	Visual	Functional	Comments
Battery Condition	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Load Voltage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Discharge Test	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Charger Test	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Remote Panel Batteries	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____

**6.3 Alarm/Supervisory Initiating Devices**

Attach additional test sheets for all Initiating devices.

**6.4 Notification Appliances**

Attach additional test sheets for all Notification devices.

**6.5 Interface Equipment**

Attach additional test sheets for all supplementary equipment.

**6.6 Supervising Station Monitoring**

	YES	NO	TIME	COMMENTS
Alarm Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1:30	_____
Alarm Restore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Trouble Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Trouble Restore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Supervisory Signal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Supervisory Restore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____
Supervision	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	_____

**6.7 Public Emergency Alarm Reporting System**

	YES	NO	TIME	COMMENTS
Alarm Signal	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Alarm Restore	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Trouble Signal	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

(Continued from previous page)

Trouble Restore	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervisory Signal	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervisory Restore	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supervision	<input type="checkbox"/>	<input type="checkbox"/>	_____

**7. NOTIFICATION THAT TESTING IS COMPLETE**

Monitoring Company	Contact: USA	Time: 3:00 pm
Building Management	Contact: MOD	Time: _____
Building Occupants	Contact: _____	Time: _____
Authority have Jurisdiction	Contact: _____	Time: _____
Other _____	Contact: _____	Time: _____

**8. SYSTEM RESTORED TO NORMAL**

Date: 8.6.21 Time: 3:00 pm

**9. SYSTEM DEFECTS, OR MALFUNCTIONS STILL EXISTING AT THE END OF THE INSPECTION.**

**10. CERTIFICATION**

This system noted above has been inspected and tested according to NFPA 72, edition 2015.

Inspector Signed: 

Print Name: Gary Czelusniak

Title: FA Inspector

Date: 8.6.21

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK**  
**12205**

(518)-372-4849

License Number: 12000302304

**INITIATING DEVICE**  
**SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21  
Start Time: 1:00 pm

Completion Date: 8.6.21  
Completion Time: 3:00 pm

**1. PROPERTY INFORMATION**

Name of Property: Albany community charter s  
Address: 45 S Dove st

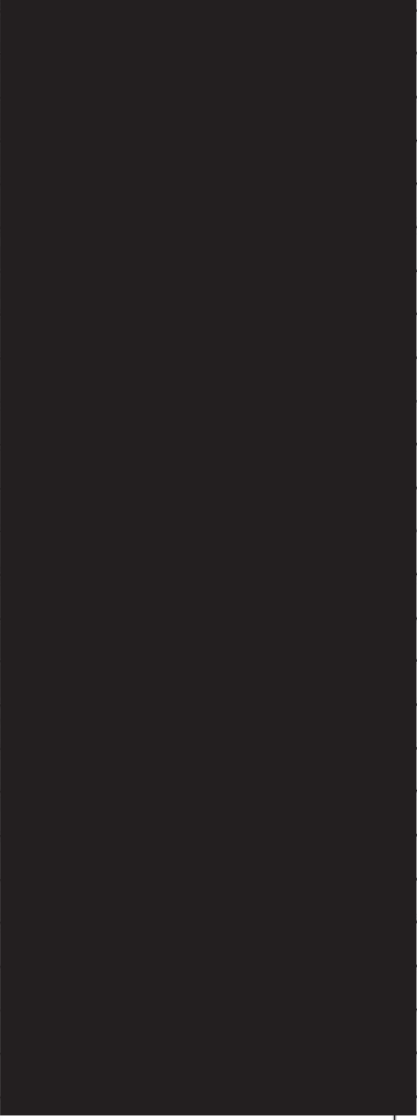
**2. DEVICE INFORMATION**

Device Type	Address	Location	Test Results
MPS	25		Pass
Smoke	28		Pass
"	29		Pass
"	32		Pass
MPS	45		Pass
"	47		Pass
Smoke	37		Pass
"	36		Pass
"	95		Pass
"	38		Pass
"	39		Pass
"	41		Pass
Heat	18		Visual Pass
"	18		Visual Pass
MPS	14		Pass
"	16		Pass
Smoke	97		Pass
"	20		Pass
"	19		Pass
"	43		Pass
MPS	98		Pass

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

Device Type	Address	Location	Test Results
MPS	63		Pass
Smoke	60		Pass
"	58		Pass
"	50		Pass
MPS	54		Pass
Smoke	70		Pass
MPS	72		Pass
Smoke	73		Pass
"	75		Pass
MPS	77		Pass
Tamper	102		Pass
"	104		Pass
"	99		Pass
"	100		Pass
Waterflow	101		Pass
"	103		Pass
Tamper	105		Pass
MPS	10		Pass
Smoke	35		Pass
RTU	80		Pass
"	81		Pass
"	82		Pass
"	83		Pass
"	84,85,86,87,88,89,		Pass
"	90,91,92,93		Pass

**SHEPHERD COMMUNICATION AND SECURITY**  
**21A RAILROAD AVE. ALBANY, NEW YORK 12205**

518)-372-4849

License Number: 12000302304

**NOTIFICATION DEVICE**  
**SUPPLEMENTARY RECORD OF INSPECTION AND TESTING**

Start Date: 8.6.21  
Start Time: 1:00 pm

Completion Date: 8.6.21  
Completion Time: 3:00 pm

**1. PROPERTY INFORMATION**

Name of Property: Kipp@Dove  
Address: 45 dove st

**2. DEVICE INFORMATION**

Appliance Type	Location	Test Results
Horn/Strobe		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
Strobe		Pass
"		Pass
"		Pass
"		Pass
Horn/strobe		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass
"		Pass





# Report of Inspection/Test

Annual NFPA 25

2021-08-16

## Property

Albany Community Charter Middle School  
42 South Dove St  
ALBANY NY 12202  
NICK  
Print Date: 2021-08-19

Conducted by: Isaac Clark

RBM-Guardian Fire Protection, INC  
8 Enterprise Drive  
ALBANY NY 12204  
518-463-4340  
danc@rbm-guardian.com



## PIPES

Are the visible pipe and fittings in good condition with no external corrosion?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Do visible pipe and fittings have no mechanical damage or leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does visible pipe have no external loads?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible pipe hangers and seismic braces not damaged or loose?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the pipe through freezers free of any ice blockage?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

## CONTROL VALVE AREA

Are the control valves with locks in correct (open or closed) position?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with locks locked or is supervision in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the control valves with locks accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with locks free from any leaks?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the control valves with locks have the appropriate wrenches?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with locks properly identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the control valves with electrical supervision in correct (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the control valves with electrical supervision locked or is supervision in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the control valves with electrical supervision accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the control valves with electrical supervision free from any leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the control valves with electrical supervision have the appropriate wrenches?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are the control valves with electrical supervision properly identified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

## VALVE AREA

Are all check valves externally inspected, operating properly, and are in good condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the gauges on system operable and in good working condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the gauges on system showing normal water supply pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the hydraulic name plate (calculated systems) attached securely to the riser and legible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are Pressure reducing valves (sprinkler system) in open position and not leaking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Are Pressure reducing valves (sprinkler system) with downstream pressure per the design?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA

# Report of Inspection/Test

Annual NFPA 25

2021-08-16

## Property

Albany Community Charter Middle School  
42 South Dove St

ALBANY NY 12202

NICK

Print Date: 2021-08-19

Conducted by: Isaac Clark

RBM-Guardian Fire Protection, INC

8 Enterprise Drive

ALBANY NY 12204

518-463-4340

danc@rbm-guardian.com



Are Pressure reducing valves in good condition including no handwheels broken?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Have the mechanical waterflow alarm devices passed tests by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Do valve supervisory switches indicate movement?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	The electrical waterflow alarm devices passed test by opening inspector's test connection/bypass connection with alarms actuating and flow observed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have post indicating valves been opened until spring or torsion felt in the rod and then closed back 1/4 turn?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	All control valves operated through full range and returned to normal position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have pressure reducing valves passed partial flow test?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		

## DRY VALVE

Are enclosures around valves maintaining a minimum of 40 degrees F?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Low temperature alarms are in good working condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Are the gauges on systems with/without low pressure alarms in good condition and showing normal air and water pressure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	For freezer systems, gauge near compressor reading the same as gauge near the dry-pipe valve?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Is the dry pipe valve(s) free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are trim valves in appropriate (open or closed) position?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is there no leakage in the intermediate chamber?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the priming level correct and has the low air pressure signal passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Has the low air pressure alarm passed it's test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the quick opening device passed the test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Have the strainers, filters and orifices been inspected?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Have automatic air maintenance devices passed test?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

## BACKFLOW PREVENTERS

Is relief port on RPZ device not discharging?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		
---	---	--	--

## ALARMS

Are alarms and supervisory devices not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the alarm valve free from physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
---	---	---	---

# Report of Inspection/Test

Annual NFPA 25

2021-08-16

## Property

Albany Community Charter Middle School  
42 South Dove St  
ALBANY NY 12202  
NICK  
Print Date: 2021-08-19

Conducted by: Isaac Clark

RBM-Guardian Fire Protection, INC  
8 Enterprise Drive  
ALBANY NY 12204  
518-463-4340  
danc@rbm-guardian.com



Is the trim in correct (open or closed) position?

☒ Yes  
☐ No  
☐ NA

Is there no leakage in the retarding chamber or drains?

☒ Yes  
☐ No  
☐ NA

## MAINTENANCE

If a sprinkler failed a sample test were all the sprinklers represented by that sample replaced?

☐ Yes  
☐ No  
☒ NA

If conditions were found that required flushing, was flushing of the system conducted?

☐ Yes  
☐ No  
☒ NA

Have adjusted, repaired, reconditioned, or replaced components had proper tests/inspections performed?

☐ Yes  
☐ No  
☒ NA

Was a drain test conducted after opening any closed valve?

☒ Yes  
☐ No  
☐ NA

Operating stem of all OS&Y valves lubricated, completely closed and reopened?

☒ Yes  
☐ No  
☐ NA

Have sprinklers and spray nozzles protecting commercial cooking equipment and ventilating systems been placed annually?

☐ Yes  
☐ No  
☒ NA

Are dry-pipe systems kept in dry condition?

☒ Yes  
☐ No  
☐ NA

Have auxiliary drains been emptied (before freezing weather) ?

☒ Yes  
☐ No  
☐ NA

Is interior of dry-pipe valves cleaned and in good condition?

☒ Yes  
☐ No  
☐ NA

Have low points been drained before freezing weather?

☒ Yes  
☐ No  
☐ NA

Do the alarm valve(s), strainers, filters and restricted offices pass internal inspection?

☒ Yes  
☐ No  
☐ NA

## Report of Inspection/Test

Annual NFPA 25

2021-08-16

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## Report of Inspection/Test for System - 3" Victaulic Test and Drain

### ANTIFREEZE

What does the Antifreeze test at in Fahrenheit

NA

## Report of Inspection/Test for System - 4" Reliable Model D

### DRY VALVE

Have automatic air maintenance devices passed test?

☒ Yes

☐ No

☐ NA

### AIR COMPRESSORS

Is the air compressor, piping, wiring free of physical damage?

☒ Yes

☐ No

☐ NA

Is the air compressor anchored properly to the structure or system piping?

☒ Yes

☐ No

☐ NA

For oil-filled air compressors, is the level sufficient?

☒ Yes

☐ No

☐ NA

Does the air compressor operate as intended on the proper drop in pressure?

☒ Yes

☐ No

☐ NA

Does the air compressor restore normal air pressure in the required time frame?

☒ Yes

☐ No

☐ NA

Does the air compressor operate without overheating?

☒ Yes

☐ No

☐ NA

For oil-filled air compressors, has the oil been replaced or changed per the manufacturer's instructions?

☒ Yes

☐ No

☐ NA

### DRY VALVE TRIP TEST

Dry Valve		Size: 4	Year: 2005		Accelerator		Year: 2005		
Make		Model	Serial no.		Make		Model		Serial no.
reliable		D	48589		reliable		B1		N/A
	Time to Trip thru test pipe		Water Pressure	Air Pressure	Trip point air pressure		Time water reached test outlet		Alarm Operated
Without Accelerator			N/A	N/A	N/A		N/A		N/A
With Accelerator	17sec		50	40	33		NA		Yes

### DRY VALVE TRIP TEST (cont)

Were results comparable to previous test?

☒ Yes

☐ No

☐ NA

Has it passed air leakage test?

☒ Yes

☐ No

☐ NA



# Report of Inspection/Test

Annual NFPA 25

2021-08-16

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## MAIN DRAIN FLOW TESTS

System	Initial static	Residual	Static	Seconds to Return to Initial Static	Flow Observed?	Did waterflow alarm operate?	Are results comparable to previous test?
3" Victaulic Test and Drain	57	40	50	5	Yes		Yes
4" Reliable Model D	57	40	50	5	Yes	Yes	Yes

## INSPECTORS TEST CONNECTION

System	Location	Description	Time to Alarm (seconds)	Reported?	Smooth Orifice	Easily Accessible	Signs?	Pass?
3" Victaulic Test and Drain	Riser	Test n drain	37	Yes	Yes	Yes	Yes	Yes
4" Reliable Model D	Kitchen	IT	23sec	Yes	Yes	Yes	Yes	Yes

## VALVES

System	Description	Location	Valve Type	Size	Secured	Open	Easily Accessible	Signs	Exercised	Stems Lubricated	# of Turns
3" Victaulic Test and Drain	(2)mains	Mechanical room	OS&Y	4"	Supervision	N/A	N/A	N/A	N/A	N/A	Remove from page
4" Reliable Model D	Sectional	Mechanical room	Butterfly	4"	Supervision	Yes	Yes	Yes	Yes	N/A	9
	(2)Mains	Riser	OS&Y	4"	Supervision	Yes	Yes	Yes	Yes	Yes	14
3" Victaulic Test and Drain	Sectional	Mechanical room	Butterfly	3"	Supervision	Yes	Yes	Yes	Yes	N/A	9
	Wet	Sectional	Butterfly	2-1/2"	Supervision						Remove from page
	Sectional	Riser	Butterfly	4"		Yes	Yes	Yes	Yes	N/A	Remove from page

## DRAIN VALVES

System	Description	Location	Drain	Aux Drain Drained	Water Flow Observed
	Dry	Mechanical room	Drum Drip	Yes	Yes
4" Reliable Model D	Dry	Risers	Angle Valve	Yes	Yes
	Dry	Kitchen	Drum Drip	Yes	Yes
	Dry	Main	Angle Valve	Yes	Yes
	Dry IT	Kitchen	Ball Valve	Yes	Yes



# Report of Inspection/Test

Annual NFPA 25

2021-08-16

## Property

Albany Community Charter Middle School  
42 South Dove St  
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	Main wet	Riser	Test And Drain		
3" Victaulic Test and Drain	Sectional	Mechanical room	Test And Drain	N/A	Yes
	Wet IT	Kitchen	Ball Valve	Yes	Yes

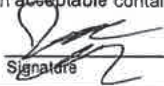

# Report on Test and Maintenance of Backflow Prevention Device

**PART A**

Please use a separate form for each device.

For the year **2021**

- ☐ Initial test - Complete entire form  
☒ Annual test - Complete Part A only

Public Water Supply <b>City</b>		Account No.		County	Block	Lot
Facility Name <b>Albany Community Charter Middle School</b>				Location of Device		
Address <b>42 South Dove St ALBANY 12202</b>				<b>Mechanical Room</b>		
Device Information		Manufacturer <b>Wilkins</b>	Type <input checked="" type="checkbox"/> RPZ <input type="checkbox"/> DCV	Model <b>375</b>	Size (in inches) <b>3</b>	Serial Number <b>L29494</b>
Check Valve No. 1		Check Valve No. 2		Differential Pressure Relief Valve		Line Pressure <b>53</b> psi
Test before repair	Leaked <input type="checkbox"/> Closed tight <input checked="" type="checkbox"/>		Leaked <input type="checkbox"/> Closed tight <input checked="" type="checkbox"/>		Opened at <b>3.2</b> psid	
	Pressure drop across first check valve <b>9.1</b> psid				Date <b>08/10/21</b> M D Y	
Describe repairs and materials used	<b>NA</b>		<b>NA</b>		<b>NA</b>	
					Repaired by Name <b>NA</b> Lic # <b>NA</b> Date repaired: <b>08/10/21</b> M D Y	
Final test	Closed tight <input type="checkbox"/>		Closed tight <input type="checkbox"/>		Opened at <b>NA</b> psid	
	Pressure drop across first check valve <b>NA</b> psid				Date <b>08/10/21</b> M D Y	
Water Meter Number <b>06102471</b>		Meter Reading <b>165038</b>		Type of Service: (check one) <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Fire <input type="checkbox"/> Other		
Remarks (Describe deficiencies: bypasses, outlets before the device, connections between the device and point of entry, missing or inadequate airgaps, etc.) <b>2nd check 1.6</b>						
Certification: This device <input checked="" type="checkbox"/> meets, <input type="checkbox"/> does NOT meet, the requirements of an acceptable containment device at the time of testing I hereby certify the foregoing data to be correct. Isaac Clark <b>11082</b>  <b>07/31/24</b> Print Name Certified Tester No. Signature Expiration Date						
Property owners (or owners agent) certification that test was performed: Kipp School <b>Nick</b>  <b>07/31/24</b> Print Name Title Signature Telephone						

**PART B**

Certification that installation is in accordance with the approved plans.

(To be completed by the design engineer or architect or water supplier.)

I hereby certify that this installation is in accordance with the approved plans.

Name	Title	Date	NYS DOH Log #
License Number	Phone ( )	m d y	
Representing		Describe minor installation changes	
Address			
City	State Zip		
Signature			

NOTE: Send one completed copy to the designated health department representative and one copy to the water supplier within 30 days of the testing device.  
Notify owner and water supplier immediately if device fails test and repairs cannot immediately be made.

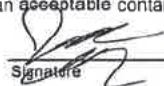

## Report on Test and Maintenance of Backflow Prevention

**PART A**

Please use a separate form for each device.

For the year **2021**

- ☐ Initial test - Complete entire form  
☒ Annual test - Complete Part A only

Public Water Supply <b>City</b>		Account No.		County	Block	Lot												
Facility Name <b>Albany Community Charter Middle School</b>				Location of Device														
Address <b>42 South Dove St ALBANY 12202</b>				<b>Mechanical Room</b>														
Device Information		Manufacturer <b>Ames</b>	Type <input type="checkbox"/> RPZ <input checked="" type="checkbox"/> DCV	Model <b>2000 SS</b>	Size (in inches) <b>4"</b>	Serial Number <b>151428</b>												
Check Valve No. 1		Check Valve No. 2		Differential Pressure Relief Valve		Line Pressure <b>50</b> psi												
Test before repair	Leaked <input type="checkbox"/> Closed tight <input checked="" type="checkbox"/>		Leaked <input type="checkbox"/> Closed tight <input checked="" type="checkbox"/>		Opened at <b>NA</b> psid	Date <table border="1"><tr><td>0</td><td>8</td><td>1</td><td>0</td><td>2</td><td>1</td></tr><tr><td>M</td><td>D</td><td>Y</td><td></td><td></td><td></td></tr></table>	0	8	1	0	2	1	M	D	Y			
	0	8	1	0	2	1												
M	D	Y																
Pressure drop across first check valve <b>2.5</b> psid																		
Describe repairs and materials used	<b>NA</b>		<b>NA</b>		<b>NA</b>	Repaired by Name <b>NA</b> Lic # <b>NA</b> Date repaired: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>M</td><td>D</td><td>Y</td><td></td><td></td><td></td></tr></table>							M	D	Y			
M	D	Y																
Final test		Closed tight <input type="checkbox"/>		Closed tight <input type="checkbox"/>		Opened at <b>NA</b> psid												
Pressure drop across first check valve <b>NA</b> psid						Date <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>M</td><td>D</td><td>Y</td><td></td><td></td><td></td></tr></table>							M	D	Y			
M	D	Y																
Water Meter Number <b>NA</b>		Meter Reading <b>NA</b>		Type of Service: (check one) Domestic <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Other _____														
Remarks (Describe deficiencies: bypasses, outlets before the device, connections between the device and point of entry, missing or inadequate airgaps, etc.) <b>2nd check-2.0</b>																		
Certification: This device <input checked="" type="checkbox"/> meets, <input type="checkbox"/> does NOT meet, the requirements of an acceptable containment device at the time of testing I hereby certify the foregoing data to be correct. Print Name <b>Isaac Clark</b> Certified Tester No. <b>11082</b> Signature  Expiration Date <b>07 / 31 / 24</b>																		
Property owners (or owners agent) certification that test was performed: Print Name <b>Kipp School</b> Title <b>Nick</b> Signature  Telephone _____																		

**PART B**

Certification that installation is in accordance with the approved plans.

(To be completed by the design engineer or architect or water supplier.)

I hereby certify that this installation is in accordance with the approved plans.

Name	Title	Date	NYS DOH Log #
License Number	Phone ( )	m d y	
Representing	Describe minor installation changes		
Address			
City State Zip			
Signature			

NOTE: Send one completed copy to the designated health department representative and one copy to the water supplier within 30 days of the testing device.  
Notify owner and water supplier immediately if device fails test and repairs cannot immediately be made.

DOH- 1013(9/91)

# Report of Inspection/Test

Annual NFPA 25

2021-08-16

## Property

Albany Community Charter Middle School  
42 South Dove St

ALBANY NY 12202

NICK

Print Date: 2021-08-19

Conducted by: Isaac Clark

RBM-Guardian Fire Protection, INC

8 Enterprise Drive

ALBANY NY 12204

518-463-4340

danc@rbm-guardian.com



## Report of Inspection/Test General Questions

### OWNER SECTION

Is the building occupied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the occupancy classification, hazard of contents, and/or storage method remained the same since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are all fire protection systems in service?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Has the system remained in service without modification since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Was the system free of actuations of devices or alarms since the last inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

### FIRE DEPARTMENT CONNECTION

Is the FDC plainly visible and easily accessible?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are the FDC swivels and couplings not damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the FDC caps and plugs in place and undamaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is the FDC check valve free of leaks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the FDC identification sign(s) in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA		

### SPRINKLER HEADS

Are there the proper number and type of spare sprinklers with a list in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are visible sprinklers in the proper position: upright, pendent, sidewall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of corrosion and physical damage?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there proper clearance below the sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are visible sprinklers free of foreign materials including foreign paint?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Is there liquid in all visible glass bulb sprinklers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are there spare sprinklers and a sprinkler wrench?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Are all the sprinklers dated 1920 or later?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Fast response sprinklers 20 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Standard response sprinklers 50 or more years old replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Standard response sprinklers 75 or more years old replaced or successfully sample tested within last 5 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Dry-type sprinklers replaced or successfully sample tested within last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA





## 2022-2023 Calendar



July '22						
S	M	T	W	Th	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

August '22						
S	M	T	W	Th	F	S
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	6 School Days		

- 22-23 Incoming Grades Orientation
- 24 First Day K-12

- 5 Labor Day (School Closed)

September '22						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

21 School Days

October '22						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	20 School Days				

- 10 Indigenous People's Day (School Closed)
- 28 End of Quarter 1

- 11 Veteran's Day (School Closed)
- 17-18 Q1 Report Card Conferences
- 23-25 Thanksgiving (School Closed)

November '22						
S	M	T	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

18 School Days

December '22						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

12 School Days

- 19-30 Winter Break (School Closed)

- 2 New Year's Day Observed (School Closed)
- 3 All Staff PD (School Closed)
- 16 MLK Day (School Closed)
- 27 End of Quarter 2
- 24-27 NYS January Regents

January '23						
S	M	T	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

20 School Days

February '23						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

15 School Days

- 20 President's Day (School Closed)
- 21-24 February Break (School Closed)

- 2-4 NYS Math Exams (3-7)
- 1-28 Memorial Day (School Closed)

May '23						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

22 School Days

June '23						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

12 School Days

- 1 Kindergarten Application Deadline
- 4 Kindergarten Lottery
- 6 End of Quarter 3
- 7-14 Spring Break
- 19-21 NYS ELA Exams (3-8)
- 27-28 Q3 Report Card Conferences

- 9 End of Quarter 4 (ES/MS)
- 14 End of Quarter 4 (HS)
- 16 Last Day K-12
- 14-22 NYS Regents Exams
- 19 Juneteenth Observed (School Closed)

### Note Concerning Differences with TCSD:

The following are days which Troy Prep Schools will differ with Troy City School District (TCSD). As always, Troy Prep will offer transportation on the days when TCSD is off, but Troy Prep is in session. Troy Prep Schools are in session, but Troy City Schools are off: August 24-September 6, September 26, November 8, March 17, May 26