** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

8 Open to Public Inspection

OMB No. 1545-0047

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

A For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending JUN 30, 2019

В	Check if applicabl	THE SEED PUBLIC CHARTER SCHOOL OF		D Employer identific	cation number
	Addre:	WASHINGTON, D.C.			
	Name chang	Doing business as		52-20	099612
	Initial return Final return	Number and street (or P.O. box if mail is not delivered to street address) 4300 C STREET., SE	Room/suit	E Telephone number 202-24	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	1	G Gross receipts \$	14,814,503.
	Amend	washington, DC 20019		H(a) Is this a group re	eturn :
	Applic	F Name and address of principal officer: MECHA INMAN		for subordinates	
	pendir	g SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
1 7	Гах-ех	empt status: $\boxed{\mathbf{X}}$ 501(c)(3) $\boxed{}$ 501(c) () $\boxed{}$ (insert no.) $\boxed{}$ 4947(a)(1)	or 52		list. (see instructions)
		e: WWW.SEEDSCHOOLDC.ORG		H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Yea		State of legal domicile: DC
	art I	Summary			
***********	Marie Control of the	Briefly describe the organization's mission or most significant activities: THE SE	ED PUBLI	C CHARTER SCHOOL	
Se		OF WASHINGTON, DC IS A PUBLIC COLLEGE-PREPARATORY BOARDING S			
nan	2	Check this box if the organization discontinued its operations or dispos	sed of mor	e than 25% of its net ass	sets.
Veri	3	the second of th		3	10
Ĝ	4	Number of independent voting members of the governing body (Part VI, line 1b)		The second secon	10
∞ ∞	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			173
ities	6	Total number of volunteers (estimate if necessary)			40
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă	h	Net unrelated business taxable income from Form 990-T, line 38			0.
				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		788,271.	835,206.
Revenue	9	Program service revenue (Part VIII, line 2g)		16,971,060.	13,776,726.
) Vel	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		59,537.	44,415.
Ä	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		346,407.	158,156.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		18,165,275.	14,814,503.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
w	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		10,018,598.	9,323,779.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
per	. ь	Total fundraising expenses (Part IX, column (D), line 25)	663.		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,632,611.	5,640,008.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		16,651,209.	14,963,787.
	19	Revenue less expenses. Subtract line 18 from line 12		1,514,066.	-149,284.
10	4	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	Е	Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		22,447,534.	22,148,238.
ASS	21	Total liabilities (Part X, line 26)		3,434,073.	3,223,871.
Net Ass	22	Net assets or fund balances. Subtract line 21 from line 20		19,013,461.	18,924,367.
	art II	Signature Block			
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedule	s and stater	ments, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich prepare	er has any knowledge.	
Sig	n	Signature of officer		Date	,
Her	re	KEN ARNDT, MANAGING DIRECTOR			- F
		Type or print name and title	-	I Date	T DTIN
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid		WILLIAM E TURCO, CPA		6 Bo DONU self-employ	
	parer	Firm's name RSM US LLP		Firm's EIN ▶	42-0714325
Use	Only	Firm's address 9801 WASHINGTONIAN BLVD, STE 500		128 W	
		GAITHERSBURG, MD 20878		Phone no.301	
May	y the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form	990 (2018) WASHINGTON, D.C.	52-2099612	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, DC IS A PUBLIC		
	COLLEGE-PREPARATORY BOARDING SCHOOL WHOSE PRIMARY MISSION IS TO		
	PROVIDE AN OUTSTANDING INTENSIVE EDUCATIONAL PROGRAM THAT PREPARES		
	CHILDREN, BOTH ACADEMICALLY AND SOCIALLY, FOR SUCCESS IN COLLEGE.		
	Did the organization undertake any significant program services during the year which were not listed on the		
			Yes X No
	prior Form 990 or 990-EZ?		Tes Linu
	If "Yes," describe these new services on Schedule O.		
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L	」Yes ∟^_ No
	If "Yes," describe these changes on Schedule O.		
	Describe the organization's program service accomplishments for each of its three largest program services, as m		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	, the total expens	ses, and
	revenue, if any, for each program service reported.		
	(Code:) (Expenses \$13,335,131. including grants of \$) (Revenue	\$1	3,776,726. ₎
	PROVIDE OUTSTANDING INTENSIVE RESIDENTIAL EDUCATION PROGRAM THAT		
	PREPARES CHILDREN, BOTH ACADEMICALLY AND SOCIALLY, FOR SUCCESS IN		
	COLLEGE.		
4b	(Code:) (Expenses \$	\$)
4-			
4c	(Code:) (Expenses \$	- \$)
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$	1	
40	Total program continuo expanses 13 335 131	,	

Form 990 (2018) WASHINGTON, D.C. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		1
C		11c		x
Ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	10		
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			,,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			•
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		x
20-	complete Schedule G, Part III	19 20a		X
20a b		20a 20b		
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
-1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

Page 4

Form 990 (2018) WASHINGTON, D.C. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			.,
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	00		x
07	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		x
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a		х
b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes." <i>complete</i>			
	Schedule N. Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Da	Note. All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 36			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	٠, .	v	
	(gambling) winnings to prize winners?	1c	Х	

WASHINGTON, D.C. Page 5 Form 990 (2018) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 173 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **b** If "Yes," has it filed a Form 990-T for this year? *If* "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Х **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the

	sponsoring organization have excess business holdings at any time during the year?	N/A	8	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	N/A	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	N/A	9b	

10	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	 10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	 10b	

•	Section 501(c)(12) organizations. Enter:	l	1		
а	Gross income from members or shareholders N/A	11a			ı
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
^ -	On the 4047/-V4N and the stable based of the stable based of the stable based on the s	40446	,	40-	ı

12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A	12b		

~	11 Too, officer the difficult of tax exempt intercent of decreed during the year	$\overline{}$		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	[13a	
	Note. See the instructions for additional information the organization must report on Schedule O.			
L	Enter the amount of recognize the appropriation is required to maintain by the states in which the	- 1		ı

					37
С	Enter the amount of reserves on hand	13c			
	organization is licensed to issue qualified health plans	13b			
b	b Enter the amount of reserves the organization is required to maintain by the states in which the				
	Note. See the instructions for additional information the organization must report on Schedule O.				

14a	a Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		ł
	excess parachute payment(s) during the year?	15	Х

If "Yes," see instructions and file Form 4720, Schedule N.
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?
If "Yes," complete Form 4720, Schedule O.

Form **990** (2018)

16

Form 990 (2018) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 10 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 10 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe 12c Х in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶DC Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website X Upon request ___ Other *(explain in Schedule O)* Another's website

State the name, address, and telephone number of the person who possesses the organization's books and records KEN ARNDT - 202-248-7773 4300 C STREET., SE, WASHINGTON, DC 20019

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

statements available to the public during the tax year.

WASHINGTON, D.C.

Page 7

Form 990 (2018) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

C Name and Title	Check this box if neither the organization n		orga T	niza			npen	sate			
Control teach of the compensation of the com	(A)	(B)							(D)	(E)	(F)
Week (list any hours for related organizations below below line) The property of the organization (w2/1099MISC) The property of the organization (w2/1099MISC) The property of the property of the property of the organization (w2/1099MISC) The property of the	Name and Title	1		not c	heck	more	than o		•	•	1
Clist any Park Compensation Contracted organizations Contracted o										•	1
Nours for related organization below Final Relation		1	jo					Ĺ			1
C1 DESA SEALY		1 '	direct				ъ			_	
C1		1	ee or	stee			nsate			(** = * * * * * * * * * * * * * * * * *	1
C1 DESA SEALY		organizations	trust	nal tr		oyee	om pe				and related
C1 DESA SEALY		1	vidua	itutio	cer	empl	hest o	ner			organizations
X		line)	Indi	Inst	0#!	Key	High	Fori			
C HUCK O'CONNER	(1) DESA SEALY	2.00	1								
FINANCE CHAIR			Х		Х				0.	0.	0.
(3) RAJIV VINNAKOTA	(2) HUCK O'CONNER	1.00									
CO-FOUNDER	FINANCE CHAIR		Х						0.	0.	0.
(4) DAVID STEINBERG	(3) RAJIV VINNAKOTA	1.00									
DEVELOPMENT COMMITTEE CHAIR	CO-FOUNDER		Х						0.	0.	0.
S	(4) DAVID STEINBERG	1.00									
EXEC. COMMITTEE CHAIR THRU 6/7/2019	DEVELOPMENT COMMITTEE CHAIR		Х						0.	0.	0.
Column C	(5) MARINA OTTAWAY	1.00									
BOARD MEMBER	EXEC. COMMITTEE CHAIR THRU 6/7/2019		Х						0.	0.	0.
Color Colo	(6) VASCO FERNANDES	1.00									
BOARD MEMBER	BOARD MEMBER		Х						0.	0.	0.
Residence	(7) LEN ARMSTRONG	1.00									
BOARD MEMBER X 0. 0. 0. (9) JOSEPH WRIGHT 1.00 0. 0. 0. BOARD MEMBER X 0. 0. 0. (10) DENNIS CHESTNUT 1.00 0. 0. 0. PARENT TRUSTEE X 0. 0. 0. (11) TASHA POULSON 1.00 0. 0. 0. PARENT TRUSTEE X 0. 0. 0. 0. (12) MECHA INMAN 40.00 X 210,212. 0. 6,306. (13) KEN ARNDT 40.00 X 175,088. 0. 20,132. (14) QUINHON SCOTT 40.00 X 149,705. 0. 4,678. (15) STACEY PEARL 40.00 X 116,289. 0. 15,829. (16) RASHIDA HOLMAN-JONES 40.00 X 116,289. 0. 15,829.	BOARD MEMBER		х						0.	0.	0.
1.00 1.00	(8) KEN SLAUGHTER	1.00									
BOARD MEMBER	BOARD MEMBER		х						0.	0.	0.
Table Trustee	(9) JOSEPH WRIGHT	1.00									
PARENT TRUSTEE X 0. 0. 0. (11) TASHA POULSON 1.00 0. 0. 0. 0. PARENT TRUSTEE X 0. 0. 0. 0. (12) MECHA INMAN 40.00 X 210,212. 0. 6,306. (13) KEN ARNDT 40.00 X 175,088. 0. 20,132. (14) QUINHON SCOTT 40.00 X 149,705. 0. 4,678. (15) STACEY PEARL 40.00 X 116,289. 0. 15,829. (16) RASHIDA HOLMAN-JONES 40.00 X 116,289. 0. 15,829.	BOARD MEMBER		х						0.	0.	0.
TASHA POULSON	(10) DENNIS CHESTNUT	1.00									
PARENT TRUSTEE X 0. 0. 0 (12) MECHA INMAN 40.00 X 210,212. 0. 6,306 HEAD OF SCHOOL X 210,212. 0. 6,306 (13) KEN ARNDT 40.00 X 175,088. 0. 20,132 (14) QUINHON SCOTT 40.00 X 149,705. 0. 4,678 (15) STACEY PEARL 40.00 X 116,289. 0. 15,829 (16) RASHIDA HOLMAN-JONES 40.00 X 116,289. 0. 15,829	PARENT TRUSTEE		х						0.	0.	0.
(12) MECHA INMAN 40.00 HEAD OF SCHOOL X (13) KEN ARNDT 40.00 MANAGING DIRECTOR X (14) QUINHON SCOTT 40.00 PRINCIPAL X (15) STACEY PEARL 40.00 ASSISTANT HEAD OF SCHOOL X (16) RASHIDA HOLMAN-JONES 40.00	(11) TASHA POULSON	1.00									
(12) MECHA INMAN 40.00 X 210,212. 0. 6,306. (13) KEN ARNDT 40.00 X 175,088. 0. 20,132. (14) QUINHON SCOTT 40.00 X 149,705. 0. 4,678. (15) STACEY PEARL 40.00 X 116,289. 0. 15,829. (16) RASHIDA HOLMAN-JONES 40.00 X 116,289. 0. 15,829.	PARENT TRUSTEE		х						0.	0.	0.
MANAGING DIRECTOR	(12) MECHA INMAN	40.00									
MANAGING DIRECTOR X 175,088. 0. 20,132. (14) QUINHON SCOTT 40.00 X 149,705. 0. 4,678. (15) STACEY PEARL 40.00 X 116,289. 0. 15,829. (16) RASHIDA HOLMAN-JONES 40.00	HEAD OF SCHOOL				х				210,212.	0.	6,306.
(14) QUINHON SCOTT 40.00 PRINCIPAL X (15) STACEY PEARL 40.00 ASSISTANT HEAD OF SCHOOL X (16) RASHIDA HOLMAN-JONES 40.00 X 116,289. 0. 15,829.	(13) KEN ARNDT	40.00							·		·
(14) QUINHON SCOTT 40.00 PRINCIPAL X (15) STACEY PEARL 40.00 ASSISTANT HEAD OF SCHOOL X (16) RASHIDA HOLMAN-JONES 40.00 X 116,289. 0. 15,829.	MANAGING DIRECTOR		1		х				175,088.	0.	20,132,
(15) STACEY PEARL 40.00 X 116,289. 0. 15,829. (16) RASHIDA HOLMAN-JONES 40.00	(14) QUINHON SCOTT	40.00									·
(15) STACEY PEARL 40.00 ASSISTANT HEAD OF SCHOOL X 116,289. 0. 15,829. (16) RASHIDA HOLMAN-JONES 40.00 X 116,289. 0. 15,829.	PRINCIPAL		1				x		149,705.	0.	4,678.
(16) RASHIDA HOLMAN-JONES 40.00	(15) STACEY PEARL	40.00							,		,
(16) RASHIDA HOLMAN-JONES 40.00	ASSISTANT HEAD OF SCHOOL		1				x		116,289.	0.	15,829,
		40.00							, , , ,		, ,
			1				x		106,221.	0.	11,261
	_								,		, = -
			1								

Form 990 (2018) 832007 12-31-18

Form 990 (2018) WASHINGTON,	D.C.								52-20	9961:	2	Pa	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	es,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	(B) Average hours per week	box, offic	not cl unles	Pos heck i	more rson i	than on the state of the state	an	(D) Reportable compensation from	from related	Reportable Estimated compensation amount of			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	•			SC) from the organization and rela	
1b Sub-total c Total from continuation sheets to Part V	I, Section A						>	757,515. 0. 757,515.		0. 0.			206. 0. 206.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but recompensation from the organization 							o re	· · · · · · · · · · · · · · · · · · ·	000 of reportable				5
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s	•			•	•	•		•			3	Yes	No X
 For any individual listed on line 1a, is the stand related organizations greater than \$15 Did any person listed on line 1a receive or 	um of reportabl 0,000? <i>If</i> "Yes,	e co " <i>co</i>	mpe mple	ensa ete S	tion Sche	and and	oth	ner compensation from the compensation from	ne organization		4	Х	
rendered to the organization? If "Yes." con Section B. Independent Contractors											5		Х
Complete this table for your five highest co the organization. Report compensation for										ensat	ion fro	om	
(A) Name and business	address							(B) Description of s	ervices	С	(C ompe) nsatio	n
MERIWETHER GODSEY 4944 OLD BOOSBORO ROAD, LYNCHBURG, V A & D SECURITY	A 24503						E	FOOD SERVICES (CAF	ETERIA)			893,	221.

(A) Name and business address	(B)	(C)
	Description of services	Compensation
MERIWETHER GODSEY		
4944 OLD BOOSBORO ROAD, LYNCHBURG, VA 24503	FOOD SERVICES (CAFETERIA)	893,221.
A & D SECURITY		
10705 ALYSSA LANE, WALDORF, MD 20603	SECURITY SERVICES	364,698.
BOLONA CAPITAL ENTERPRISE INC, 4645 NANNIE		
HELEN BURR, #206, WASHINGTON, DC 20019	CUSTODIAL	277,949.
VENABLE LLP, 600 MASSACHUSETTS AVENUE, NW,		
WASHINGTON, DC 20001	LEGAL SERVICES	209,345.
ALIGN STAFFING		
111 K ST NE, WASHINGTON, DC 20002	TEMPORARY STAFFING (TEACHERS)	204,966.
2 Total number of independent contractors (including but not limited to	o those listed above) who received more than	
\$100,000 of compensation from the organization	5	
· · · · · · · · · · · · · · · · · · ·		200

Page 9

WASHINGTON, D.C.

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (**D**) Revenue excluded from tax under (B) (C) Unrelated Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d 589,215. e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 245,991 g Noncash contributions included in lines 1a-1f: \$ 835,206. h Total. Add lines 1a-1f **Business Code** 2 a PUPIL ALLOCATIONS 900099 13,776,726 13,776,726. Program Service Revenue f All other program service revenue 13,776,726. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 44,415. 44,415 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) **d** Net rental income or (loss) \triangleright (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses c Net income or (loss) from gaming activities \triangleright 10 a Gross sales of inventory, less returns 845. and allowances 0. **b** Less: cost of goods sold 845. 845. c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a MEDICAID REIMBURSEMENT 900099 122,253 122,253 b OTHER INCOME 35,058 900099 35,058. С d All other revenue e Total. Add lines 11a-11d 157,311, 13,776,726. 202,571. 14,814,503. Total revenue. See instructions 12

Page 10

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

00011	on 501(c)(3) and 501(c)(4) organizations must completed to the complete on the				
Do I	not include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	lotal expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	413,733.	379,321.	31,052.	3,360.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	7,203,567.	6,601,837.	543,084.	58,646.
8	Pension plan accruals and contributions (include	1.05 011	150 343	11 580	1 000
_	section 401(k) and 403(b) employer contributions)	165,211.	152,343.	11,578.	1,290.
9	Other employee benefits	939,876. 601,392.	866,671. 554,551.	65,864.	7,341. 4,697.
10	Payroll taxes	001,392.	554,551.	42,144.	4,097.
11	Fees for services (non-employees):	446,084.		446,084.	
_	Management	58,740.		58,740.	
b		112,336.		112,336.	
	Accounting	112,550.		112,550.	
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	1,134,179.	1,083,908.	45,197.	5,074.
12	Advertising and promotion	, ,	, ,	,	•
13	Office expenses	263,392.	245,376.	16,198.	1,818.
14	Information technology				· · · · · · · · · · · · · · · · · · ·
15	Royalties				
16	Occupancy	656,427.	603,340.	47,728.	5,359.
17	Travel	43,801.	43,801.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	113,582.	113,582.		
20	Interest	137,712.	126,576.	10,012.	1,124.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,085,082.	997,341.	78,885.	8,856.
23	Insurance	153,204.	153,204.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	STUDENT MEALS	915,842.	915,842.		
b	OTHER EXPENSES	258,359.	236,170.	20,091.	2,098.
С	CHARTER SCHOOL FEE	145,646.	145,646.		
d	DIRECT STUDENT EXPENSES	115,622.	115,622.		
	All other expenses	14 060 505	12 225 424	1 500 000	00.555
25	Total functional expenses. Add lines 1 through 24e	14,963,787.	13,335,131.	1,528,993.	99,663.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				5 000 (2242)

WASHINGTON, D.C.

Form 990 (2018) Part X Balance Sheet

Pal	τχ	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			3,462,444.	1	3,697,143.
	2	Savings and temporary cash investments			1,570,621.	2	1,578,735.
	3	Pledges and grants receivable, net		428,786.	3	310,042.	
	4	Accounts receivable, net		132,593.	4	186,108.	
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
10		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			136,534.	9	201,913.
		Land, buildings, and equipment: cost or other			,		,
		basis. Complete Part VI of Schedule D	10a	32,106,432.			
	h	Less: accumulated depreciation		17,041,822.	15,703,362.	10c	15,064,610.
	11	Investments - publicly traded securities			1,013,194.	11	1,109,687.
	12	Investments - other securities. See Part IV, line 1			12	=,===,===	
	13	Investments - program-related. See Part IV, line			13		
	14				14		
	15	Intangible assets Other assets See Part IV line 11			15		
	16	Other assets. See Part IV, line 11	22,447,534.	16	22,148,238.		
	17	Total assets. Add lines 1 through 15 (must equ		596,556.	17	682,753.	
	18	Accounts payable and accrued expenses	330,330.	18	002,755.		
	19	Grants payable				19	
	20	Deferred revenue				20	
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete		4 O - I I - I - D			
						21	
ies	22	Loans and other payables to current and former key employees, highest compensated employee					
ij						-00	
Liabilities	00	Complete Part II of Schedule L		at an authoria	2,825,000.	22	2,525,000.
_	23	Secured mortgages and notes payable to unrela			2,023,000.	23	2,323,000.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines			12,517.	0.5	16,118.
	00	Schedule D			3,434,073.	25	
	26			k here X and	3,434,073.	26	3,223,871.
		Organizations that follow SFAS 117 (ASC 958		k here X and			
ses	07	complete lines 27 through 29, and lines 33 an			18,012,879.	07	17 963 441
anc	27	Unrestricted net assets			900,582.	27	17,963,441. 860,926.
Bal	28			·····	· · · · · · · · · · · · · · · · · · ·	28	
5	29				100,000.	29	100,000.
교		Organizations that do not follow SFAS 117 (A	SC 958), check here			
ō		and complete lines 30 through 34.					
šets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			10 012 461	32	10 004 267
~	33	Total net assets or fund balances			19,013,461.	33	18,924,367.
	34	Total liabilities and net assets/fund balances .			22,447,534.	34	22,148,238.

Form **990** (2018)

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	14	814,	503.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	14	963,	787.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-	149,	284.		
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4						
5	5 Net unrealized gains (losses) on investments 5						
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	18	924,	367.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	Separate basis Consolidated basis X Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	dule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit					
	Act and OMB Circular A-133?		3a		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			1		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				

3b Form 990 (2018)

Page **12**

Form 990 (2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

THE SEED PUBLIC CHARTER SCHOOL OF

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

WASHINGTON 52-2099612 DС Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). Х A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations

Schedule A (Form 990 or 990-EZ) 2018 WASHINGTON, D.C.

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
_	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	etion B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	, ,	. ,	, ,	` '		
8	Gross income from interest,						
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
Ū	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	oto (soo instructio	l nc)			12	I
	First five years. If the Form 990 is for	•		d fourth or fifth to			
13	organization, check this box and stop	~			•		ightharpoonup
Sec	ction C. Computation of Publi						
14	Public support percentage for 2018 (li	ne 6, column (f) di	vided by line 11, o	column (f))		14	%
						15	%
	33 1/3% support test - 2018. If the c					ore, check this box	x and
	stop here. The organization qualifies						
b	33 1/3% support test - 2017. If the c		-				
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test	•					
	and if the organization meets the "fac-	-					
	meets the "facts-and-circumstances"		•	•	•	ŭ	. \square
h	10% -facts-and-circumstances test	-	•		-		
	more, and if the organization meets th	-					
	organization meets the "facts-and-circ						.
12	Private foundation. If the organization		· ·	•	,		
10	i ilvate louiluation. Il the organizatio	i dia noi Uneuk a	DON OIT III IE 10, 10	a, 100, 17a, 01 171	o, oneon inio bux a	ina see mistractions	·

Schedule A (Form 990 or 990-EZ) 2018 WASHINGTON, D.C.

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

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

Se	ction A. Public Support	now, please comp	blete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	: Add lines 7a and 7b						
8 Se	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiza	ation,
_	check this box and stop here						>
	ction C. Computation of Publi					T T	
	Public support percentage for 2018 (li					15	<u>%</u>
	Public support percentage from 2017					16	%
	ction D. Computation of Inves			10 1 (0)		14-1	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2					18	7 is not
198	33 1/3% support tests - 2018. If the						/ IS HOL
k	more than 33 1/3%, check this box are 33 1/3% support tests - 2017. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in	structions	▶∐

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
20		
3a		
3b		
3c		
30		
4a		
4b		
4c		
-10		
5a		
- Gu		
5b		
5c		
6		
7		
8		
0		
9a		
9b		
30		
9с		
10a		
10b		

Schedule A (Form 990 or 990-EZ) 2018 WASHINGTON, D.C.

Pa	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b	<u> </u>	
<u>c</u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	_		
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sac	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
360	tion 6. Type it Supporting Organizations		Vaa	- No
4	Ware a majority of the examination's directors or trustees during the tay year also a majority of the directors		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	<u> </u>		
	71 11 5 5		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions))-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
L	that these activities constituted substantially all of its activities.	2a		
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	• •			
		2h		
2	•	20		
a		3a		
h		Ju		
		3b		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	2b 3a 3b		

Schedule A (Form 990 or 990-EZ) 2018 WASHINGTON, D.C.

Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must of	omplete Sec	tions A through E.	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions).

Schedule A (Form 990 or 990-EZ) 2018 WASHINGTON, D.C.

Part V Type III Non-Functionally Integrated F

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		
2	Amounts paid to perform activity that directly furthers exempt	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	3		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which th	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
i_	Carryover from 2013 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
7	Part VI. See instructions. Excess distributions carryover to 2019. Add lines 3			
7	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

THE SEED PUBLIC CHARTER SCHOOL OF

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

WASHINGTON, D.C.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

2010

52-2099612

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

► Attach to Form 990, Form 990-E2, or Form 990-FF.

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

2018

Employer identification number

OMB No. 1545-0047

Organizat	i on type (check or	ie):
Filers of:		Section:
Form 990	or 990-EZ	X 501(c)(3) (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 990-	PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General R	lule	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special R	ules	
s	ections 509(a)(1) a ny one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from , during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
y	ear, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the y to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
y is p	ear, contributions s checked, enter he ourpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., uplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
but it mus	t answer "No" on I	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to e filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE SEED PUBLIC CHARTER SCHOOL OF
WASHINGTON, D.C.

Employer identification number
52-2099612

Parti	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, D.C.

52-2099612

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - - - - -				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - \$				

Name of or	•			Employer identification number
WASHINGT	PUBLIC CHARTER SCHOOL OF			52-2099612
Part III) through (e) and the following line charitable, etc., contributions of \$1,00	ne entry. For organiza	(8), or (10) that total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer o	of gift	
_	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of	of gift	
	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer o	of gift	
	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer o	of gift	
	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, D.C.

Employer identification number 52-2099612

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	·			
	·	(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds			
	are the organization's property, subject to the organization's	_				
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor of					
Pai						
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).				
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	storically important land area			
	Protection of natural habitat	Preservation of a ce	rtified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c			
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struct	ure			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organization during the tax			
	year ▶					
4	Number of states where property subject to conservation eas	sement is located >				
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements it	holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	servation easements during the year			
						
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	ation easements during the year			
	▶ \$					
8	Does each conservation easement reported on line 2(d) above					
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservation	·				
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes	the organization's accounting for			
Da	conservation easements. † III Organizations Maintaining Collections of	i Art Historical Tracquires or O	than Cimilan Assata			
Pal		·	ther Similar Assets.			
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under SFAS 116 (AS					
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that describ					
b	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, ec	ducation, or research in furtherance of pu	iblic service, provide the following amounts			
	relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
_						
2	If the organization received or held works of art, historical trea		ai gain, provide			
	the following amounts required to be reported under SFAS 1		> 2			
a	Revenue included on Form 990, Part VIII, line 1					
b	Assets included in Form 990, Part X					

Sche	dule D (Form 990) 2018 WASHINGTON,					52-209			ıge 2
Par	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, or Oth	er Similaı	Assets	(continu	ued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that are a	significant u	se of its c	ollection i	tems	
	(check all that apply):								
а	Public exhibition	d	Loan or exc	hange programs					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explair	n how they further th	e organization's exe	empt purpos	se in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations o	of art, historical treas	sures, or other simila	ar assets				
	to be sold to raise funds rather than to be ma	intained as part of th	ne organization's col	lection?			Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the organizatio	n answered "Yes" o	n Form 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for contributions	or other assets no	t included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a								
							Amount		
С	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year								
f	Ending balance				1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or cu	stodial account liab	ility?	\square	Yes		No
	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete in	f the organization an	swered "Yes" on Fo	rm 990, Part IV, line			_		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four		
1a	Beginning of year balance	100,000.	100,000.	100,000.	. 1	00,000.	:	100,0	00.
b	Contributions		4,000.						
С	Net investment earnings, gains, and losses	750.	254.	198.		152.		1	114.
d	Grants or scholarships	1,750.	3,254.	198.		152.		1	114.
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance	99,000.	101,000.	100,000.	. 1	00,000.	:	100,0)00.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment 100.00	%							
С	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c shou	uld equal 100%.							
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that are held ar	d administered for	the organiza	ation	_		
	by:							Yes	No
	(i) unrelated organizations						3a(i)		Х
	(ii) related organizations						3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part >	(, line 10.				
	Description of property	(a) Cost or o	` '	' '	Accumulate	ed	(d) Book	value	,
		basis (investn	nent) basis	(other) d	epreciation				
1a	Land								
	Buildings		25	,696,507.	11,542,	209.	14,	154,2	298.
С	Leasehold improvements								
d	Equipment			,093,148.	1,954,			138,6	
	Other	•	L .	,316,777.	3,545,	098.		771,6	
Total	Add lines 1a through 1e (Column (d) must on	aual Form 000 Dort	V column (B) line 1	٦٥ ١			15	064.6	. 10د

52-2099612

WASHINGTON, D.C.

Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	uation: Cost or end-	of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
<u>(F)</u>				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.				
	on Form 000 Dort IV I	no 110 Coo Form 000 Do	out V line 10	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value			of-year market value
	(b) Book value	(b) Method of var	dation: Goot or ond	or your market value
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part IV, li	ne 11d. See Form 990, Pa	art X, line 15.	
(a)	Description			(b) Book value
<u>(1)</u>				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		>	
Complete if the organization answered "Yes"	on Form 990, Part IV, II		990, Part X, line 25.	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes		16 110		
(2) DUE TO THE SEED FOUNDATION, INC.		16,118.		
(3)		-		
(4)		-		
(5)		-		
<u>(6)</u>				
(7)				
(8)				
(9)	25)	16 118.		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

52-2099612

Par	t XI Reconciliation of Revenue per Audited Financial St	tatements With Rev	venue per Ret	urn.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	14,874,693.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains (losses) on investments	2a	60,190.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	60,190.
3	Subtract line 2e from line 1			3	14,814,503.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	12.)		5	14,814,503.
Par	T XII Reconciliation of Expenses per Audited Financial S		penses per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.			
1	Total expenses and losses per audited financial statements			1	14,963,787.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	اما			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	14,963,787.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line	: 18.)		5	14,963,787.
Par	t XIII Supplemental Information.				
lines	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	· ·		Part X, II	ne 2; Part XI,
	'V, LINE 4: (ANENTLY RESTRICTED NET ASSETS ARE RESTRICTED TO INVESTM	TIME THE			
PERM	ANENTLY RESTRICTED NET ASSETS ARE RESTRICTED TO INVESTM	ENT IN			
PERP	ETUITY. INVESTMENT INCOME IS RESTRICTED FOR OTTAWAY SC	HOLARSHIP.			
PART	X, LINE 2:				
THE	SCHOOL IS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C	(3) OF THE			
INTE	RNAL REVENUE CODE (IRC) AND IS NOT CONSIDERED TO BE A P	RIVATE			
FOUN	DATION. UNDER SECTION 501(C)(3) OF THE IRC, THE SCHOOL	IS EXEMPT FROM			
FEDE	RAL TAXES ON INCOME OTHER THAN UNRELATED BUSINESS INCOM	E. THE SCHOOL			
DID	NOT HAVE ANY NET UNRELATED BUSINESS INCOME FOR THE YEAR	S ENDED JUNE			
30,	2019 AND 2018.				

Schedule D (Form 990) 2018 WASHINGTON, D.C.	52-2099612	Page 5
Schedule D (Form 990) 2018 WASHINGTON, D.C. Part XIII Supplemental Information (continued)		
THE SCHOOL FOLLOWS THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY		
IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS		
CLAIMED OR EXPECTED TO BE CLAIMED SHOULD BE RECORDED IN THE FINANCIAL		
STATEMENTS. UNDER THIS GUIDANCE, THE SCHOOL MAY RECOGNIZE THE TAX BENEFIT		
FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE		
TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES,		
BASED UPON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS		
RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED		
BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF		
BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR		
UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION,		
INTEREST AND PENALTIES ON INCOME TAXES AND ACCOUNTING IN INTERIM PERIODS.		
MANAGEMENT EVALUATED THE SCHOOL'S TAX POSITIONS AND CONCLUDED THAT THE		
SCHOOL HAS TAKEN NO UNCERTAIN POSITIONS THAT REQUIRE ADJUSTMENTS TO THE		
FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE.		

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

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

► Attach to Form 990 or Form 990-EZ.

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

THE SEED PUBLIC CHARTER SCHOOL OF

WASHINGTON, D.C.

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

52-2099612

Part I

YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, X other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, 2 X catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II 3 Х THE SCHOOL SHALL ADMIT STUDENTS OF ANY RACE, COLOR, NATIONAL AND ETHNIC ORIGIN. IT WILL NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL AND ETHNIC ORIGIN IN ADMINISTRATION OF ITS EDUCATIONAL POLICIES, ADMISSIONS, OR ATHLETIC AND OTHER SCHOOL-ADMINISTERED PROGRAMS. Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Х 4b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Х d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Х If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Х a Students' rights or privileges? 5a Х Admissions policies? 5b Х Employment of faculty or administrative staff? 5c Scholarships or other financial assistance? Х Educational policies? 5e х Х g Athletic programs? 5g Х Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 6a Does the organization receive any financial aid or assistance from a governmental agency? Х 6a **b** Has the organization's right to such aid ever been revoked or suspended? Х 6b If you answered "Yes" on either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

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

Schedule E (Form 990 or 990-EZ) 2018

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Department of the Treasury

THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, D.C.

Employer identification number 52-2099612

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

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficition	(6)(1)-(0)	reported as deferred on prior Form 990
(1) MECHA INMAN	(i)	210,212.	0.	0.	6,306.	0.	216,518.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KEN ARNDT	(i)	175,088.	0.	0.	5,370.	14,762.	195,220.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) QUINHON SCOTT	(i)	149,705.	0.	0.	4,493.	185.	154,383.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

WASHINGTON, D.C.

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

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Inspection

Name of the organization

THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, D.C.

Employer identification number 52-2099612

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: WHOSE PRIMARY MISSION IS TO PROVIDE AN OUTSTANDING INTENSIVE EDUCATIONAL PROGRAM THAT PREPARES CHILDREN. BOTH ACADEMICALLY AND SOCIALLY, FOR SUCCESS IN COLLEGE. FORM 990, PART VI, SECTION B, LINE 11B: PRIOR TO THE FILING OF THE FORM 990 THE CHAIRMAN OF THE FINANCE COMMITTEE ALONG WITH MEMBERS OF THE FINANCE COMMITTEE WILL REVIEW THE TAX RETURN VIA ELECTRONIC FORM OR PAPER COPY. SENIOR MANAGEMENT WILL WAIT ON THE RESPONSE OF THE CHAIRMAN OF THE FINANCE COMMITTEE ONCE THE REVIEW IS COMPLETED. COPY OF THE FORM 990 WILL BE PROVIDED TO THE COMPLETE ENTIRE VOTING BOARD OF DIRECTORS PRIOR TO THE FILING WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF TRUSTEES OF THE SEED SCHOOL OF WASHINGTON, D.C. ("SCHOOL") HAVE ADOPTED THE FOLLOWING POLICY TO ASSURE THAT ALL DELIBERATIONS AND ACTIONS OF THE BOARDS AND OFFICERS ARE UNDERTAKEN IN A MANNER THAT IS FREE OF CONFLICTS OF INTERESTS AND THE APPEARANCE OF CONFLICTS OF INTEREST SO THAT TRUSTEES AND OFFICERS CAN ACT IN A MANNER THAT IS IN THE BEST INTERESTS OF THE SCHOOL, THE SCHOOL'S PARENT AND/OR ANY SEED SPONSORED THIS POLICY IS INTENDED TO SUPPLEMENT BUT NOT REPLACE ANY STATE LAWS APPLICABLE TO NONPROFIT CORPORATIONS. THE POLICY SET FORTH IN THIS STATEMENT IS APPLICABLE TO ALL MEMBERS OF THE SCHOOL BOARD, COMMITTEES WITH BOARD-DELEGATED POWERS. AND ALL OFFICERS OF THE SCHOOL DURING THE PERIOD THAT THEY SERVE IN SUCH CAPACITY AND FOR A PERIOD OF ONE YEAR THEREAFTER ("COVERED PERSONS"). EACH COVERED PERSON HAS A DUTY TO

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, D.C.	Employer identification number 52-2099612
PLACE THE INTERESTS OF THE SCHOOL, SCHOOL'S PARENT OR ANY SEED SPONSORED	
ENTITY FOREMOST IN ANY DELIBERATIONS, DECISIONS OR TRANSACTIONS INVOLVING	
THE SCHOOL. IF A COVERED PERSON, OR HIS OR HER FAMILY, HAS A CONFLICT OF	
INTEREST OR A POTENTIAL CONFLICT OF INTEREST WITH RESPECT TO A PARTICULAR	
TRANSACTION OR ON AN ONGOING BASIS, THE COVERED PERSON HAS A DUTY TO	
DISCLOSE THE CONFLICT OR POTENTIAL CONFLICT OF INTEREST.	
A COVERED PERSON BELIEVES THAT HE OR SHE MAY HAVE A CONFLICT OF INTEREST	
WITH RESPECT TO ANY PARTICULAR TRANSACTION OR ON AN ONGOING BASIS, HE OR	
SHE SHALL PROMPTLY AND FULLY DISCLOSE THE POTENTIAL CONFLICT TO THE CHAIR	
OF THE BOARD OF TRUSTEES AND THE HEAD OF SCHOOL. THE CHAIR AND HEAD OF	
SCHOOL SHALL DETERMINE WHETHER THERE IS IN FACT A CONFLICT OR APPEARANCE OF	
A CONFLICT WITH RESPECT TO A COVERED PERSON. IN DETERMINING WHETHER THERE	
IS A CONFLICT OR APPEARANCE OF A CONFLICT, IT IS INTENDED THAT THE CHAIR	
AND HEAD OF SCHOOL WILL EXERCISE THEIR BEST JUDGMENT AND, IN CASE OF DOUBT,	
WILL ERR ON THE SIDE OF PROTECTING THE SCHOOL FROM ANY CONFLICT OR	
APPEARANCE OF CONFLICT.	
EACH COVERED PERSON SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH	
PERSON:	
1.HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY;	
2.HAS READ AND UNDERSTANDS THE POLICY;	
3.HAS AGREED TO COMPLY WITH THE POLICY; AND	
4. UNDERSTANDS THAT THE SCHOOL IS A CHARITABLE ORGANIZATIONS AND THAT IN	
ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN	
ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.	

Name of the organization THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, D.C.	Employer identification number 52-2099612
THE HEAD OF SCHOOL WAS HIRED FOLLOWING A SIX MONTH SEARCH LED BY AN	
EXECUTIVE RECRUITING FIRM. HIRING DECISION AND COMPENSATION DECISIONS WERE	
MADE BY A SPECIAL COMMITTEE OF THE BOARD OF TRUSTEES THAT WAS SUPPORTED BY	
THE CHIEF OPERATING OFFICER OF THE SEED FOUNDATION (RELATED ENTITY) AND THE	
EXECUTIVE RECRUITING FIRM. INITIAL SALARY LEVEL FOR THE POSITION WAS	
DETERMINED BASED ON THE SALARIES OF PRIOR HEADS OF SCHOOL AS WELL AS BASED	
ON THE CANDIDATE EXPERIENCE. OTHER COMPENSATION WAS CONSISTENT WITH	
EXISTING SCHOOL BENEFITS PACKAGES.	
THE MANAGING DIRECTOR WAS HIRED FOLLOWING AN EXTENSIVE RECRUITING AND	
SEARCH PROCESS. THE PROCESS OF CREATING THE POSITION, DETERMINING SALARY,	
INTERVIEWING AND HIRING INVOLVED A BROAD GROUP OF EXECUTIVE AND BOARD-LEVEL	
LEADERSHIP INCLUDING THE CHAIRMAN OF THE SCHOOL BOARD OF TRUSTEES, THE	
CHIEF OPERATING OFFICER OF THE SEED FOUNDATION, OTHER MEMBERS OF THE BOARD	
OF TRUSTEES, AND THE HEAD OF SCHOOL. SALARY LEVEL FOR THE POSITION WAS	
DETERMINED BASED ON MARKET RATES FOR COMPARABLE POSITIONS, SCHOOL BUDGET,	
POSITION RESPONSIBILITY AND CANDIDATE EXPERIENCE. OTHER COMPENSATION WAS	
CONSISTENT WITH EXISTING SCHOOL BENEFITS PACKAGES.	
THE DEPOSITOR OF RENAMED WAS MEDDED FOULDWING AN EXEMPLICATION OF A	
THE DIRECTOR OF FINANCE WAS HIRED FOLLOWING AN EXTENSIVE SEARCH BY A	
RECRUITING FIRM. THE SALARY WAS DETERMINED BY THE MANAGING DIRECTOR AND	
HEAD OF SCHOOL BASED ON THE MARKET RATES FOR COMPARABLE POSITIONS, SCHOOL	
BUDGET, POSITION RESPONSIBILITY AND CANDIDATE EXPERIENCE. OTHER	
COMPENSATION WAS CONSISTENT WITH EXISTING SCHOOL BENEFITS PACKAGES.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE SCHOOL MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND	
FINANCIAL STATEMENTS AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF	

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization THE SEED PUBLIC CHARTER SCHOOL OF	Employer identification number
WASHINGTON, D.C.	52-2099612
DISCLOSURE AS SET FORTH IN SECTION 6104(D).	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

THE SEED PUBLIC CHARTER SCHOOL OF WASHINGTON, D.C.

Employer identification number 52-2099612

Part I Identification of Disregarded Entities. Complete	Part I Identification of Disregarded Entities. Complete if the organization answered Tes of Form 990, Part IV, line 55.												
(a)	(b)	(c)	(d)	(e)	(f)								
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity								

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr ent	olled
				501(c)(3))		Yes	No
THE SEED FOUNDATION, INC 54-1850819							
1776 MASSACHUSETTS AVENUE, NW, SUITE 600	DEVELOP INNOVATIVE						
WASHINGTON, DC 20036	EDUCATIONAL OPPORTUNITIES	DISTRICT OF COLUMBIA	501(C)(3)	LINE 7	N/A		Х
THE SEED SCHOOL OF MARYLAND - 06-1818759							
200 FONT HILL AVENUE					THE SEED		
BALTIMORE, MD 21223-2703	BOARDING SCHOOL	MARYLAND	501(C)(3)	LINE 2	FOUNDATION, INC.		Х

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

		0 11 10 1	"' " - 000	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
n	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990	. Part IV. line 34. because it r	had one or more related
	organizations treated as a partnership during the tax year.	··· -·· · · · · · · · · · · · · · ·		,,,	
	organizations treated as a partnership during the tax year.				

		I		I			Т			1	_
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	General	Percentage
of related organization		(state or	entity	(related, unrelated,	income		allocations?		amount in box	managin partner	Percentage ownership
		foreign country)		(related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	20 of Schedule K-1 (Form 1065)	Voc N	7
		oodiid y)		000110110 0 12 0 1 1 1			163	140	111 (10111111000)	16314	1
-											
											<u> </u>
	1										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?	
		country)		,				Yes	No	
-										
-	-									
-										
	-									

Schedule R (Form 990) 2018

Page 3

Х

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

b Gift, grant, or capital contribution to related organization(s)					1b		Х		
c Gift, grant, or capital contribution from related organization(s)					1c		Х		
d Loans or loan guarantees to or for related organization(s)					1d		Х		
e Loans or loan guarantees by related organization(s)					1e	Х			
f Dividends from related organization(s)					1f		Х		
g Sale of assets to related organization(s)					1g		Х		
h Purchase of assets from related organization(s)					1h		х		
i Exchange of assets with related organization(s)					1i		х		
j Lease of facilities, equipment, or other assets to related organization(s	;)				1j		Х		
k Lease of facilities, equipment, or other assets from related organization	n(s)				1k		х		
Performance of services or membership or fundraising solicitations for related organization(s)									
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o Sharing of paid employees with related organization(s)									
p Reimbursement paid to related organization(s) for expenses									
q Reimbursement paid by related organization(s) for expenses					1q	Х			
r Other transfer of cash or property to related organization(s)					1r		Х		
s Other transfer of cash or property from related organization(s)					1s		X		
2 If the answer to any of the above is "Yes," see the instructions for info	rmation on who must o	complete th	is line, including covered	relationships and transaction thresholds.					
(a) Name of related organization	Trans	(b) saction e (a-s)	(c) Amount involved	(d) Method of determining amount inv	volved				
1)									
2)									
3)									
4)									
† J									
=1									
5)									
6)									
32163 10-02-18				Schedule	R (Forr	n 990) 2018		

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(h)		(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile		Are all partners sec		Share of	Dispro	oor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	(related, unrelated,	partners sec 501(c)(3) orgs.?	total	end-of-year	allocatio	te ons?	amount in box 20	managi	ownership
•		country)	sections 512-514)	Yes No		assets	Yes	No	(Form 1065)	Yes N	
			000000000000000000000000000000000000000	162 140			1165	10	(1 01111 1000)	Tesin	`
	+										
	4										
	1										
	1										
	†										
				 			++	\dashv		\vdash	+
	4										
	4										
	1										
	1										
	1										
	†										
							+			\vdash	+
	4										
]										
	1										
	1										
	1										
							++	\dashv		\vdash	+
	4										
	1										
]										
	1										
	1										
	4										

THE SEED PUBLIC CHARTER SCHOOL OF

Schedule F	R (Form 990) 2018	WASHINGTON	, D.C.	52-2099612	Page 5
Part VII	R (Form 990) 2018 Supplemental Info	ormation.			
	Provide additional infor	mation for respons	ses to questions on Schedule R. See instructions.		

Form	990- I		exempt Orga	ax Return		OMB N	lo. 1545-0687						
		l	•	nd proxy tax und			20 2010		2	018			
		For cal	endar year 2018 or other tax yea			, and ending JUN		— ·	_	U IO			
Depar Interna	tment of the Treasury al Revenue Service	>	→ Go to www Do not enter SSN numbe	.irs.gov/Form990T for in rs on this form as it may					501(c)(3) C	ublic Inspection for Organizations Only			
A	Check box if address changed		Name of organization (and see instructions.)		(Emp	loyer identi oloyees' tru uctions.)	fication number st, see			
—— В F	xempt under section	Print	WASHINGTON, D.C.						52-209	99612			
X	501(c)(3)	or	Number, street, and roon	n or suite no. If a P.O. hox	c see in	structions				ess activity code			
	408(e) 220(e)	Туре	4300 C STREET.,		.,			(See	instructions	3.)			
	408A 530(a)		City or town, state or pro	vince, country, and ZIP or	r foreigi	n postal code		1					
	529(a)		WASHINGTON, DC										
C Bo	ok value of all assets end of year		F Group exemption num		>								
			G Check organization typ		oration		401(a)			Other trust			
		-	tion's unrelated trades or t	ousinesses.			the only (or first) un						
	trade or business here If only one, complete Parts I-V. If more than one,												
			ce at the end of the previo	us sentence, complete Pa	rts I an	d II, complete a Schedule	M for each addition	al trade	e or				
	siness, then complete			CCC-1-1		d'annual annual	▶ [¬			
			oration a subsidiary in an a fifying number of the parer		it-subsi	diary controlled group?	▶ [Ye	es	No			
	e books are in care of			ii corporation.		Talanh	one number \triangleright 2	02-24	18-7773	3			
			le or Business Inc	ome		(A) Income	(B) Expenses		10 7775	(C) Net			
	Gross receipts or sale					(/1)	(B) Expenses			(0) 1101			
	Less returns and allow			c Balance	1c								
2			A, line 7)		2								
3			om line 1c		3								
4 a			h Schedule D)		4a								
			art II, line 17) (attach Forn		4b								
С			its		4c								
5			hip or an S corporation (a		5								
6	Rent income (Schedu	ıle C)			6								
7	Unrelated debt-finance	ed incon	ne (Schedule E)		7								
8			nd rents from a controlled		8								
9			n 501(c)(7), (9), or (17) o		9								
10			me (Schedule I)		10								
11			J)		11								
12			s; attach schedule)		12								
13	Total. Combine lines		g · · · · — · · · · · · · · · · · · · ·		13	0.							
Pa			ot Taken Elsewher utions, deductions must				income)						
14								14					
14 15			rectors, and trustees (Sche					14					
16								16					
17								17					
18	Interest (attach sche	dule) (se	ee instructions)					18					
19								19					
20	Charitable contribution	ons (See	instructions for limitation	rules)				20					
21			562)										
22			Schedule A and elsewher					22b					
23								23					
24	Depletion 2: Contributions to deferred compensation plans 2:												
25	Employee benefit programs												
26	Excess exempt expenses (Schedule I)												
27	7 Excess readership costs (Schedule J) 27												
28	Other deductions (attach schedule)												
29	Total deductions. A	ions. Add lines 14 through 28											
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13									0.			
31	-	_	oss arising in tax years be		-	. ,		31					
32	Unrelated business to	axable ir	ncome. Subtract line 31 fro	m line 30				32		0.			

THE SEED PUBLIC CHARTER SCHOOL OF 52-2099612 Form 990-T (2018) WASHINGTON D.C. **Total Unrelated Business Taxable Income** Part III Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 33 33 34 Amounts paid for disallowed fringes 34 35 Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) 35 Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34 36 1,000. 37 Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) 37 Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36 Part IV Tax Computation 0. 39 Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21) Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041) 40 Proxy tax. See instructions 41 42 Alternative minimum tax (trusts only) 42 Tax on Noncompliant Facility Income. See instructions 43 0. 44 Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies Part V Tax and Payments 45a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a 45b b Other credits (see instructions) 45c c General business credit. Attach Form 3800 d Credit for prior year minimum tax (attach Form 8801 or 8827) e Total credits. Add lines 45a through 45d 0 46 Subtract line 45e from line 44 46 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) 47 0. 48 48 Total tax. Add lines 46 and 47 (see instructions) 49 2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 49 50a 50 a Payments: A 2017 overpayment credited to 2018 50b b 2018 estimated tax payments c Tax deposited with Form 8868 50d d Foreign organizations: Tax paid or withheld at source (see instructions) e Backup withholding (see instructions) f Credit for small employer health insurance premiums (attach Form 8941) 50f g Other credits, adjustments, and payments: Form 2439 ____ Other _____ Form 4136 51 Total payments. Add lines 50a through 50g 52 Estimated tax penalty (see instructions). Check if Form 2220 is attached 52 53 Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid 54 55 Enter the amount of line 54 you want: Credited to 2019 estimated tax Part VI | Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority Yes No over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year ▶\$ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true,

Cian	correct, and complete. Declaration of preparer (other	than taxpayer) is based on all information of which	ch preparer has any knowleds	ge.					
Sign Here		MANA		s this return v below (see	with				
	Signature of officer	Date			instructions)? X	Yes	No		
	Print/Type preparer's name	Preparer's signature	Date	Check	if PTIN				
Paid		1 chief	1 Porhers	self- employe					
Prepare	WILLIAM E TURCO, CPA	1 ce	6/31/2020		P003692	217			
Use Onl	F. DOW HO TID	,	1	Firm's EIN	▶ 42-07	14325			
	V	9801 WASHINGTONIAN BLVD, STE 500							
	Firm's address A CATMUEDCDIDG	CATMURE CRITIC MD 20279							

Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

due date for filing your

return. See instructions

4300 C STREET., SE

WASHINGTON, DC 20019

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or THE SEED PUBLIC CHARTER SCHOOL OF print WASHINGTON, D.C. 52-2099612 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN)

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

Enter the Return Code for the return that this application is for (file a separate application for each return) 1 0 **Application** Return **Application** Return Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 000 T (acc. 401(a) ar 409(a) truet)

Form 990-1 (sec. 401(a) or 408(a) trust)	05 Form 6069			
Form 990-T (trust other than above)	06 Form 8870			12
 KEN ARNDT The books are in the care of ► 4300 C STREET., SE - 	WASHINGTON, DC 20019			
Telephone No. ▶ 202-248-7773	Fax No. ▶			
If the organization does not have an office or place of business	s in the United States, check this bo	OX .		
• If this is for a Group Return, enter the organization's four digit				p, check this
box . If it is for part of the group, check this box	_		-	•
I request an automatic 6-month extension of time until the organization named above. The extension is for the organization named above. The extension is for the organization of time until	, and endingJUN 30 , 20	019	mpt organization	return for
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069, enter the tentative tax, le	ss		_
any nonrefundable credits. See instructions.		3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	9, enter any refundable credits and			
estimated tax payments made. Include any prior year overp	payment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your pa	ayment with this form, if required, by	<i>y</i>		
using EFTPS (Electronic Federal Tax Payment System). See	e instructions.	3c	\$	0.
Caution: If you are going to make an electronic funds withdrawal	(direct debit) with this Form 8868,	see Form 8453-EO ar	nd Form 8879-EO	for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2019)

instructions

Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number

				Enterme	er's identifying nu	mber	
Type or print	Name of exempt organization or other filer, see instruc THE SEED PUBLIC CHARTER SCHOOL OF	Employer	Employer identification number (EIN) or				
print	WASHINGTON, D.C.		52-2099612				
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions.			Social se	Social security number (SSN)		
return. See instructions.	See						
Enter the	Return Code for the return that this application is for (file	a separat	te application for each return)			0 7	
Application		Return	Application			Return	
Is For		Code	Is For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
	orm 990-BL 02 Form 1041-A			08			
	Form 4720 (individual) 03 Form 4720 (other than individual)		ual)	09			
		Form 5227	,	10			
	Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069			11			
Form 990-T (trust other than above)		06	Form 8870			12	
Teleph If the c	KEN ARNDT coks are in the care of 202-248-7773 corganization does not have an office or place of business is for a Group Return, enter the organization's four digit G If it is for part of the group, check this box	in the Uni Froup Exe	Fax No. ▶	If this is for	r the whole group,		
1 I request an automatic 6-month extension of time until MAY 15, 2020 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ □ calendar year or ▶ ☒ tax year beginning JUL 1, 2018 , and ending JUN 30, 2019 . 2 If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period							
	3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.					0.	
	estimated tax payments made. Include any prior year overpayment allowed as a credit.			3b	\$	0.	
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by							
using EFTPS (Electronic Federal Tax Payment System). See instructions.					\$	0.	

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2019)

instructions.