	-						29393	277	0 2	507	
5, № 990-Т		•	nd proxy tax und	er secti	ion 603	3(e))	Tax Retu			1B No 1545-0687	
<u>ئ</u>	Forca	lendar year 2018 or other tax yea	ar beginning JUL 1, 20	18	, and e	ending JU	JN 30, 2019	·	4	ZU 18	
Department of the Treasury Internal Revenue Service	•	► Go to www Do not enter SSN numbe	.irs.gov/Form990T for in rs on this form as it may						501(c)(to Public Inspection fo (3) Organizations Only	
A Check box if		Name of organization (Check box if name changed and see instructions.)						(Emp	D Employer identification number (Employees' trust, see		
address changed	∐	CARLOS ROSARIO INTERNATIONAL PUBLIC						ınstn	instructions)		
B Exempt under section		CHARTER SCHOOL, INC.							52-2157082 F Unrelated business activity code		
X 501(c 103)	Type	Number, street, and room or suite no. If a P.O. box, see instructions. 1100 HARVARD STREET, NW							instruct		
408(e) 220(e	7 "			r foreign n	actal anda						
408A530(a	'	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20009									
Book value of all assets		F Group exemption number (See instructions.)								· · · · · · · · · · · · · · · · · · ·	
at end of year		G Check organization typ		oration	50	01(c) trus	t 4	01(a) trust		Other trust	
H Enter the number of th	e organiza	tion's unrelated trades or t					oe the only (or firs	st) unrelated	<u> </u>		
trade or business here	▶					If only on	ie, complete Parts	I-V. If more	e than	one,	
describe the first in the	blank spa	ice at the end of the previol	us sentence, complete Pa	rts I and II	, complete	a Schedu	ile M for each add	litional trade	or or		
business, then complet	e Parts III	-V	, , , , , , , , , , , , , , , , , , ,								
		oration a subsidiary in an a		it-subsidia	ry controll	ed group?	? I	► [] Y	es	L No	
		tifying number of the paren	t corporation.					202 70		700	
J The books are in care of					Telephone number						
		de or Business Inc	ome		(A) in	come	(B) Expe	enses	┼	(C) Net	
Gross receipts or sa			a Dalaman	,							
Less returns and all		A line 7)	c Balance	1c 2	···				 		
Cross profit Subtra	Cost of goods sold (Schedule A, line 7)								\vdash		
Cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Schedule D)				3 4a					 		
	-	art II, line 17) (attach Form	 n 4797)	4b			DECEN	/FD	一		
c Capital loss deducti				4c			MEUL	<u>/ L</u> i	ΤŤ		
- 5 Income (loss) from		ship or an S corporation (a	ttach statement)	5		8			31		
6 Rent income (Scher			,	6		18	JUL 2 4	2020	21		
357 Unrelated debt-final	•	me (Schedule E)	•	7		THE STATE OF		í	21		
3 8 Interest, annuities, r	oyalties, a	nd rents from a controlled	organization (Schedule F)	8			CDEM				
2.9 Investment income	of a section	on 501(c)(7), (9), or (17) o	rganization (Schodule G)	9		<u> </u>	<u>uudlin</u>	<u>_U_</u>			
10 Exploited exempt ac	ctivity inco	me (Schedule I)		10					 		
11 Advertising income	(Schedule	: J)		11					<u> </u>		
12 Other income (See	instruction	ns; attach schedule)		12					—		
13 Total. Combine lin				13					<u> </u>		
		ot Taken Elsewher utions, deductions must									
	·			-	di ii ciato	3 0 0 0 11 10 1		14	Т		
_ •	•	rectors, and trustees (Sche	aute K)					15	 		
15 Salaries and wage16 Repairs and maint		•				•		16	 		
17 Bad debts	citatice	••	• -		•		-	17	†	•	
18 Interest (attach sol	hedule) (s	ee instructions)					• •	18	·		
19 Taxes and licenses				•	•		•	19			
	itions (Se	e instructions for limitation	rules)	•				20			
21 Depreciation (attac						21					
		n Schedule A and elsewher	e on return			22a		22b	igspace		
23 Depletion								23	Щ		
24 Contributions to de	eferred co	mpensation plans .			-			24	<u> </u>		
25 Employee benefit p				-				25	 		
26 Excess exempt exp	-						-	26	 		
27 Excess readership			•			•		27	 		
28 Other deductions (28		0	
29 Total deductions.	Add lines	14 through 28						. 29	<u> </u>	<u> </u>	

Unrelated business taxable income. Subtract line 31 from line 30 823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

31

32

30

31

	T(2018) CHARTER SCHOOL, INC. 52-2	137082	Page 2
Part I	III Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
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	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		
	· · · · · · · · · · · · · · · · · · ·	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	9 36 27	1,000.
38	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	38	0.
Part I			<u>_</u>
		▶ 39	0.
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	33	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:	40	
44	Tax rate schedule or Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Afternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	0.
44 Dort \	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies V Tax and Payments	44	
Part \			
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a	 	
b	Other credits (see instructions)	{	
C	General business credit. Attach Form 3800		
d	, , , , , , , , , , , , , , , , , , , ,		
e	·	45e	0.
46	Subtract line 45e from line 44	46 47	
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedu	48	0.
48	Total tax. Add lines 46 and 47 (see instructions)	49	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
50 a	χν	78	
	2018 estimated tax payments	 	
	Foreign organizations: Tax paid or withheld at source (see instructions)		
	Backup withholding (see instructions) 50e		
	Credit for small employer health insurance premiums (attach Form 8941) 50f		
	Other credits, adjustments, and payments: Form 2439		
9	Form 4136 Other Total 50g	1 1	
£4			
51	LOTAL DAVIMENTS. AND UNES DUZ TOTOLION DUO	<u>\$1</u>	48,002.
51 52	Total payments. Add lines 50a through 50g Estimated tax genalty (see instructions). Check if Form 2220 is attached.	51 52	48,002.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	52	48,002.
52 53	Estimated tax penalty (see instructions). Check if Form 2220 is attached Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	<u>52</u> <u>53</u>	48,002.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	<u>52</u> <u>53</u>	
52 53 54	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded	<u>52</u> <u>53</u>	48,002.
52 53 54 55	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax VI Statements Regarding Certain Activities and Other Information (see instructions)	<u>52</u> <u>53</u>	48,002.
52 53 54 55 Part \	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded	<u>52</u> <u>53</u>	48,002.
52 53 54 55 Part \	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax 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 over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	<u>52</u> <u>53</u>	48,002.
52 53 54 55 Part \	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax I 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	<u>52</u> <u>53</u>	48,002.
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52 53 54 55 Part \ 56	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax Note that It is a see instructions. At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority 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	<u>52</u> <u>53</u>	48,002. 48,002. Yes No
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52 53 54 55 Part \ 56 57 58 Sign	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax 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 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 here 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 \$\inc\$	52 53 54 555 555 owledge and belief, it is to	48,002. 48,002. Yes No
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52 53 54 55 Part \ 56 57 58 Sign	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax 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 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 here 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 penaltics of perputy, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kin corroct, and complete Declaration of prept or (other than taxpayor) is based on all information of which preparer has any knowledge. CHIEF FINANCIAL OFFICER	52 53 54 555 May the IRS discuss the preparer shown be	48,002. 48,002. Yes No
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52 53 54 55 Part \ 56 57 58 Sign Here	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax It is a support of line 54 you want: Credited to 2019 estimated tax Refunded 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 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 here 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 kn correct, and complete Doctaration of prepare (other than taxpayer) is based on all information of which prepare has any knowledge. Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Date Check Self- emplo	May the IRS discuss to the preparer shown be instructions)? X if PTIN yed P0036921	48,002. 48,002. Yes No Yes No Yes No No No No 7
52 53 54 55 Part \ 56 57 58 Sign Here	Estimated tax penalty (see instructions). Check if form 2220 is attached 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 Enter the amount of line 54 you want: Credited to 2019 estimated tax 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 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 here 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 penaltics of perjuty, I doctare that I have examined this return, including accompanying schedules and statements, and to the best of my kin corroct, and complete Declaration of prepare (other than taxpeyer) is based on all information of which prepare has any knowledge. Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Oate Title Print/Type preparer's name Preparer's signature Date Title Firm's EIN Firm's EIN	May the IRS discuss to the preparer shown be instructions)? X if PTIN yed P0036921	48,002. 48,002. Yes No Yes No Yes No No No No 7