

Form 990-T						ı [OMB No 1545-0687	
*•].	(a	nd proxy tax und	ler se	ection 6033(e))		ľ	2018
•	For ca	lendar year 2018 or other tax ye	· · · · · · · · · · · · · · · · · · ·	4 4'	, and ending	**	_	ZU 10
Department of the Treasury Internal Revenue Service	•	Do not enter SSN number	irs gov/Form990T for it rs on this form as it may					Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed	Name of organization (Check box in fiame changed and see instructions.)						(Emp	loyer identification number ployees' trust, see uctions)
B Exempt under section	Print	Print CHARTER SCHOOL INCUBATOR INITIATIVE						0-5116150
X 501(C)(3)	Number, street, and room of suite no. If a P.O. box, see instructions.							lated business activity code instructions)
408(e) 220(e)	1776 1 STREET, NW, NO. 200							
408A 530(a) 529(a)		City or town, state or pro WASHINGTON,		r foreig	n postal code			
C Book value of all assets at end of year		F Group exemption num		>				
11.5.4.4.4.4.1.4.4.4.4.4.4.4.4.4.4.4.4.4		G Check organization typ		poratio				Other trust
H Enter the number of the		ation's unrelated trades or l	ousinesses.	<u> </u>		e the only (or first) un		
trade or business here		ace at the end of the previo	us contanas, completo Di	orto Lar		e, complete Parts I-V.		•
business, then complete	-	•	us sentence, complete Pa	aris i ai	iu ii, complete a Scheut	ne wi for each addition	iai ii au	e ui
		poration a subsidiary in an	affiliated group or a pare	nt-subs	idiary controlled group?		T _Y	es X No
		tifying number of the parer			ш., сеттемен длеер	_		
J The books are in care of	▶ (ORNELLA NAPO	LITANO		Telep	hone number 🕨 2	02-	251-5210
Part I Unrelated	d Trac	de or Business Inc	ome		(A) Income	(B) Expenses	<u> </u>	(C) Net
1a Gross receipts or sale]		
b Less returns and allow			c Balance	1c		 		
2 Cost of goods sold (S		•		2				
3 Gross profit. Subtract				3 4a				<u> </u>
4a Capital gain net incom b Net gain (loss) (Form	4707 D	art II. king 17) (attach Form	147071 055	4a 4b				
c Capital loss deduction	for true	art ii, iiile 17) (allacii 10111 ete	1 CORME	4c		 		
5 Income (loss) from a	nartners	ship of an sequence (SED)	Rach statement)	5	<u> </u>	 		
6 Rent income (Schedu	HL 105							<u> </u>
7 Unrelated debt-finance		me (Schedule E)	1 2000	7		 		
		and rents from a controlled	organization (Schedule F)	8				
9 Investment income of	a section	on 501(c)(7), (9), or (17) ported (Schedule I)	(ganization (Schedule G)	9				
	,	(5555)	,- ;	<u> </u>	· -			
11 Advertising income (S		-		11				
12 Other income (See ins		•		12		ļ		
13 Total. Combine lines		-	Co. Con motor obtains for	13	0			<u> </u>
Part II Deductio		utions, deductions mus						
14 Compensation of off	icers, di	rectors, and trustees (Sche	edule K)	TATI	JTE UNIT		14	
15 Salaries and wages		•	5		EIVED		15	
16 Repairs and mainten	ance	1	ŗ	110			16	<u> </u>
17 Bad debts	ما املیام		•	MΔR	2 8 2022		17	_
18 Interest (attach sche19 Taxes and licenses	oule) (s	ee instructions)					18	
	ons (Se	e instructions for limitation	rules)	PR	BRANCH		20	
21 Depreciation (attach	•		ruics)	O	GDEN 21		<u></u> -	
		n Schedule A and elsewher	e on return		22a		22b	
23 Depletion					L		23	
24 Contributions to defe	erred co	mpensation plans					24	
25 Employee benefit pro	ograms						25	
26 Excess exempt exper							26	
27 Excess readership co							27	
28 Other deductions (at		•					28	
29 Total deductions Ad					0 fram hr = 40		29	0.
		ncome before net operating					30	J
		loss arising in tax years be ncome. Subtract line 31 fro	-	ıyı, 20	o to (see ilistructions)		31 32	0.
32 Unrelated business to			··				32	Form 990-T (2018)

Form 990-	(2018) CHARTER SCHOOL INCUBATOR INITIATIVE	20-51	16150	Page 2
Part I	II 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			
	lines 33 and 34		36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)		37	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	V Tax Computation			-
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)		39	0.
40	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	
41	Proxy tax See instructions	>	41	
42	Alternative minimum tax (trusts only)		42	
43	Tax on Noncompliant Facility Income. See instructions		43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44	0.
Part \				 -
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a			
b	Other credits (see instructions) 45b	·	7	
C	General business credit. Attach Form 3800 45c		7	
đ	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d		7	
	Total credits Add lines 45a through 45d		45e	
46	Subtract line 45e from line 44		46	0.
47	Other taxes Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (at	ach schedule)	47	
48	Total tax Add lines 46 and 47 (see instructions)		48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		49	0.
50 a	Payments: A 2017 overpayment credited to 2018 50a			-
	2018 estimated tax payments 50b		7	
C	Tax deposited with Form 8868 50c		7	
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d		7	
е	Backup withholding (see instructions) 50e		7	
	Credit for small employer health insurance premiums (attach Form 8941) 50f		7	
	Other credits, adjustments, and payments Form 2439		7	
•	☐ Form 4136	2,700		
51	Total payments. Add lines 50a through 50g SEE STATEMENT 1		51	2,700.
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	•	53	
54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	>	54	2,700.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax	nded 🕨	55	2,700.
Part \	/I Statements Regarding Certain Activities and Other Information (see instruct	ions)	<u> </u>	
56	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			
	here ▶			X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a forei	gn trust?		_ <u>x</u>
	If "Yes," see instructions for other forms the organization may have to file			
58	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 correct, and complete. Declaration of preparer than taxpayer) is based on all information of which preparer has any knowledge	best of my kn	owledge and bel	ief, it is true,
Sign		_		uss this return with
Here	CFO CFO	4	he preparer show	
	Signature of officer Date Title		nstructions)?	X Yes No
	Print/Type preparer's name Preparer's signature Date Cl	neck	if PTIN	
Paid		lf- employed		
Prepa	rer MBHAA BIBINOI			180769
Use C	Priv Firm's name ► JM&M	irm's EIN 🕨	<u>52−</u> 3	L853933
	10500 LITTLE PATUXENT PARKWAY, SUITE			
	Firm's address ► COLUMBIA, MD 21044	hone no.	<u>410-884</u>	
823711 01	09-19		For	m 990-T (2018)

Schedule A - Cost of Good	s Sold. Enter m	nethod of invento	ry valuation ► N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year		6	-		
2 Purchases	2	2 7 Cost of goods sold Subtract			ne 6			
3 Cost of labor	3		from line 5. Enter here and in Part I,					
4 a Additional section 263A costs			line 2					_
(attach schedule)	4a		8 Do the rules of section	vith respect to		Yes	No	
b Other costs (attach schedule)	4b		property produced or a	for resale) apply to				
5 Total Add lines 1 through 4b	5		the organization?					
Schedule C - Rent Income (see instructions)	(From Real P	Property and	Personal Property	Lease	ed With Real Pro	perty)		
1 Description of property					_			
(1)						_		
(2)								
(3)								
(4)								
	2 Rent received				3/a\Dadustions directly	connected	with the income in	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for pers	personal property (if the percenta conal property exceeds 50% or if a based on profit or income)	age	3(a)Deductions directly columns 2(a) a	nd 2(b) (attac	ch schedule)	
(1)								
(2)								
(3)								
(4)								
Total		otal		0.	# 			
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	n (A)			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Deb	ot-Financed I	ncome (see in:	structions)					
			2. Gross income from		3 Deductions directly cor to debt-finance			
1 Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b	Other deductions attach schedule)	
/4\						+		
(1)								
(2)		I				t t		
(3)	_	- 				-		
(3)								
(3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average ac of or allo debt-finance (attach so	cable to ed property	6 Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		Allocable deduction mn 6 x total of colu 3(a) and 3(b))	
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or allo- debt-finance	cable to ed property	by column 5		reportable (column		mn 6 x total of colu	
(4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1)	of or allo- debt-finance	cable to ed property			reportable (column		mn 6 x total of colu	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2)	of or allo- debt-finance	cable to ed property	by column 5		reportable (column		mn 6 x total of colu	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3)	of or allo- debt-finance	cable to ed property	by column 5 %		reportable (column		mn 6 x total of colu	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2)	of or allo- debt-finance	cable to ed property	% %		reportable (column	(colui	mn 6 x total of colu	mns
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3)	of or allo- debt-finance	cable to ed property	% %		reportable (column 2 x column 6)	(colui	mn 6 x total of colu 3(a) and 3(b))	mns
(4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3) (4)	of or allo debt-finance (attach si	cable to ed property chedule)	% %		reportable (column 2 x column 6)	Enter Part	mn 6 x total of colu 3(a) and 3(b))	nns

Page 4

Scriedule F - Interest, /				Controlled O				- (000 1110			
Name of controlled organizat	ider	2 Employer identification number (loss) (see		related income 4 Tot		otal of specified 5. Pa		Part of column 4 that is cluded in the controlling parization's gross income		6. Deductions directly connected with income in column 5	
(1)			 								
(2)								_		-	
(3)											
(4)											
Nonexempt Controlled Organi	zations	• •				_					
7 Taxable Income	8 Net unrelated ind (see instructi		9 Total	of specified payr made	nents	10 Part of column the controlling gross		nization's		fuctions directly connected income in column 10	
(1)								*	-		
(2)											
(3)											
(4)											
Totals						Add colum Enter here and line 8, c		1, Part I,	Enter he	d columns 6 and 11 ere and on page 1, Part I, une 8, column (B)	
Schedule G - Investme	nt Income of	Section	n 501/oV	7) (Q) or (17) Or	ganization		<u> </u>			
(see instr		a 3 e 0110	11 30 1(0)(, _, , (ə), or (17,01	yamzanon	1				
	ription of income			2 Amount of	ncome	3 Deduction directly conne (attach sched	cted	4. Set-a		5. Total deductions and set-asides (col. 3 plus col. 4)	
(1)	**			_							
(2)					Î						
(3)			_								
(4)											
				Enter here and o Part I, line 9, col		•-				Enter here and on page 1 Part I, line 9, column (B)	
Totals			<u> </u>		0.					0.	
Schedule I - Exploited (see instru		ty Incon	ne, Other	r Than Ad	vertisi	ng Income) 				
1 Description of exploited activity	2 Gross unrelated business income from trade or business	directly with p of ur	xpenses connected roduction nrelated ss income	4 Net incom from unrelated business (co minus column gain, compute through	trade or lumn 2 3) If a cols 5	5. Gross inco from activity t is not unrelat business inco	ctivity that unrelated attributable to		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)					}						
(2)											
(3)											
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	page line 10	ere and on 1, Part I,), col (B)							Enter here and on page 1, Part II, line 26	
Totals Schedule J - Advertisir	0		0.[0.	
Part I Income From F				solidated	Basis						
1 Name of periodical	2 Gross advertising income	, I	3 Direct vertising costs	4. Adverti or (loss) (co col 3) If a ga cols 5 thi	1 2 minus in, compute	5. Circulati	ion	6 Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)									1		
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5))	>	0.	0	•						0.	
										Form 990-T (2018)	

Part II Income From Perio columns 2 through 7 on a	-	-	rate Basis (For each	ch periodical listed i	n Part II, fill in	
1 Name of periodical	2 Gross advertising income	3. Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			· ·			
(2)		-				
(3)						
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.				0.
Schedule K - Compensatio	n of Officers,	Directors, and	Trustees (see in:	structions)		
1. Name			2 Title	3 Percent of time devoted business	_ 1 T Con	npensation attributable inrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Total Enter here and on page 1, Part II, I	ine 14				>	0.
						Form 990-T (2018)

FORM 990-T	THER CREDITS AND PAYMENTS	STATEMENT 1
DESCRIPTION		AMOUNT
TAX PAID FOR TRANSIT BENER	ITS	2,700.
TOTAL INCLUDED ON FORM 990	-T, PAGE 2, PART V, LINE 50G	2,700.