

Redwood Coast Montessori

Board of Directors

1611 Peninsula Dr., Manila, CA 95521

Zoom Meeting Link: <https://us06web.zoom.us/j/83820296688>

REGULAR MEETING

May 13, 2026 6:30 p.m.

Agenda

Roll Call:

Board Members Absent:

A. CALL TO ORDER OF OPEN SESSION:

B. OPEN SESSION:

C. PUBLIC COMMENT

The public is invited to make announcements or comment on information to the Board that is relevant to the scope of authority of Redwood Coast Montessori. The Board may uniformly impose a time limit of 3 minutes to individual presentations to assure every subject is heard. By public law, the Board cannot take action on items not on the agenda.

D. GENERAL FUNCTION-CONSENT ITEMS– Approval w/ Single Motion:

Items listed under the Consent Agenda are considered to be routine and are acted on by the Board in one motion. There is no discussion of these items before the Board vote unless a member of the Board, staff, or public requests specific items be discussed and/or removed from the Consent Agenda. It is understood that the Administration recommends approval on all Consent Items.

Approve 1 and 4:

1. Approval of Draft Minutes of April 29, 2026: [Mins. Board Agenda April 29, 2026](#)
2. Approval of new hires (certificated) -None
3. Approval of resignation (certificated)- Lorna Bryant- Paraprofessional, Manila Site
4. Approval of new hires (classified) - None

E. BUSINESS AND FINANCE - ITEMS FOR REPORT, INFORMATION, DISCUSSION, AND POSSIBLE ACTION

1. Approval: Tax Return, 2024- [990 Review copy with updates.pdf](#)
2. Discussion and acknowledgement that Amanda Stelly is not (and has never been) the person who possesses the organization's (RCM) books and records as is written in the 2023 Tax Return.
[2023_5781_BRYAN_LITTLE_Client_Copy_Return_990.pdf](#)
3. Discussion only: Charter Petition- Updated Lottery Language-
[RCM Enrollment, Lottery Process-Final Version.docx](#)

F. SCHOOL FUNCTIONS - ITEMS FOR REPORT, DISCUSSION, AND POSSIBLE ACTION

1. Discussion Only: Long Term Independent Study status update- Arcata has not questioned or denied
2. Information Only- Staff Meetings for school changes and Survey input-Changes for 2026-2027
3. Information Only-Art Position flown, numerous applicants, interviews being scheduled
4. Information only- Teacher proposal- [MMUN Stipend Considerations and Proposal](#)
5. Discussion only: [Public Relations committee and efforts-](#) Color Run Community event planning continues and is scheduled for June 6th, Community Breakfast Fundraiser was coordinated by Amelya Madrigal (High School math teacher) and occurred May 9th, Scent Trial Fundraiser happened on May 2nd and 3rd. The AFS-USA Volunteer-Northwest California Team hosted an orientation followed by a

county-wide meeting on the Arcata campus on Sunday, May 3rd. HCOE Visit & Parent Presentation —
May 27th

G. STAFF AND DIRECTORS REPORTS - ITEMS FOR REPORT, DISCUSSION

1. Staff Report :

Michelle Leonard:

Janean Weekly-Embree: [rcm board report may 2026](#)

2. Directors Report:

H. CLOSED SESSION:

Public Employee Performance Evaluation -Director

I. Report Out any Actions Taken in Closed Session:

FUTURE AGENDA ITEMS:

1. Charter Petition update
2. School Restructuring/Positions
3. Salary Schedules
4. Stipend
5. Local Control Accountability Plan

ADJOURNMENT OF OPEN SESSION NOTICE:

Any writing, not exempt from public disclosure under Government Code Section 6253.5, 6254, 6254.3, 6254.7, 6254.15, 6254.16, OR 6254.22, which is distributed to all or a majority of the members of the governing board by any person in connection with a matter subject to discussion or consideration at an open meeting of the board is available for public inspection at the Redwood Coast Montessori School 1611 Peninsula Drive, Arcata, CA 95521. In compliance with Government Code section 54954.2(a) Redwood Coast Montessori will, on request make agendas available in appropriate alternative formats to persons with a disability, as required by Section 202 of the Americans with Disabilities Act of 1990 (42 U.S.C. Sec. 12132), and the federal rules and regulations adopted in implementation thereof. Individuals who need this agenda in an alternative format or who need a disability-related modification or accommodation in order to participate in the meeting should contact Redwood Coast Montessori at 707-832-4194.

Redwood Coast Montessori

Board of Directors

1611 Peninsula Dr., Manila, CA 95521

Zoom Meeting Link:

<https://us06web.zoom.us/j/83789610088?pwd=iMTubbqWbV2jYPzhtUZanNgzBE8CDa.1>

REGULAR MEETING

April 29, 2026 6:30 p.m.

Minutes

Roll Call: **Kim Bonine (President), Michelle Ellis (Vice President), James Braggs (Treasurer), Susann Goodman (Secretary), Gabriel Ferreira (Member at Large)**

Board Members Absent: **None**

A. CALL TO ORDER OF OPEN SESSION: **Kim Bonine @ 6:34pm**

B. OPEN SESSION:

C. PUBLIC COMMENT

The public is invited to make announcements or comment on information to the Board that is relevant to the scope of authority of Redwood Coast Montessori. The Board may uniformly impose a time limit of 3 minutes to individual presentations to assure every subject is heard. By public law, the Board cannot take action on items not on the agenda.


- **Tess Yinger: MMUN Stipend Salary/ Adjustment Statement (See Attachment)**
- **Michelle Fuller: MMUN Stipend (See Attachment)**


D. **GENERAL FUNCTION-CONSENT ITEMS**– Approval w/ Single Motion:

Items listed under the Consent Agenda are considered to be routine and are acted on by the Board in one motion. There is no discussion of these items before the Board vote unless a member of the Board, staff, or public requests specific items be discussed and/or removed from the Consent Agenda. It is understood that the Administration recommends approval on all Consent Items.

Approve 1 and 3: 6:53pm Susann/ Gabe 2nd. Motion Passes

1. Approval of Draft Minutes of March 11, 2026, March 31, 2026 and ~~April 14, 2026:~~

 Copy of Board Agenda March, 2026

 Copy of Board Agenda Special Meeting March 31, 2026

~~Will be made available at the April 29, 2026 board meeting meeting~~

2. Approval of new hires (certificated) -None


3. Approval of resignation (certificated)- Gabe Trepanier, Sasha Lyth, Tian-Ai Aldridge

4. Approval of new hires (classified) - None

E. **BUSINESS AND FINANCE - ITEMS FOR REPORT, INFORMATION, DISCUSSION, AND POSSIBLE ACTION**

Approve 1: 7:10pm Susann, Michelle 2nd, Motion Passes


Approve 3: 7:27pm Michelle, James 2nd, Motion Passes

1. Approval: Audit finding Corrective Action Plans-  ArcataESD LTR - edited.pdf

 2025-01 Corrective Action Plan.docx  2025-02 Corrective Action Plan.docx

2. Discussion only: Charter Petition submitted to Arcata School District for Phase 1

 Redwood Coast Montessori Charter Renewal Petition 2026-2031 Board Review.pdf

3. Discussion and Approval- after possible changes based on staff feedback: 2026-2027 Calendar:  RCM Calendar 26-27 (School-wide).xlsx

F. SCHOOL FUNCTIONS - ITEMS FOR REPORT, DISCUSSION, AND POSSIBLE ACTION

1. Discussion Only: Long Term Independent Study status update
2. Discussion Only- Possible structural changes for 2026-2027
3. Discussion only- Michelle Dobrowolski, Sheree Shapiro, and Janean Weekly-Embree are discussing the terms for the stipend job description and appropriate compensation for MMUN and the different levels of involvement.
4. Discussion only: Public Relations committee and efforts- Sheree and Janean attended and represented RCM at the College Corp Matching event, Color Run Community event planning continues and is scheduled for June 6th, Community Breakfast Fundraiser is be coordinated by Amelya Madrigal (High School math teacher) and is scheduled for May 9th, Scent Trial Fundraiser is scheduled for May 2nd and 3rd and is being hosted by the high school fundraising students. The AFS-USA Volunteer-Northwest California Team will be hosting an orientation followed by a county-wide meeting on the Arcata campus on Sunday, May 3rd.

G. STAFF AND DIRECTORS REPORTS - ITEMS FOR REPORT, DISCUSSION

1. Staff Report :
Michelle Leonard: **Peace Maker Lunch, Scent Trial**
Janean Weekly-Embree:  RCM Board meeting report April 29, 2026.pdf
2. Directors Report:

H. CLOSED SESSION:

Public Employee Performance Evaluation -Director

I. Report Out any Actions Taken in Closed Session: none

FUTURE AGENDA ITEMS:

1. Charter Petition update
2. School Restructuring/Pos
3. Stipend

Adjournment of Session: 10:50 PM, Gabriel, 2nd Susann, All in favor

ADJOURNMENT OF OPEN SESSION NOTICE:

Any writing, not exempt from public disclosure under Government Code Section 6253.5, 6254, 6254.3, 6254. 7, 6254.15, 6254.16, OR 6254.22, which is distributed to all or a majority of the members of the governing board by any person in connection with a matter subject to discussion or consideration at an open meeting of the board is available for public inspection at the Redwood Coast Montessori School 1611 Peninsula Drive, Arcata, CA 95521. In compliance with Government Code section 54954.2(a) Redwood Coast Montessori will, on request make agendas available in appropriate alternative formats to persons with a disability, as required by Section 202 of the Americans with Disabilities Act of 1990 (42 U.S.C. Sec. 12132), and the federal rules and regulations adopted in implementation thereof. Individuals who need this agenda in an alternative format or who need a disability-related modification or accommodation in order to participate in the meeting should contact Redwood Coast Montessori at 707-832-4194.

Public Comment for Board Meeting 4-29-2026

I am here to speak in support of immediate pay equity for our certificated staff with the longest employment history at RCM, including both stipends and salary adjustments. This year, I had the pleasure of spending significant time in the Manila adolescent classroom. I volunteered with Sheree and Michelle to support 8th graders preparing for Montessori Model UN. Through that experience, I saw firsthand the extraordinary amount of unpaid time and effort they dedicate to ensuring every student receives an exceptional education.

MMUN is an extraordinary program. Students analyze current global issues, write in-depth position papers, deliver speeches, and collaborate with other middle schoolers to propose solutions to complex geopolitical problems. I attended the conference this spring and noticed a few significant things: RCM is one of the only public Montessori schools that participates—most others are private. Additionally, participation in MMUN at RCM is not optional—every 8th grader takes part. This is not typical for MMUN; it is usually a club or extracurricular. What stood out most was how deeply prepared and confident our students were. They demonstrated a depth of knowledge and authenticity that set them apart from their peers. Remarkably, every single student, including students with learning disabilities, mental health challenges, and neurodivergence all stood up, gave speeches, and contributed meaningfully. Many became committee leaders. I witnessed first-hand tremendous growth—students who once struggled to confidently write a few sentences produced thoughtful, multi-page essays on complex global issues. None of this happens without Sheree and Michelle. Every week, they spend additional hours after school supporting students. During the school day, they conference with students individually about their position papers, which takes copious amounts of time during and before the conference. The natural dovetail with Montessori curriculum cannot be understated. Outside the classroom, they organize multiple fundraisers (many of which are on the weekend), and guide families through both academic and travel expectations. During the 10-day trip the two are working every moment to ensure the safety, participation, and joy of everyone involved. They have sustained this level of commitment for years— all without fair compensation. Not only are Sheree and Michelle training and supporting students through this process, they are also providing the same support for families. Through constant communication before and during the trip, families become an integral part of the MMUN process. Parent chaperones are new to the experience just as their students are, and have to be guided through the process step by step.

I know that you understand that this is not sustainable, and it is not equitable. We cannot expect educators to continue giving this much of themselves without fair pay. It also sends the message that our most dedicated staff are not financially valued. Sheree and Michelle have helped create the foundation of RCM and are wise counselors to our community. Pay equity is not just fair—it is necessary to sustain what makes this program so impactful beyond the current teaching team.

I fully understand that Janean is currently doing everything in her power to make this a reality, and my purpose in sharing this comment is not to minimize or disparage that work. It felt important to me to voice continued support for these two incredible educators, and for other educators in the RCM community that likewise deserve fair pay for their work. We all stand to benefit when we pay attention and show that we value our staff's commitment to their work and to our students.

Thank you for your time.- Tess Yinger

Hi Janean, can you please forward this email to all Board members? Thank you.

I am sorry I can't make these comments in person, please accept this email in my absence. I see the "MMUN stipend job description and appropriate compensation" on the agenda for the upcoming Board meeting and want to provide some comments from my experience.

I have been so lucky to have both of my kids go through the adolescent program at RCM and the 8th grade MMUN trip. I am extra lucky because I got to chaperone! Before going, I had my own ideas about how it would go and I was surprised about different it was in reality. After I survived the whole trip I could smile and understand why they had organized everything the way they had. This year when I went I was blown away by how clearly I saw Michelle and Sheree as "Guides" and really grasped all that label conveyed.

The MMUN program is academically rigorous and the trip is a growth-inducing challenge for all students. The work it takes to prepare every unique student for all aspects of this is immense. Sheree and Michelle dedicate themselves each year to the extra hours to go through the formal MMUN conference preparation structure (including many tasks I'm sure I'm not aware of) and meet each student where they are to build the skills to participate. Many evenings and weekends beyond the Wednesday after school hours are spent communicating and working on this. Each year is slightly different, so it is not a "cut and paste" trip planning each year- the students research and select sights they want to see. The MMUN program greatly enhanced both of my students' experiences at RCM, and the structured program is so beneficial to expanding their worldview and highlighting Montessori values in a real-world global context. The Washington, DC trip tacked on is also very important for these kids to see and participate in.

One "aha" moment I had was arriving at the conference and seeing so many groups of matching polo shirts or uniforms- of course, most Montessori schools are private schools. The fact that RCM (Michelle & Sheree) can get this rural public charter school class to New York City (Times Square!) for this conference is huge. The students are rightfully proud of the work they put into their papers and speeches, and I may be biased but I found their work superior to many others for its individuality and thoughtfulness. It is a life-changing experience for each student, and while it feels magical I do understand it takes dedicated staff doing a lot of extra work.

Sheree and Michelle are not only extremely hard-working and dedicated, but they are caring, respectful, intellectually curious, and SKILLED. I had an inkling but saw so much more leading up to and on the MMUN trips. I know this discussion is likely meant to address fair stipend payment for any hypothetical staff that take this on, but at this point is impossible to separate the impression of the program and work it takes from the individuals who have been doing it- Michelle and Sheree. The respect they demonstrate as everyone's needs and challenges surface during what can be stressful group travel is a skill I strive to bring more of in my own experiences! I am so grateful my kids got to be part of this and build so many life skills in addition to the academic ones.

I do not know the details of the discussion and am sorry to miss it. What I am trying to communicate is I think it is impossible to over-value the work that goes into the MMUN program. I hope the staff that lead this work will be fairly compensated for the huge lift it is each year and be recognized for the incredible value this brings to the RCM experience.

Thank you,
Michelle Fuller

2024 TAX RETURN

CLIENT COPY

Client: 5781

Prepared for: REDWOOD COAST MONTESSORI
PO BOX 6103
EUREKA, CA 95501
707-832-4194

Prepared by: VANESSA ANDERSON
ANDERSON,LUCAS,SOMERVILLE, & BORGES
1338 MAIN STREET
FORTUNA, CA 95540
(707)-725-4442

Date: MAY 7, 2026

Comments:

Route to: _____

2024 Exempt Org. Return
prepared for:

REDWOOD COAST MONTESSORI
PO BOX 6103
EUREKA, CA 95501

Anderson, Lucas, Somerville, & Borges
1338 Main Street
Fortuna, CA 95540

ANDERSON,LUCAS,SOMERVILLE, & BORGES
1338 MAIN STREET
FORTUNA, CA 95540
(707)-725-4442

May 7, 2026

REDWOOD COAST MONTESSORI
PO BOX 6103
EUREKA, CA 95501

Dear Client:

Your 2024 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-TE - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Your 2024 California Exempt Organization Annual Information Return will be electronically filed with the Franchise Tax Board upon receipt of a signed Form 8453-EO. No tax is payable with the filing of this return.

Please be sure to call us if you have any questions.

Sincerely,

Vanessa Anderson

ANDERSON,LUCAS,SOMERVILLE, & BORGES

1338 MAIN STREET
FORTUNA, CA 95540
(707)-725-4442

Client 5781
May 7, 2026

REDWOOD COAST MONTESSORI
PO BOX 6103
EUREKA, CA 95501
707-832-4194

FEDERAL FORMS

Form 990	2024 Return of Organization Exempt from Income Tax
Schedule A	Organization Exempt Under Section 501(c)(3)
Schedule D	Schedule D
Schedule E	Schools
Schedule O	Supplemental Information
Schedule R	Related Organizations and Unrelated Partnerships
Form 8868	Application for Extension
	Depreciation Schedules
Form 8879-TE	IRS e-file Signature Authorization

CALIFORNIA FORMS

Form 199	2024 California Exempt Organization Return
Form 3885 (199)	Depreciation and Amortization - Corp.
Form 8453-EO (199)	California e-file Return Authorization for Exempt
	California Depreciation Schedules

FEE SUMMARY

Preparation Fee	\$	1,500.00
Amount Due	\$	1,500.00

REDWOOD COAST MONTESSORI

45-4258908

	2024	2023	DIFF
REVENUE			
CONTRIBUTIONS AND GRANTS.....	821,972	605,242	216,730
PROGRAM SERVICE REVENUE.....	2,750,980	2,334,563	416,417
INVESTMENT INCOME.....	13,302	14,639	-1,337
OTHER REVENUE.....	401,818	318,212	83,606
TOTAL REVENUE.....	3,988,072	3,272,656	715,416
EXPENSES			
SALARIES, OTHER COMPEN., EMP. BENEFITS..	2,823,428	2,465,075	358,353
OTHER EXPENSES.....	1,020,913	819,247	201,666
TOTAL EXPENSES.....	3,844,341	3,284,322	560,019
NET ASSETS OR FUND BALANCES			
REVENUE LESS EXPENSES.....	143,731	-11,666	155,397
TOTAL ASSETS AT END OF YEAR.....	1,190,124	1,004,056	186,068
TOTAL LIABILITIES AT END OF YEAR.....	204,984	162,647	42,337
NET ASSETS/FUND BALANCES AT END OF YEAR.	985,140	841,409	143,731

REDWOOD COAST MONTESSORI

45-4258908

	2024	2023	DIFF
RECEIPTS AND REVENUES			
GROSS SALES OR RECEIPTS.....	3,166,362	2,670,505	495,857
GROSS CONTRIBUTIONS, GIFTS, & GRANTS.....	821,972	605,242	216,730
TOTAL GROSS RECEIPTS.....	3,988,334	3,275,747	712,587
TOTAL COSTS.....	0	0	0
TOTAL GROSS INCOME.....	3,988,334	3,275,747	712,587
EXPENSES			
TOTAL EXPENSES.....	3,844,603	3,287,413	557,190
EXCESS RECEIPTS OVER EXPENSES.....	143,731	-11,666	155,397
FILING FEE			
FILING FEE.....	0	0	0
BALANCE DUE.....	0	0	0

FORMS NEEDED FOR THIS RETURN

FEDERAL: 990, SCH A, SCH D, SCH E, SCH R, 8868
CALIFORNIA: 199, 3885, 8453-EO (199), E-FILE INSTRUCTIONS

CARRYOVERS TO 2025

NONE

THE ORGANIZATION'S FEDERAL TAX RETURN IS NOT FINISHED UNTIL YOU COMPLETE THE FOLLOWING INSTRUCTIONS.

PRIOR TO TRANSMISSION OF THE RETURN

FORM 990

THE ORGANIZATION SHOULD REVIEW THEIR FEDERAL RETURN ALONG WITH ANY ACCOMPANYING SCHEDULES AND STATEMENTS.

PAPERLESS E-FILE

THE ORGANIZATION SHOULD READ, SIGN AND DATE THE FORM 8879-TE, IRS E-FILE SIGNATURE AUTHORIZATION.

EVEN RETURN

NO PAYMENT IS REQUIRED.

AFTER TRANSMISSION OF THE RETURN

RECEIVE ACKNOWLEDGEMENT OF YOUR E-FILE TRANSMISSION STATUS.

WITHIN SEVERAL HOURS, ACCESS THE PROGRAM AND GET YOUR FIRST ACKNOWLEDGEMENT (ACK) THAT THE PROGRAM HAS RECEIVED YOUR TRANSMISSION FILE.

ACCESS THE PROGRAM AGAIN AFTER 24 AND THEN 48 HOURS TO RECEIVE YOUR FEDERAL ACKS.

KEEP A SIGNED COPY OF FORM 8879-TE, IRS E-FILE SIGNATURE AUTHORIZATION IN YOUR FILES FOR 3 YEARS.

DO NOT MAIL:

FORM 8879-TE IRS E-FILE SIGNATURE AUTHORIZATION

THE ORGANIZATION'S FEDERAL TAX RETURN IS NOT FINISHED UNTIL YOU COMPLETE THE FOLLOWING INSTRUCTIONS.

PRIOR TO TRANSMISSION OF THE RETURN

FORM 8868

NO SIGNATURE IS REQUIRED WITH FORM 8868.

EVEN RETURN

NO PAYMENT IS REQUIRED.

AFTER TRANSMISSION OF THE RETURN

RECEIVE ACKNOWLEDGEMENT OF YOUR E-FILE TRANSMISSION STATUS.

WITHIN SEVERAL HOURS, ACCESS THE PROGRAM AND GET YOUR FIRST ACKNOWLEDGEMENT (ACK) THAT THE PROGRAM HAS RECEIVED YOUR TRANSMISSION FILE.

ACCESS THE PROGRAM AGAIN AFTER 24 AND THEN 48 HOURS TO RECEIVE YOUR FEDERAL ACKS.

THE ENTITY'S 2024 CALIFORNIA TAX RETURN IS NOT FINISHED UNTIL YOU COMPLETE THE FOLLOWING INSTRUCTIONS.

PRIOR TO TRANSMISSION OF THE RETURN

FORM 199

THE ENTITY SHOULD REVIEW THEIR 2024 CALIFORNIA EXEMPT INCOME TAX RETURN ALONG WITH ANY ACCOMPANYING SCHEDULES AND STATEMENTS.

FORM 8453-EO

THE ENTITY SHOULD REVIEW, SIGN AND DATE FORM 8453-EO PRIOR TO E-FILING THE RETURN.

EVEN RETURN

NO PAYMENT IS REQUIRED.

AFTER TRANSMISSION OF THE RETURN

RECEIVE ACKNOWLEDGEMENT OF YOUR E-FILE TRANSMISSION STATUS.

WITHIN SEVERAL HOURS, CONNECT WITH LACERTE AND GET YOUR FIRST ACKNOWLEDGEMENT (ACK) THAT LACERTE HAS RECEIVED YOUR TRANSMISSION FILE.

CONNECT WITH LACERTE AGAIN AFTER 24 AND THEN 48 HOURS TO RECEIVE YOUR CALIFORNIA ACKNOWLEDGEMENTS.

KEEP A SIGNED COPY OF FORM 8453-EO IN YOUR FILES FOR 4 YEARS.

DO NOT MAIL:

FORM 8453-EO

FRANCHISE TAX BOARD, PO BOX 942857, SACRAMENTO CA 94257-0531

**FORM 990, PART III, LINE 4E
PROGRAM SERVICES TOTALS**

	PROGRAM SERVICES TOTAL	FORM 990	SOURCE
TOTAL EXPENSES	3,730,770.	3,730,770.	PART IX, LINE 25, COL. B
GRANTS	0.	0.	PART IX, LINES 1-3, COL. B
REVENUE	2,750,980.	2,750,980.	PART VIII, LINE 2, COL. A

**FORM 990, PART IX, LINE 24E
OTHER EXPENSES**

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
ATHLETIC FEES	1,244.	1,244.		
BAD DEBT EXPENSE	81.	81.		
BANK FEES	872.		872.	
CAPITAL OUTLAY	1,135.	1,135.		
COMMUNITY BUILDING EXPENSE	674.	674.		
FIELD TRIPS	58,984.	58,984.		
OTHER OUTGO FROM COUNTY	2,161.	2,161.		
PROFESSIONAL MEMBERSHIPS	1,473.	736.	737.	
PROGRAM FOOD & SNACKS	42,316.	42,316.		
REPAIRS/MAINTENANCE	881.	881.		
SITE DEVELOPMENT	320.	320.		
STUDENT ACTIVITIES EXPENSES	1,475.	1,475.		
SUPPLIES	9,453.	9,453.		
TAXES & LICENSES	7,044.	3,522.	3,522.	
TELEPHONE	12,036.	6,018.	6,018.	
WORKERS COMPENSATION INSURANCE	54,655.	54,655.		
TOTAL	\$ 194,804.	\$ 183,655.	\$ 11,149.	\$ 0.

REDWOOD COAST MONTESSORI

45-4258908

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF																
AUTO / TRANSPORT EQUIPMENT																
7	2025 FORD 12 PASSENGER TRANS	6/20/25		60,853							60,853		S/L HY	5	.10000	6,085
TOTAL AUTO / TRANSPORT EQUIP																
BUILDINGS																
6	PORTABLE CLASSROOM	10/31/24		93,823							93,823		1500B HY	15	.05000	4,691
TOTAL BUILDINGS																
IMPROVEMENTS																
3	PLAYGROUND STRUCTURES & E	8/06/18		85,842							85,842	29,891	1500B HY	20	.04888	4,196
TOTAL IMPROVEMENTS																
MACHINERY AND EQUIPMENT																
1	SECURITY SYSTEM	6/26/14		7,636							7,636	5,153	S/L MQ	15	.06670	509
2	COPIER	9/16/13		8,958							8,958	8,958	S/L MQ	5		0
4	METAL SIGN FOR ARCATA	1/21/21		1,213							1,213	1,004	200DB HY	5	.11520	140
5	DISHWASHER & INSTALLATION	4/20/23		7,027							7,027	3,654	200DB HY	5	.19200	1,349
8	COMMERCIAL DISHWASHER	12/12/24		6,487							6,487		200DB HY	5	.20000	1,297
9	COMMERCIAL WATER HEATER	4/24/25		24,900							24,900		S/L MM	39	.00635	133
10	TRUE STG2R SOLID DOOR REFRIG	8/25/24		5,785							5,785		200DB HY	5	.20000	1,157
11	VULCAN 60" ELECTRIC RANGE	12/08/24		20,050							20,050		200DB HY	5	.20000	4,010
12	TRUE TS-23FOHC 27" REACH IN FR	1/10/25		5,511							5,511		200DB HY	5	.20000	1,102
TOTAL MACHINERY AND EQUIPME																
87,567 0 0 0 0 0 0 0 0 0 87,567 18,769 4,196																

REDWOOD COAST MONTESSORI

45-4258908

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			328,085		0	0	0	0	0	328,085	48,660				24,669
	GRAND TOTAL DEPRECIATION			328,085		0	0	0	0	0	328,085	48,660				24,669

REDWOOD COAST MONTESSORI

45-4258908

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 199																
AUTO / TRANSPORT EQUIPMENT																
7	2025 FORD 12 PASSENGER TRANS	6/20/25		60,853							60,853		S/L HY	5	.10000	6,085
	TOTAL AUTO / TRANSPORT EQUIP			60,853		0	0	0	0	0	60,853	0				6,085
BUILDINGS																
6	PORTABLE CLASSROOM	10/31/24		93,823							93,823		1500DB HY	15	.05000	4,691
	TOTAL BUILDINGS			93,823		0	0	0	0	0	93,823	0				4,691
IMPROVEMENTS																
3	PLAYGROUND STRUCTURES & E	8/06/18		85,842							85,842	29,891	1500DB HY	20	.04888	4,196
	TOTAL IMPROVEMENTS			85,842		0	0	0	0	0	85,842	29,891				4,196
MACHINERY AND EQUIPMENT																
1	SECURITY SYSTEM	6/26/14		7,636							7,636	5,153	S/L MQ	15	.06670	509
2	COPIER	9/16/13		8,958							8,958	8,958	S/L MQ	5		0
4	METAL SIGN FOR ARCATA	1/21/21		1,213							1,213	1,004	2000DB HY	5	.11520	140
5	DISHWASHER & INSTALLATION	4/20/23		7,027							7,027	3,654	2000DB HY	5	.19200	1,349
8	COMMERCIAL DISHWASHER	12/12/24		6,487							6,487	6,487	2000DB HY	5	.20000	1,297
9	COMMERCIAL WATER HEATER	4/24/25		24,900							24,900	24,900	S/L MM	39	.00635	133
10	TRUE STG2R SOLID DOOR REFRIG	8/25/24		5,785							5,785	5,785	2000DB HY	5	.20000	1,157
11	VULCAN 60" ELECTRIC RANGE	12/08/24		20,050							20,050	20,050	2000DB HY	5	.20000	4,010
12	TRUE TS-23FOHC 27" REACH IN FR	1/10/25		5,511							5,511	5,511	2000DB HY	5	.20000	1,102
	TOTAL MACHINERY AND EQUIPME			87,567		0	0	0	0	0	87,567	18,769				9,697

REDWOOD COAST MONTESSORI

45-4258908

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	TOTAL DEPRECIATION			328,085		0	0	0	0	0	328,085	48,660				24,669
	GRAND TOTAL DEPRECIATION			328,085		0	0	0	0	0	328,085	48,660				24,669

**IRS E-file Signature Authorization
for a Tax Exempt Entity**

For calendar year 2024, or fiscal year beginning 7/01, 2024, and ending 6/30, 20 2025

2024

Department of the Treasury
Internal Revenue Service

**Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.**

Name of filer REDWOOD COAST MONTESSORI EIN or SSN 45-4258908

Name and title of officer or person subject to tax
JANEAN WEEKLY-EMBREE SCHOOL DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

<input checked="" type="checkbox"/> 1a Form 990 check here.	<input type="checkbox"/> b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>3,988,072.</u>
<input type="checkbox"/> 2a Form 990-EZ check here.	<input type="checkbox"/> b Total revenue, if any (Form 990-EZ, line 9)	2b	
<input type="checkbox"/> 3a Form 1120-POL check here	<input type="checkbox"/> b Total tax (Form 1120-POL, line 22)	3b	
<input type="checkbox"/> 4a Form 990-PF check here.	<input type="checkbox"/> b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
<input type="checkbox"/> 5a Form 8868 check here.	<input type="checkbox"/> b Balance due (Form 8868, line 3c)	5b	
<input type="checkbox"/> 6a Form 990-T check here.	<input type="checkbox"/> b Total tax (Form 990-T, Part III, line 4)	6b	
<input type="checkbox"/> 7a Form 4720 check here.	<input type="checkbox"/> b Total tax (Form 4720, Part III, line 1)	7b	
<input type="checkbox"/> 8a Form 5227 check here.	<input type="checkbox"/> b FMV of assets at end of tax year (Form 5227, Item D)	8b	
<input type="checkbox"/> 9a Form 5330 check here.	<input type="checkbox"/> b Tax due (Form 5330, Part II, line 19)	9b	
<input type="checkbox"/> 10a Form 8038-CP check here.	<input type="checkbox"/> b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____, and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize ANDERSON, LUCAS, SOMERVILLE, & BORGES to enter my PIN 05781 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

68695512355
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature VANESSA ANDERSON Date _____

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

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

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

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.

Part I – Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions.	Taxpayer identification number (TIN)
	REDWOOD COAST MONTESSORI	45-4258908
	Number, street, and room or suite number. If a P.O. box, see instructions.	
	PO BOX 6103	
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	EUREKA, CA 95501	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (section 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II – Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of JANEAN WEEKLY-EMBREE P O BOX 6103 EUREKA CA 95501

Telephone No. 707-832-4194 Fax No. _____

• If the organization does not have an office or place of business in the United States, check this box.

• If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____

If this is for the whole group, check this box.

If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 5/15, 20 26, to file the **exempt organization return** for the organization named above. The extension is for the organization's return for:

calendar year 20 ____ or
 tax year beginning 7/01, 20 24, and ending 6/30, 20 25.

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-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 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	3c	\$	0.

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

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2024 calendar year, or tax year beginning 7/01, 2024, and ending 6/30, 2025

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C REDWOOD COAST MONTESSORI, PO BOX 6103, EUREKA, CA 95501. D Employer identification number 45-4258908. E Telephone number 707-832-4194. G Gross receipts \$ 3,988,334. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No.

I Tax-exempt status: X 501(c)(3), 501(c) () (insert no.), 4947(a)(1) or 527

J Website: WWW.REDWOODCOASTMONTESSORI.ORG. H(c) Group exemption number

K Form of organization: X Corporation, Trust, Association, Other. L Year of formation: 2011. M State of legal domicile: CA

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... 2-7a Governance metrics. 8-12 Revenue (Contributions, Program service, Investment, Other, Total). 13-19 Expenses (Grants, Benefits, Salaries, Fundraising, Other, Total). 20-22 Net Assets or Fund Balances (Total assets, Total liabilities, Net assets).

Part II Signature Block

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, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer JANEAN WEEKLY-EMBREE, Date, Title SCHOOL DIRECTOR

Paid Preparer Use Only: Preparer's name VANESSA ANDERSON, Signature VANESSA ANDERSON, Date, Check self-employed, PTIN P00620527, Firm's name ANDERSON, LUCAS, SOMERVILLE, & BORGES, Firm's address 1338 MAIN STREET, FORTUNA, CA 95540, Firm's EIN 94-1167235, Phone no. (707)-725-4442

May the IRS discuss this return with the preparer shown above? See instructions. X Yes No

Part 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 MISSION OF REDWOOD COAST MONTESSORI IS TO SERVE A DIVERSE POPULATION OF STUDENTS (TK-12) IN THE HUMBOLDT COUNTY AREA BY PROVIDING STUDENTS WITH A HIGH QUALITY EDUCATIONAL OPTION BASED ON THE MONTESSORI METHOD.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 3,730,770. including grants of \$) (Revenue \$ 2,750,980.)

WE ARE A TK-12 PUBLIC CHARTER SCHOOL AUTHORIZED BY THE ARCATA SCHOOL DISTRICT. BASED ON THE MONTESSORI METHOD, STUDENTS ARE OFFERED A RICH CURRICULUM THAT VALUES THE INDIVIDUAL AND NATURAL DEVELOPMENT OF THE WHOLE CHILD. OUR EMPHASIS IS ON CREATING A POSITIVE ATTITUDE TOWARD LEARNING, BUILDING A COHESIVE SCHOOL COMMUNITY, AND VALUING OUR ENVIRONMENT AND OUR PLACE IN THE GLOBAL COMMUNITY.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,730,770.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

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? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
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? <i>If "Yes," complete Schedule J.</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I.</i>		X
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? <i>If "Yes," complete Schedule L, Part I.</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
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? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax shelter transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 1b Enter the number of voting members included on line 1a... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 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? 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. SEE SCHEDULE O 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 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? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O b Other officers or key employees of the organization SEE SCHEDULE O If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
20 State the name, address, and telephone number of the person who possesses the organization's books and records.
JANEAN WEEKLY-EMBREE P O BOX 6103 EUREKA CA 95501 707-832-4194

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) BRYAN LITTLE PRINCIPAL	40 0				X		62,481.	0.	0.
(2) SUSANN GOODMAN SECRETARY	2 0	X					0.	0.	0.
(3) GABRIEL FERREIRA DIRECTOR	2 0	X					0.	0.	0.
(4) KIM BONINE PRESIDENT	2 0	X					0.	0.	0.
(5) MICHELLE ELLIS VICE PRESIDENT	2 0	X					0.	0.	0.
(6) JAMES BRAGGS TREASURER	2 0	X					0.	0.	0.
(7) -----									
(8) -----									
(9) -----									
(10) -----									
(11) -----									
(12) -----									
(13) -----									
(14) -----									

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										

1b Subtotal	62,481.	0.	0.
c Total from continuation sheets to Part VII, Section A	0.	0.	0.
d Total (add lines 1b and 1c)	62,481.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a Federated campaigns.....	1a					
	b Membership dues.....	1b					
	c Fundraising events.....	1c					
	d Related organizations.....	1d					
	e Government grants (contributions)....	1e	771,666.				
	f All other contributions, gifts, grants, and similar amounts not included above....	1f	50,306.				
	g Noncash contributions included in lines 1a-1f.....	1g					
	h Total. Add lines 1a-1f.....		821,972.				
Program Service Revenue			Business Code				
	2a CHARTER SCHOOL INCOME.....	611600	2,546,059.	2,546,059.			
	b LUNCH PROGRAM.....	611600	167,630.	167,630.			
	c AFTER SCHOOL CARE INCOME.....	611600	36,613.	36,613.			
	d MICRO ECONOMY INCOME.....	611600	501.	501.			
	e STUDENT ACTIVITY INCOME.....	611600	177.	177.			
	f All other program service revenue....						
g Total. Add lines 2a-2f.....		2,750,980.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts).....		13,302.	13,302.			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties.....						
	6a Gross rents.....	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses.....	6b					
	c Rental income or (loss).....	6c					
	d Net rental income or (loss).....						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses.....	7b					
c Gain or (loss).....	7c						
d Net gain or (loss).....							
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18.....	8a		10,744.				
		b Less: direct expenses.....	8b	262.			
		c Net income or (loss) from fundraising events.....		10,482.			
9a Gross income from gaming activities. See Part IV, line 19.....	9a						
		b Less: direct expenses.....	9b				
		c Net income or (loss) from gaming activities.....					
10a Gross sales of inventory, less returns and allowances.....	10a						
		b Less: cost of goods sold....	10b				
		c Net income or (loss) from sales of inventory.....					
Miscellaneous Revenue			Business Code				
	11a LOCAL REVENUE.....	611600	391,336.	391,336.			
	b.....						
	c.....						
	d All other revenue.....						
e Total. Add lines 11a-11d.....		391,336.					
12 Total revenue. See instructions.....		3,988,072.	3,155,618.	0.	0.		