

City of Cocoa

*415 Stone Street
Cocoa, FL 32922*



Meeting Agenda

Monday, September 18, 2023

6:00 PM

**Dr. Joe Lee Smith
Community Center**

Diamond Square CRA



City of Cocoa

65 Stone Street
Cocoa, FL 32922

Meeting Agenda

Diamond Square RDA

Monday, September 18, 2023

6:00 PM

Cocoa City Council Chambers

I. CALL TO ORDER

ROLL CALL

INVOCATION

PLEDGE OF ALLEGIANCE

II. APPROVAL OF AGENDA AND MINUTES:

AGENDA:

1. [23-565](#) Request Agency approval of the Agenda for the Diamond Square CRA Regular Meeting on September 18, 2023, either as written or with amendments...End

Attachments: [Diamond Square - Short Agenda - 9-18-23 - FINAL.pdf](#)

MINUTES:

III. DELEGATIONS:

In accordance with the City Council's rules and procedures, residents or tax-payers of the City (upon any subject of general or public interest), City employees (regarding his/her employment), and water and sewer customers (on matters related to the City's water and/or sewer system), may address the City Council under Delegations on items not on the printed agenda by filling out a speaker card.

Speaker cards are located outside the Council meeting room and should be provided to the City Clerk. Please observe the time limit of five (5) minutes while speaking under Delegations. Delegations shall be limited to thirty (30) minutes unless extended by Council.

IV. PRESENTATIONS:

1. [23-567](#) Presentation from Delores McLaughlin, Executive Director of Alliance for Neighborhood Restoration (ANR). Briefing on upcoming program highlights.

Attachments: [DSCRA 9.18 - EXHIBIT B.pdf](#)

2. [23-568](#) Sherry Amos is presenting a refresher about her summer reading literacy program...End

Attachments: [DSCRA 9.18 - EXHIBIT C.pdf](#)
3. [23-569](#) Tiffany Boyers is the Coordinator for the Dr. Joe Lee Smith Community Center and she is presenting an introduction and program highlights showing the accomplishments and plans for future expansion at the Center...End

Attachments: [DSCRA 9.18 - EXHIBIT D.pdf](#)

V. ACTION ITEMS:

1. [23-574](#) Request Agency approval of a Resolution Amending the FY 2023 Budget, BAF # 23-121-T, in the amount of \$1,177 to cover end-of-year account imbalances resulting from the switchover from one Redevelopment Coordinator to another...End

Attachments: [Resolution 23-574.pdf](#)
[BAF-23-121-T-DS-Payroll Transfers \(09-18-23\) Agenda 23-574.pdf](#)
2. [23-575](#) Request Agency approval of the Proposed Budget for Fiscal Year 2024...End

Attachments: [Diamond Square FY24 Operating and Capital Budget.pdf](#)
3. [23-576](#) Request Agency approval of a Memorandum Of Understanding (MOU) for the Bezos Academy between the City of Cocoa, the Diamond Square CRA, Space Coast Health Foundation, Brevard Health Alliance, and the Bezos Foundation to establish a program in the Diamond Square CRA...End

Attachments: [Bezos Academy - MOU - saved 09.12.23.pdf](#)
4. [23-577](#) Request Agency review and decision on whether to approve request for funding from Sherry Amos for her summer reading literacy program...End

Attachments: [DSCRA 9.18 - EXHIBIT A.pdf](#)

VI. ATTORNEY'S REPORT:

VII. UPDATES AND STAFF REPORTS:

VIII. NEXT MEETING DATE:

The next regularly scheduled meeting of the Diamond Square Community Redevelopment Agency will be on Monday, October 16, 2023 at 6:00 PM at the Cocoa City Hall, 65 Stone Street, Cocoa, Florida.

IX. ADJOURNMENT

NOTICE TO THE PUBLIC:

This is a public meeting. All interested parties may attend in person. The facility wherein this public meeting will be held is accessible to the physically handicapped. In accordance with the Americans With Disabilities Act, persons needing assistance to participate in any of these proceedings should contact the City Clerk of the City of Cocoa, listed below, at least 48 hours prior to the meeting: Carie Shealy, City Clerk, 65 Stone Street, Cocoa, by telephone at (321) 433-8484 or via email at cshealy@cocoafl.org.

Additionally, interested persons may view or listen to the meeting electronically at the following internet sites:

- (1) <https://tinyurl.com/s5e875r> or
- (2) <https://cocoa.legistar.com/DepartmentDetail.aspx?ID=26365&GUID=FF9D3369-D354-4FAB-800A-57D0AEE30153&Mode=MainBody>

However, the City is not responsible for technical difficulties that may occur while attempting to view or listen to the meeting on the internet.

Interested persons may submit their written comments or questions regarding the meeting prior to the meeting through Email at meetings@cocoafl.org, or via E-comments through the online agenda. Any electronic comments submitted will be made part of the meeting record. Written comments or questions not relevant to the Council meeting agenda will not be made part of the meeting record but will be maintained as public record.

Pursuant to Section 286.0105, Florida Statutes, the City hereby advises the public that: if a person decides to appeal any decision made by the City Council with respect to any matter considered at its meeting or hearing, that person will need a record of the proceedings and for such purpose, affected persons may need to assure that a verbatim record of the proceedings is made, and such record shall include the testimony and evidence upon which the appeal is to be based. This notice does not constitute consent by the City for the introduction or admission into evidence of otherwise inadmissible or irrelevant evidence, nor does it authorize challenges or appeals otherwise not allowed by law.

Although members of the public are entitled to be heard by the City Council on certain items on the meeting agenda pursuant to the City Council Rules of Procedure, members of the public are not entitled to an immediate response by either administrative staff members or Council; however, the City Council or administrative staff may provide a response at their discretion. When presenting before the City Council, all comments or questions should be directed to the Mayor or the chair of the meeting. Comments or questions should not be made directly to administrative staff without permission from the Mayor or chair.

Public debate by individual speakers from the audience on public hearing items shall be limited to three (3) minutes. Applicants or representatives of recognized groups with special interests in a matter shall be limited to ten (10) minutes; and total debate on a single issue shall be limited to thirty (30) minutes. Only one presentation per person per item shall be allowed.

A Council member may add an item to the agenda during the meeting only at the time the agenda is approved. If the item requires action by the Council, then it may be added to the agenda by an affirmative vote of the Council, and written documentation must be submitted at the time the item is added to the agenda. Matters may also be raised by the Council, City Manager or City Attorney under reports and acted upon by the City Council.

This agenda is posted on the Municipal Bulletin Board and at the Central Brevard Library and Reference Center in Cocoa for public review.



Legislation Details (With Text)

File #: 23-565 **Version:** 1 **Name:**
Type: Agenda **Status:** Agenda Ready
File created: 9/13/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Request Agency approval of the Agenda for the Diamond Square CRA Regular Meeting on September 18, 2023, either as written or with amendments...End

Sponsors:

Indexes:

Code sections:

Attachments: [Diamond Square - Short Agenda - 9-18-23 - FINAL.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 13, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director
Requested Action:
Request Agency approval of the Agenda for the Diamond Square CRA Regular Meeting on September 18, 2023, either as written or with amendments.

BACKGROUND:

Agency Members approve the Agenda at the beginning of the meeting.

BUDGETARY IMPACT:

None.

PREVIOUS ACTION:

N/A.

RECOMMENDED MOTION:

Request Agency approval of the Agenda for the Diamond Square CRA Regular Meeting on September 18, 2023, either as written or with amendments.



DIAMOND SQUARE

REDEVELOPMENT AGENCY

Tracy Moore
Chairperson

Crystal McQueen
Vice Chairperson

Larry Brown
Board Member
appointed by
Brevard
County

Jackie Isom
Board Member

Ed Jones
Board Member

Amy Robinson
Board Member

Marilyn Smith
Board Member

DATE: Monday, September 18, 2023
TIME: 6:00 p.m.

Location: Dr. Joe Lee Smith
Community Center
415 Stone Street

I. CALL TO ORDER
ROLL CALL
INVOCATION
PLEDGE OF ALLEGIANCE

II. APPROVAL OF AGENDA & MINUTES

AGENDA: Regular Meeting of September 18, 2023

III. DELEGATIONS

IV. PRESENTATIONS

1. Delores McLaughlin - Alliance for Neighborhood Restoration (ANR) – Briefing
2. Sherry Amos – Summer Reading Literacy Program – Briefing
3. Tiffany Boyer – Coordinator of Dr. Joe Lee Smith Community Center - Briefing

V. ACTION ITEMS

1. Approve Resolution # 23-574, BAF #23-121-T to Correct payroll account imbalances.
2. Review and Approve Proposed FY 2024 Budget.
3. Approve Memorandum Of Understanding (MOU) with Bezos Academy.
4. Review and decide whether to approve Sherry Amos request for funds for summer reading literacy program.

VI. ATTORNEY'S REPORT

VII. UPDATES AND STAFF REPORTS

VIII. NEXT MEETING DATE

The next meeting of the Diamond Square Community Redevelopment Agency is October 16, 2023, at 6:00 PM. The meeting will be held at the City of Cocoa, City Hall, Council Chambers, located at 65 Stone Street, Cocoa, FL.

IX. ADJOURNMENT

NOTICE TO PUBLIC:

This is a public meeting. All interested parties may attend. The facility wherein this meeting will be held is accessible to the physically handicapped. Please be advised that more than one member of the City Council may attend. Pursuant to Section 286.0105, Florida Statutes, the City hereby advises the public that: if a person decides to appeal any decision made by this board with respect to any matter considered at its meeting or hearing, that person will need a record of the proceedings and for such purpose, affected persons may need to insure that a verbatim record of the proceedings is made, and such record shall include the testimony and evidence upon which the appeal is to be based. This notice does not constitute consent by the City for the introduction or admission into evidence of otherwise inadmissible or irrelevant evidence, nor does it authorize challenges or appeals otherwise allowed by law. This agenda is posted on the Municipal Bulletin Board and at the Central Brevard Library and Reference Center in Cocoa for public review.



Legislation Details (With Text)

File #: 23-567 **Version:** 1 **Name:**
Type: Awards/Presentations **Status:** Agenda Ready
File created: 9/13/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Presentation from Delores McLaughlin, Executive Director of Alliance for Neighborhood Restoration (ANR). Briefing on upcoming program highlights.
Sponsors:
Indexes:
Code sections:
Attachments: [DSCRA 9.18 - EXHIBIT B.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 13, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director
Requested Action:
Presentation from Delores McLaughlin, Executive Director of Alliance for Neighborhood Restoration (ANR). Briefing on upcoming program highlights.

BACKGROUND:

Delores McLaughlin is briefing the Board on upcoming program highlights from ANR.

BUDGETARY IMPACT:

None.

PREVIOUS ACTION:

N/A.

RECOMMENDED MOTION:

Presentation from Delores McLaughlin, Executive Director of Alliance for Neighborhood Restoration (ANR). Briefing on upcoming program highlights.

EXHIBIT B:

ANR Briefing

**Placeholder for PowerPoint
Slides**



Legislation Details (With Text)

File #: 23-568 **Version:** 1 **Name:**
Type: Awards/Presentations **Status:** Agenda Ready
File created: 9/13/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Sherry Amos is presenting a refresher about her summer reading literacy program...End
Sponsors:
Indexes:
Code sections:
Attachments: [DSCRA 9.18 - EXHIBIT C.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 13, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director
Requested Action:
Sherry Amos is presenting a refresher about her summer reading literacy program.

BACKGROUND:

Several months ago, Sherry Amos, presented information about her summer reading literacy program and asked the Board for financial assistance.

She was asked by the Board to complete the background paperwork and submit for review to the Community Services Director, Charlene Neuterman.

She has completed this process and has returned to discuss options with the Board.

BUDGETARY IMPACT:

None (at this time).

PREVIOUS ACTION:

The Board heard Ms. Amos previously speak about her program and asked her to return after she had completed the background paperwork.

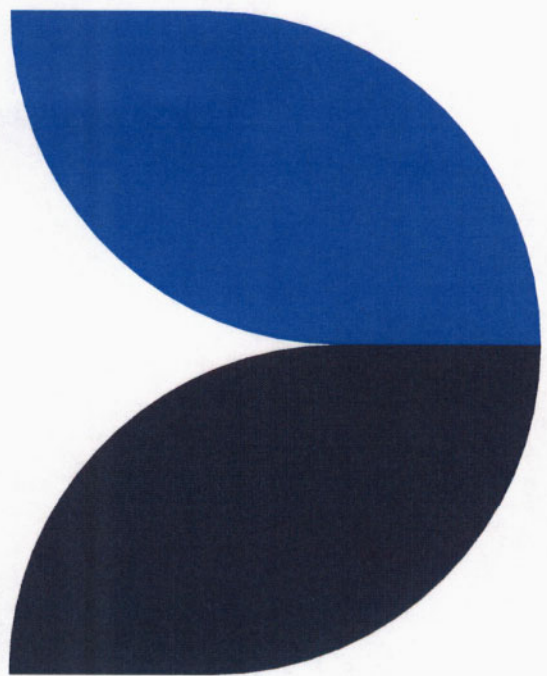
RECOMMENDED MOTION:

Sherry Amos is presenting a refresher about her summer reading literacy program.

EXHIBIT C:

Sherry Amos Briefing

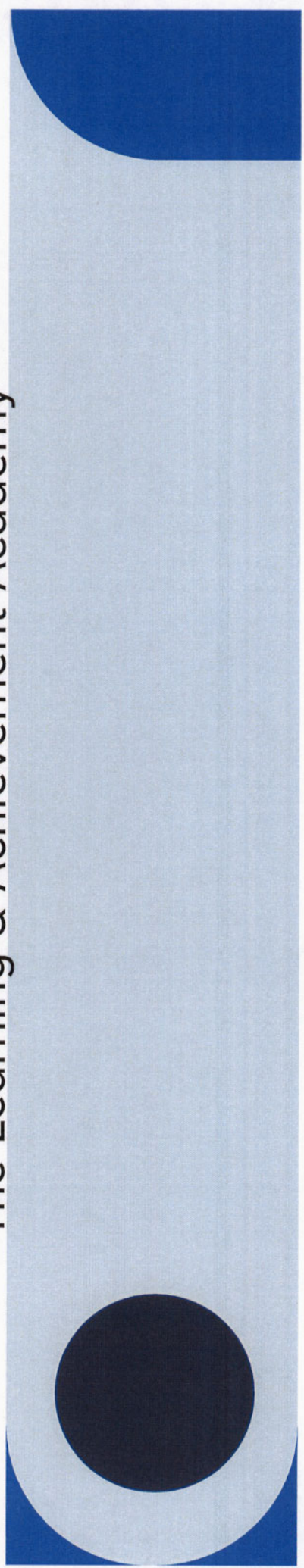
Placeholder for PowerPoint
Slides



2023 Summer Enrichment Program

With

The Learning & Achievement Academy





WELCOME!

Attendees will:

- Understand the goals and program requirements of the 2023 Summer Enrichment Program (JUN-23)
- Understand grant application and administration guidelines

“

Education is the most powerful
weapon which you can use to
change the world.

”

Nelson Mandela

Overview & Background

During the summer months, many disadvantaged children tend to fall behind academically, suffering what is referred to as the "Summer Slide." 2/3 students experience a learning loss...

9/16/2023



LEARNING & ACHIEVEMENT ACADEMY
1040 W. King St
Cocoa FL 32922
321-594-6115
www.LAACHIEVEMENT.ORG

K-8 THRU 7TH GRADE

SCHOOL PROFILE

Learning & Achievement Academy (LA) started as an all-boys Bible based learning center academy, serving Kindergarten through 6th grade boys. Located in Central Brevard County's "Space Coast", we have access to the surrounding communities of Rockledge, Viera, Melbourne, Palm Bay, Merritt Island, Cocoa, Port St. John, Starke, Canaveral Groves, and Titusville.

The idea for LA Academy was birthed in the summer of 2011 to combat the staggering statistics which show that a large percentage of boys are routinely diagnosed with some type of learning disability. They are often placed in special education programs that do not provide the same academic and social curriculum found in the general education classes. As a result, they tend to produce a change in lowering a child's self-worth, personal goals, or achievement.

At LA Academy we have found that most students can become good to excellent students within small class sizes, a rigorous curriculum, and an environment that has high expectations of them. We have grown to now become a multi-inclusive academy, and we provide an environment that draws upon the natural talents and strengths of all of our students, such as creativity, perseverance, competence, and camaraderie to enhance their learning experience.

FACULTY

All LA Academy classroom teachers hold bachelor's degrees or equivalent levels of classroom experience and training certifications.

UNIQUE PROGRAM AND SERVICES

LA Academy operates in a multi-level teaching environment that is tailored more toward the students' current skill and academic level, as opposed to just their grade level upon entering the academy.

LA Academy provides the unique benefit of extremely small class sizes ratios and teaching techniques that adapt to the three main types of learning: auditory, visual, and kinesthetic.

LA Academy offers community-based learning centers which include Self-Esteem and Life Skills Education, Mentoring, Journaling and Writing Therapy, and Cultural Arts. Our faculty works with LA Academy students to develop their creative skills through a variety of methods that build self-confidence and performing skills.

MISSION STATEMENT

The mission of Learning & Achievement Academy is to prevent and provide early intervention of reading difficulties of students. Advance their academic excellence, through unique reading, phonics, fine arts, and other non-traditional teaching programs that develop the "whole child" (spirit, soul and body).

OUR COMMITMENT

Our curriculum, small class sizes and high expectations help to make good students into excellent students, and poor to fair students into good students. Let us help your child(ren) excel today.

DIRECTOR

Mrs. Sherry Lyons-Amos, M.Ed.

LEARNING & ACHIEVEMENT ACADEMY

1040 West King Street
Cocoa, FL 32922
PHONE: 321-594-6115

SCHOLARSHIPS AVAILABLE

Grant Initiative Goals

- JUN-23 is designed to counter the “Summer Slide” achievement gap by combining continued education during the Summer with stimulation of off-site student activities to provide enrichment and entertainment to underprivileged youths.
- Learn what processes work to keep improving students regularly

THE ACHIEVEMENT GAP

The achievement gap between children from high- and low-income families is roughly **30 TO 40 PERCENT LARGER** among children born in 2001 than among those born twenty-five years earlier.¹

“... EDUCATION IS A WAY OUT OF POVERTY — BUT POVERTY IS ALSO A HINDRANCE TO EDUCATION.”



Parents with the means invest more time and money than ever before in their children while lower-income families, which are now more likely to be headed by a single parent, are increasingly stretched for time and resources.²

What Happens to Children DURING THE SUMMER?



During the summer months, disadvantaged children tread water at best or even fall behind, it's what we call

“SUMMER SLIDE” while better off children build their skills steadily over the summer months.



SUMMER LEARNING LOSS accounts for about two-thirds of the ninth grade achievement gap in reading.³

How Summer Learning Can Help CLOSE the Achievement Gap.



SUMMER LEARNING PROGRAMS TARGETED TO LOW-INCOME STUDENTS can help close the achievement gap that has been attributed, at least in part, to cumulative learning loss during the summers and that has been shown to be steeper for low-income students than for others.

Longitudinal studies indicate that the effects of summer learning programs endure for at least two years after participation.⁴

LOW-INCOME YOUTH LACK OPTIONS IN THE SUMMER, and sometimes come to the library because it's air conditioned.⁴



FOR EVERY ONE LINE OF PRINT READ BY LOW-INCOME CHILDREN, MIDDLE-INCOME CHILDREN READ THREE.⁵

1. New York Times, Nov. 9, 2012. Educational Gap Grows Between Rich and Poor. Richard E. Lee, Jr., Research, Stanford University. “White Opportunity? Rising Inequality and the Unsettling Gap Between Rich and Poor.” 2. Brookings Institution, “The Summer Slide: How the Achievement Gap Widens During the Summer Months.” 3. U.S. Department of Education, “The Summer Slide: How the Achievement Gap Widens During the Summer Months.” 4. U.S. Department of Education, “The Summer Slide: How the Achievement Gap Widens During the Summer Months.” 5. U.S. Department of Education, “The Summer Slide: How the Achievement Gap Widens During the Summer Months.”

JUN-23 Goals

- Manage Time and Stay organized
- Improve upon areas of deficiency in mathematics and/or reading
- Encourage the development of positive peer relationships
- provide an alternative activity to the otherwise underprivileged youths which has a positive impact
- Provide at least 2 hot meals per day for all students attending the JUN-23

Enrollment and Eligible Parties

- Current Academy Enrollments will receive priority placement.
- The JUN-23 is open to all students enrolled in grades K-8 for the 2022-2023 school year who wish to attend.
- Disadvantaged and low-income families are encouraged to also enroll as there are options to apply for available cost assistance.

9/16/2023



The poster is for the Learning & Achievement Academy Summer 2023 Youth Summer Enrichment program. It features a central graphic of a large pencil with children's faces inside its body. To the left, the title 'Learning & Achievement Academy' is written in a playful, rounded font, with 'Youth Summer Enrichment Summer 2023' above it. To the right, a list of benefits under the heading 'Why Choose Us?' includes: 'we offer fun seasonal educational activities', 'proven, effective curricula boost development', 'emotional learning that lasts a lifetime', 'a nutrition food program for healthy field trips, arts & crafts and more!!!', and 'ALL INCLUSIVE RATE \$150.00 per week for a single participant'. Below this, the dates 'June 12th - 30th' and the target audience 'any youth in grades k-8th' are listed. At the bottom, contact information for 'mrs. sherry amos' is provided, including the phone number '321-594-6115' and the website 'www.prosperityvill.com'. The poster is decorated with various educational icons like a globe, books, and a magnifying glass.

Learning & Achievement Academy
Youth Summer Enrichment Summer 2023

Why Choose Us?

- ✓ we offer fun seasonal educational activities
- ✓ proven, effective curricula boost development
- ✓ emotional learning that lasts a lifetime
- ✓ a nutrition food program for healthy field trips, arts & crafts and more!!!

ALL INCLUSIVE RATE
\$150.00 per week for a single participant

June 12th - 30th
any youth in grades k-8th

CALL FOR MORE INFO
mrs. sherry amos
321-594-6115
www.prosperityvill.com

Made with PosterMyWall.com

Daily Schedule

M 9A – 12P Academic Instruction Lunch 12p -12:30P followed by an OFF- SITE field trip activity until 3pm.	T 9A – 12P Academic Instruction Lunch 12p -12:30P followed by an ON- SITE activity designed to encourage creativity until 3pm.	W 9A – 12P Academic Instruction Lunch 12p -12:30P followed by an OFF- SITE field trip activity until 3pm	R 9A – 12P Academic Instruction Lunch 12p -12:30P followed by an ON- SITE activity designed to promote student health/wellness until 3pm.	F 9A – 12P Academic Instruction Lunch 12p -12:30P followed by an OFF- SITE specialized field trip activity. Designed for maximum student engagement (end times vary)
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BUDGET SNAPSHOT

Exhibit B1 Summer Enrichment Program INCOME/EXPENSE REPORT

Organization Name: **Learning & Achievement Group, Inc.**
Fiscal Period: **5/1/2023 to 6/30/2023**

INCOME	AMOUNT	EXPENSES	AMOUNT
Support		Salaries and wages	\$ 21,648
Govt. grants	\$ 0	Insurance and Benefits	\$ 675
Foundations	\$ 0	Professional fees	\$ 400
Corporations	\$ 0	Fundraising costs	\$ 0
United Way	\$ 0	Travel	\$ 0
Individual contributions	\$ 775	Equipment	\$ 0
Fundraising efforts	\$ 0	Maintenance & Cleaning	\$ 300
Membership income	\$ 0	Telephone /Utilities/ Internet	\$ 980
In-Kind support	\$ 0	Consumables & Office Supplies	\$ 4,800
Investment income	\$ 0	Rent	\$ 2,340
Other (specify)		In-Kind expenses	\$ 0
Transfer from Savings	\$ 30,368	Other (program specific)	
	\$	Advertising & Marketing	\$ 828
Revenue		Curriculum / Supplies	\$ 1,756
Govt. contracts	\$ 0	Food Program (Brkfst/Lunch)	\$ 5,381
Earned Income	\$ 0	Field Trips	\$ 5,970
Scholarship Tuition	\$ 0	Transportation (Gasoline)	\$ 1,081
Paid Tuition	\$ 0		
TOTAL INCOME	\$ 31,143	TOTAL EXPENSES	\$ 46,159

FUNDING REQUEST FROM DIAMOND SQUARE GRANT: \$15,016

Evaluation

I-Ready Diagnostic Software

JUN-23 uses the I-Ready program's Diagnostic testing tool to get a baseline of the participants math and reading capabilities.

Specialized lessons are designed to help improve upon areas of poor performance.

Teachers can track student progress via the I-Ready program and intervene to alter the lessons and growth testing as needed.

Comparative Testing Results

Participants take a secondary diagnostic at the conclusion of the program.

The results can show teachers and educators how much improvement participants made based on a comparison to the initial diagnostic scores.

Questions?

Contacts

Principal/Program and Academy Director

Mrs. Sherry Amos

sherryamos@laboysacademy.org

321-594-6115

Administrative Assistant

Joshua Rivers

Jrivers@laboysacademy.org

The Team



Sherry Amos
Principal/Director



Calvin Amos
Chief Executive Officer



Elsy Giron
Teaching Assistant



Gwendolyn Hall
Teacher



Deylin Melendez
Teacher



Rushie Jackson
Teacher



Brentin Carter
Teaching Assistant



Micah Lyons
Teaching Assistant

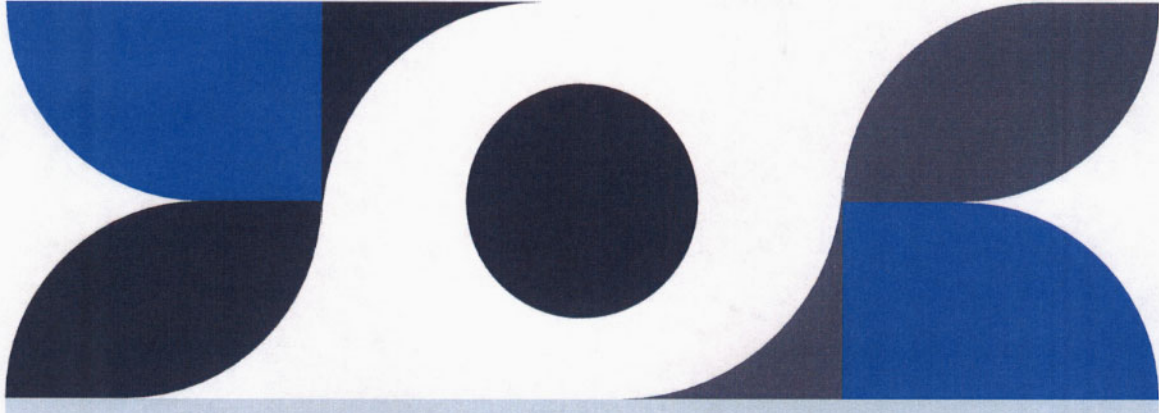
Additional Team Members

Joshua Rivers
Administration

**Winifred
Hagans**
Teaching Assistant

**Greg Daniels
& Darlene
Hinson**
Food Operations

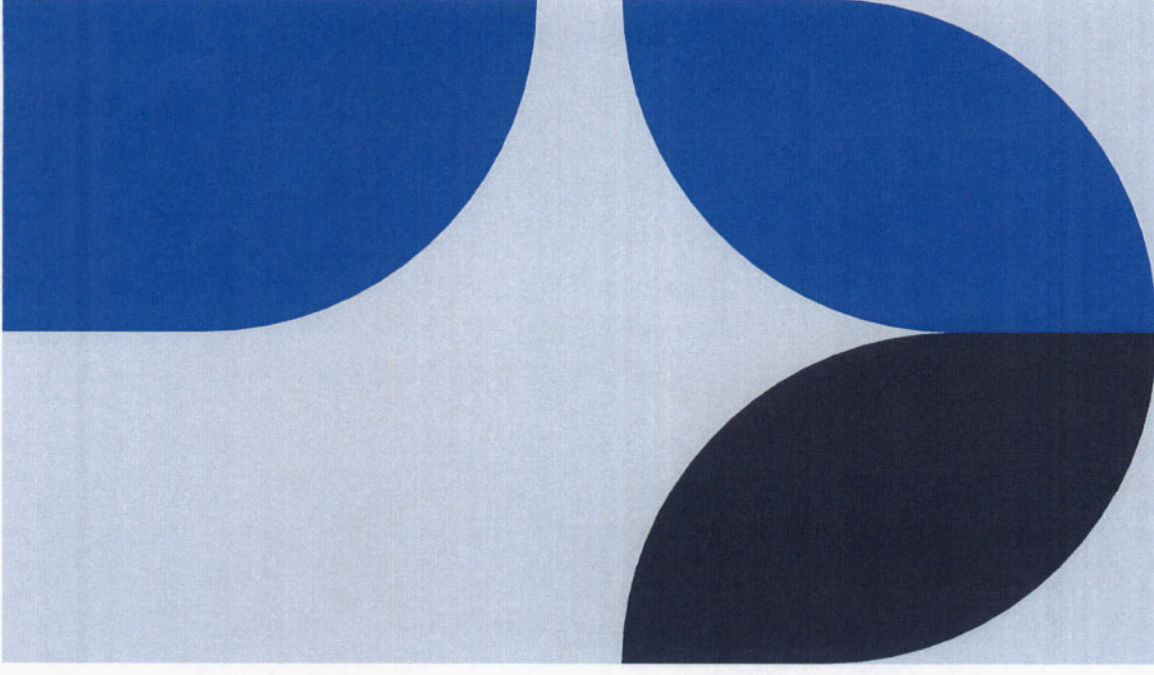
Jerry Davis
Custodial
Maintenance





Thank you!

We appreciate your choice to help us
fund the 2023 Summer Enrichment
Program with the Learning and
Achievement Academy.





Legislation Details (With Text)

File #: 23-569 **Version:** 1 **Name:**
Type: Awards/Presentations **Status:** Agenda Ready
File created: 9/13/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Tiffany Boyers is the Coordinator for the Dr. Joe Lee Smith Community Center and she is presenting an introduction and program highlights showing the accomplishments and plans for future expansion at the Center...End

Sponsors:

Indexes:

Code sections:

Attachments: [DSCRA 9.18 - EXHIBIT D.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 13, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director
Requested Action:

Tiffany Boyers is the Coordinator for the Dr. Joe Lee Smith Community Center and she is presenting an introduction and program highlights showing the accomplishments and plans for future expansion at the Center.

BACKGROUND:

Tiffany Boyers is the Coordinator for the Dr. Joe Lee Smith Community Center and she is presenting an introduction and program highlights showing the accomplishments and plans for future expansion at the Center.

BUDGETARY IMPACT:

None.

PREVIOUS ACTION:

N/A.

RECOMMENDED MOTION:

Tiffany Boyers is the Coordinator for the Dr. Joe Lee Smith Community Center and she is presenting an introduction and program highlights showing the accomplishments and plans for future expansion

at the Center.

EXHIBIT D:

Tiffany Boyer Briefing

Placeholder for PowerPoint
Slides



Legislation Details (With Text)

File #: 23-574 **Version:** 1 **Name:**
Type: Agenda **Status:** Agenda Ready
File created: 9/14/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Request Agency approval of a Resolution Amending the FY 2023 Budget, BAF # 23-121-T, in the amount of \$1,177 to cover end-of-year account imbalances resulting from the switchover from one Redevelopment Coordinator to another...End

Sponsors:

Indexes:

Code sections:

Attachments: [Resolution 23-574.pdf](#)
[BAF-23-121-T-DS-Payroll Transfers \(09-18-23\) Agenda 23-574.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 14, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director

Requested Action:

Request Agency approval of a Resolution Amending the FY 2023 Budget, BAF # 23-121-T, in the amount of \$1,177 to cover end-of-year account imbalances resulting from the switchover from one Redevelopment Coordinator to another.

BACKGROUND:

Staff changeover incurred additional charges not previously adjusted for that were discovered when doing end-of-year account cleanup processes. This adjustment corrects that minor imbalance.

BUDGETARY IMPACT:

Budgeted No
If not budgeted, is amendment/transfer attached? Yes

Amount Requested \$1,177

Account Number 111-3230-559.12-00 (\$430)
Account Name Regular Salary & Wages

Account Number 111-3230-559.22-00 (\$390)

Account Name	<u>Retirement contributions</u>
Account Number	<u>111-3230-559.23-04 (\$333)</u>
Account Name	<u>Medical Insurance</u>
Account Number	<u>111-3230-559.23-07 (\$18)</u>
Account Name	<u>Dental Insurance</u>
Account Number	<u>111-3230-559.23-08 (\$6)</u>
Account Name	<u>Vision Insurance</u>
Source of Funds:	Transfer Acct #:
	<u>111-3230-559.34-00</u>
	<u>Contract Services</u>

PREVIOUS ACTION:

N/A.

RECOMMENDED MOTION:

Request Agency approval of a Resolution Amending the FY 2023 Budget, BAF # 23-121-T, in the amount of \$1,177 to cover end-of-year account imbalances resulting from the switchover from one Redevelopment Coordinator to another.

RESOLUTION NO. 2023-574

**A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF COCOA,
FLORIDA, AMENDING THE CITY OF COCOA BUDGET FOR
FISCAL YEAR 2023; PROVIDING FOR THE REPEAL OF PRIOR
INCONSISTENT RESOLUTIONS; AND PROVIDING AN EFFECTIVE DATE.**

WHEREAS, the City Council of the City of Cocoa adopted the final budget for the fiscal year commencing on October 1, 2022, and ending on September 30, 2023, at a Regular meeting held on September 27, 2022; and

WHEREAS, in accordance with Article XII, Section 5 of the City of Cocoa Charter, whereby the Council may, at any time by resolution, transfer any unused and unencumbered appropriation or portion thereof from one office or department to another; and

WHEREAS, the City Council deems it to be in the best interest of the City of Cocoa to amend its budget as provided in this resolution.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF COCOA,
as follows:

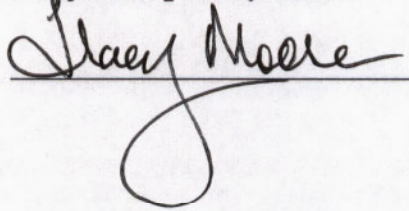
SECTION 1. The 2022-2023 fiscal year budget shall be amended as detailed in the attached sheets.

SECTION 2. All prior resolutions or prior resolutions inconsistent with this resolution are hereby repealed to the extent of the conflict.

SECTION 3. This resolution shall become effective immediately upon its adoption by the City Council of the City of Cocoa, Florida.

ADOPTED by the Diamond Square Agency of the City of Cocoa, Florida, in a Regular meeting assembled on the 18th day of September, 2023.

Tracy Moore, Chairperson



ATTEST:



Charlene Neuterman, Director,
Community Services Department

City of Cocoa

Resolution No. 2023-574

Page 1 of 1



City of Cocoa Budget Adjustment Form FY 2023 - 23-121-T

SELECT ADJUSTMENT TYPE: BUDGET TRANSFER		REQUESTING DEPARTMENT #: 3230		DATE PREPARED: 09/12/23	
FROM ACCOUNT(S)					
ADJUSTMENT AMOUNT	ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	AMENDED BUDGET
(\$ 1,177)	111-3230-559.34-00		Contract Services	\$ 49,500	\$ 59,500
\$ 0				\$ 0	\$ 0
\$ 0				\$ 0	\$ 0
\$ 0				\$ 0	\$ 0
\$ 0				\$ 0	\$ 0
\$ 0				\$ 0	\$ 0
TOTAL				\$ 0	\$ 0
(\$ 1,177)					
TO ACCOUNT(S)					
ADJUSTMENT AMOUNT	ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	AMENDED BUDGET
\$ 430	111-3230-559.12-00		Regular Salary & Wages	\$ 20,717	\$ 20,717
\$ 390	111-3230-559.22-00		Retirement contributions	\$ 2,267	\$ 2,267
\$ 333	111-3230-559.23-04		Medical Insurance	\$ 4,339	\$ 4,339
\$ 18	111-3230-559.23-07		Dental Insurance	\$ 149	\$ 149
\$ 6	111-3230-559.23-08		Vision Insurance	\$ 31	\$ 31
\$ 0				\$ 0	\$ 0
TOTAL				\$ 0	\$ 0
(\$ 1,177)					
REASON/JUSTIFICATION FOR ADJUSTMENT:					
Upon end-of-year review of accounts, it was found that several accounts had minor imbalances, due to earlier calculation errors, which are corrected by this form. This occurred as part of the transition from one Redevelopment Coordinator to another with a slightly different compensation calculation having been earlier estimated, which is now, adjusted, for accuracy. Agenda 23-574					
COUNCIL/BOARD APPROVAL REQUIRED? YES NO					
DATE APPROVED: 09/18/23 RESOLUTION #:					
City Council approval is needed for all transfers greater than \$75,000 and transfers between Departments / Funds. All CRA adjustments are required to go through their respective boards.					
9/12/23 Ryan Browne		Digitally signed by Ryan Browne Date: 2023.09.12 16:28:00 -0400		Digitally signed by Dave Radford Date: 2023.09.13 13:45:10 -0400	
Date	Requestor's Signature	Date	Finance Approval Signature	Date	Finance Director's Signature
9/12/23	Charlene Neuterman		Lora Howell		Lora Howell
	Digitally signed by Charlene Neuterman Date: 2023.09.12 19:22:20 -0400		Digitally signed by Lora Howell Date: 2023.09.15 10:40:41 -0400		Digitally signed by Lora Howell Date: 2023.09.15 10:40:41 -0400
Date	Department Director's Signature	Date	Deputy Fin. Director's Signature	Date	City Manager's Signature
FINANCE USE ONLY:					
Date Entered:		Entered By:		Group #:	
Approved 07/13					
Revised eform 8/3/23 - IT					



Legislation Details (With Text)

File #: 23-575 **Version:** 1 **Name:**
Type: Agenda **Status:** Agenda Ready
File created: 9/14/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Request Agency approval of the Proposed Budget for Fiscal Year 2024...End
Sponsors:
Indexes:
Code sections:
Attachments: [Diamond Square FY24 Operating and Capital Budget.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 14, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director
Requested Action:
Request Agency approval of the Proposed Budget for Fiscal Year 2024.

BACKGROUND:

Staff requests approval of the Proposed Budget for Fiscal Year 2024.

BUDGETARY IMPACT:

Proposed FY24 Budget.

PREVIOUS ACTION:

Agency Members previously approved budgetary items for the FY24 budget.

RECOMMENDED MOTION:

Request Agency approval of the Proposed Budget for Fiscal Year 2024.

CRA DIAMOND SQUARE 626

CRA ADMIN/OPERATIONS

PERSONAL SERVICES

111-3230-559.11-00 EXECUTIVE SALARIES	0	0	0	0	0	0	0	0	0
111-3230-559.12-00 REGULAR SALARIES & WAGES	20,640	20,717	77-	0	19,925	22,369	19,539		

LEVEL TEXT

AB AMOUNT POSTED BY PAYROLL BUDGET MODULE
...1 REDEVELOPMENT COORDINATOR (40%)
YEAR-END ACCRUALS (7 DAYS)

TEXT AMT

19,305
1,335
20,640

111-3230-559.12-10 SALARY ADJUSTMENT
111-3230-559.12-12 ACCRUAL PAYOUTS
111-3230-559.14-00 OVERTIME

0	0	0	0	0	0	0	0	0	0
0	0	0	0	458	0	0	72		
0	0	0	0	0	0	0	0		

LEVEL TEXT

AB AMOUNT POSTED BY PAYROLL BUDGET MODULE
YEAR-END ACCRUALS - 11 DAYS
111-3230-559.15-00 SPECIAL PAY

TEXT AMT

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

LEVEL TEXT

AB AMOUNT POSTED BY PAYROLL BUDGET MODULE
111-3230-559.21-00 FICA TAXES

TEXT AMT

1,664	1,660	4	0	1,539	1,748	1,581			
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LEVEL TEXT

AB AMOUNT POSTED BY PAYROLL BUDGET MODULE
YEAR-END ACCRUALS (7 DAYS)

TEXT AMT

1,551
113
1,664

111-3230-559.22-00 RETIREMENT CONTRIBUTIONS

2,506	2,267	239	11	2,489	2,931	2,694			
-------	-------	-----	----	-------	-------	-------	--	--	--

LEVEL TEXT

AB AMOUNT POSTED BY PAYROLL BUDGET MODULE
YEAR-END ACCRUALS (7 DAYS)
HUMAN RESOURCES
FRS CONTRIBUTION INCREASE 1.66%

TEXT AMT

2,299
168
39
2,506

111-3230-559.23-00 INSURANCES

0	71	71-	100-	54	80	409			
---	----	-----	------	----	----	-----	--	--	--

LEVEL TEXT

AB AMOUNT POSTED BY PAYROLL BUDGET MODULE
...GROUP LIFE
OPT OUT (1) SPLIT
111-3230-559.23-04 MEDICAL

TEXT AMT

9,250	4,339	4,911	113	4,376	4,794	4,038			
-------	-------	-------	-----	-------	-------	-------	--	--	--

LEVEL TEXT

AB AMOUNT POSTED BY PAYROLL BUDGET MODULE
HUMAN RESOURCES
FY24 INSURANCE INCREASE 3.9%

TEXT AMT

8,903
347
9,250

LEVEL		FY 2024 ADOPTED	FY 2023 ORIGINAL BUDGET	FY 2023 TO FY 2024 \$ OF CHANGE	FY 2023 TO FY 2024 % OF CHANGE	FY 2023 Y-T-D ACTUALS	FY 2022 LAST YEARS ACTUALS	FY 2021 2 YEAR'S AGO ACTUALS
111-3230-559.23-07	DENTAL INSURANCE	315	149	166	111	156	183	0
TEXT								
AB	AMOUNT POSTED BY PAYROLL BUDGET MODULE		300					
HUMAN RESOURCES								
FY24 INSURANCE INCREASE 5%			15					
			315					
111-3230-559.23-08	VISION INSURANCE	50	31	19	61	33	37	0
TEXT								
AB	AMOUNT POSTED BY PAYROLL BUDGET MODULE		50					
			50					
111-3230-559.23-09	LONG TERM DISABILITY	0	72	72-	100-	54	79	0
TEXT								
AB	AMOUNT POSTED BY PAYROLL BUDGET MODULE							
111-3230-559.23-10	FSA HEALTH	0	0	0	0	0	0	0
111-3230-559.23-11	FSA CHILDCARE	0	0	0	0	0	0	0
111-3230-559.24-00	WORKER'S COMPENSATION	56	61	5-	8-	32	57	59
TEXT								
AB	AMOUNT POSTED BY PAYROLL BUDGET MODULE		30					
YEAR END ACCRUALS (7 DAYS)			2					
AMOUNT ALLOCATED TO 520 FUND			24					
			56					
111-3230-559.27-00	BENEFIT OFFSET	960	960	0	0	720	1,025	1,117
TEXT								
AB	AMOUNT POSTED BY PAYROLL BUDGET MODULE		960					
			960					
PERSONAL SERVICES		35,441	30,327	5,114	17	29,836	33,303	29,509
OPERATING								
111-3230-559.31-00	PROFESSIONAL SERVICES	525,000	0	525,000	0	0	25,000	28,050
TEXT								
AB	CRA PLAN UPDATE CONSULTANT		50,000					
CS21MB NEW HOME CONSTRUCTION ASSISTANCE			475,000					
			525,000					
111-3230-559.31-01	LEGAL EXPENSES	4,000	3,000	1,000	33	3,349	1,958	1,581
TEXT								
AB	LEGAL EXPENSES FOR AGENCY MEETINGS		4,000					
			4,000					
111-3230-559.32-00	ACCOUNTING & AUDITING	3,000	3,000	0	0	3,000	3,000	5,000
TEXT								
AB	AMOUNT POSTED BY PAYROLL BUDGET MODULE							

	FY 2024 ADOPTED	FY 2023 ORIGINAL BUDGET	FY 2023 TO FY 2024 \$ OF CHANGE	FY 2023 TO FY 2024 % OF CHANGE	FY 2023 Y-T-D ACTUALS	FY 2022 LAST YEARS ACTUALS	FY 2021 2 YEAR'S AGO ACTUALS
AB PRINTING AND BINDING							
			250				
			250				
111-3230-559.48-00 PROMOTIONAL ACTIVITIES	400	500	100-	20-	267	557	0
LEVEL TEXT		TEXT AMT					
AB DIAMOND SQUARE PROMOTIONAL MATERIAL			400				
			400				
111-3230-559.49-00 OTHER CHARGES & OBLIG.	0	400	400-	100-	351	400	0
111-3230-559.49-02 ADVERTISING	300	0	300	0	0	0	0
LEVEL TEXT		TEXT AMT					
AB LEGAL ADS			300				
			300				
111-3230-559.51-00 OFFICE SUPPLIES	0	0	0	0	0	0	0
111-3230-559.52-00 OPERATING SUPPLIES	0	0	0	0	0	8,510	0
111-3230-559.52-30 FUEL OIL & LUBRICANTS	0	0	0	0	0	0	0
111-3230-559.54-00 MEMBERSHIP/PUBLICATIONS	600	675	75-	11-	511	675	545
LEVEL TEXT		TEXT AMT					
AB MEMBERSHIP DUES - DEO			200				
			400				
			600				
111-3230-559.55-00 TRAINING	3,115	3,115	0	0	3,115	1,780	0
LEVEL TEXT		TEXT AMT					
AB DS CRA MEMBERS TO ATTEND TRAINING/CONFERENCE			3,115				
MEMBERS (7) TO ATTEND FRA CONFERENCE (\$445 * 7)							
BOARD TRAINING/TOURS & CONFERENCE FEES							
...REGISTRATIONS FOR FRA CONF							
...PER THE INTERLOCAL AGREEMENT, NO COUNTY TIF							
...FUNDS ARE USED FOR TRAVEL - SEC. 6 OF THE							
...AGREEMENT							
			3,115				
111-3230-559.56-15 IT-RELATED OPERATING EXP	0	0	0	0	12,292	0	0
* OPERATING	598,476	214,522	383,954	179	72,204	51,162	47,669
CAPITAL							
111-3230-559.61-00 LAND	0	0	0	0	0	0	0
111-3230-559.63-00 INFRASTRUCTURE	60,000	100,000	40,000-	40-	0	0	0
LEVEL TEXT		TEXT AMT					
AB BUS STOPS CONCRETE PAD							
			60,000				
			60,000				

LEVEL	AB	TEXT	FY 2024 ADOPTED	FY 2023 ORIGINAL BUDGET	FY 2023 TO FY 2024 \$ OF CHANGE	FY 2023 TO FY 2024 % OF CHANGE	FY 2023 Y-T-D ACTUALS	FY 2022 LAST YEARS ACTUALS	FY 2021 2 YEAR'S AGO ACTUALS
111-3230-559.63-07		IMPROVE OTHER THAN BLDG	0	0	0	0	0	0	0
111-3230-559.64-00		MACHINERY & EQUIPMENT	0	50,000	50,000-	100-	0	0	0
111-3230-559.64-15		IT HARDWARE	0	0	0	0	0	0	0
111-3230-559.65-00		CONSTRUCTION IN PROGRESS	0	0	0	0	0	0	0
*		CAPITAL	60,000	150,000	90,000-	60-	0	0	0
GRANTS & AIDS									
111-3230-559.82-00		AID PRIVATE ORGANIZATION	0	0	0	0	0	0	0
111-3230-559.83-00		OTHER GRANTS & AIDS	191,000	196,000	5,000-	3-	19,407	22,917	10,529
LEVEL	TEXT	TEXT AMT							
AB	COMMERCIAL FACADE GRANTS	191,000							
	RESIDENTIAL LANDSCAPE GRANTS								
	RESIDENTIAL PAINT PROGRAM								
	BREVARD COUNTY PARKS & REC SCHOLARSHIPS								
	FIRST TIME HOMEBUYER ASSISTANCE	191,000							
111-3230-559.83-11		UPSTART COCOA PROGRAM	10,000	10,000	0	0	0	0	0
LEVEL	TEXT	TEXT AMT							
AB	DS22UP UPSTART DIAMOND SQUARE - WEVENTURE TBD	10,000							
	DS22UP START DIAMOND SQUARE - STRATEGIC CONS.								
	...2/3 LOAN FORGIVENESS (YEAR 3 OF 3) PER UPSTART								
	DIAMOND SQUARE PROGRAM CONTRACT	10,000							
*		GRANTS & AIDS	201,000	206,000	5,000-	2-	19,407	22,917	10,529
OTHER USES									
111-3230-581.91-01		TO GENERAL FUND (001)	0	0	0	0	0	0	0
*		OTHER USES	0	0	0	0	0	0	0
**		CRA ADMIN/OPERATIONS	894,917	600,849	294,068	49	121,447	107,382	87,707
***		COMMUNITY DEVELOPMENT	894,917	600,849	294,068	49	121,447	107,382	87,707
****		CRA DIAMOND SQUARE 626	894,917	600,849	294,068	49	121,447	107,382	87,707
			894,917	600,849	294,068	49	121,447	107,382	87,707



Legislation Details (With Text)

File #: 23-576 **Version:** 1 **Name:**
Type: Agenda **Status:** Agenda Ready
File created: 9/14/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Request Agency approval of a Memorandum Of Understanding (MOU) for the Bezos Academy between the City of Cocoa, the Diamond Square CRA, Space Coast Health Foundation, Brevard Health Alliance, and the Bezos Foundation to establish a program in the Diamond Square CRA...End

Sponsors:

Indexes:

Code sections:

Attachments: [Bezoes Academy - MOU - saved 09.12.23.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 14, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director
Requested Action:

Request Agency approval of a Memorandum Of Understanding (MOU) for the Bezos Academy between the City of Cocoa, the Diamond Square CRA, Space Coast Health Foundation, Brevard Health Alliance, and the Bezos Foundation to establish a program in the Diamond Square CRA.

BACKGROUND:

In alignment with several of the goals and objectives of the Diamond Square Community Redevelopment Agency (CRA) Updated Plan this Memorandum Of Understanding (MOU) is presented as the beginning of an ideal public-private partnership between the City of Cocoa and the Diamond Square CRA partnering with the Bezos Academy, the developer of Montessori schools for pre-school age students.

Along with Education partners, the Health partners allow for a more comprehensive coverage of needs to ensure higher quality performance and superior outcomes.

This truly collaborative approach among these non-profit public and private partners allows for development that would not be possible without such a partnership.

BUDGETARY IMPACT:

None.

PREVIOUS ACTION:

N/A.

RECOMMENDED MOTION:

Request Agency approval of a Memorandum Of Understanding (MOU) for the Bezos Academy between the City of Cocoa, the Diamond Square CRA, Space Coast Health Foundation, Brevard Health Alliance, and the Bezos Foundation to establish a program in the Diamond Square CRA.

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding ("MOU") is entered into by and between the City of Cocoa and the Diamond Square Redevelopment Agency (collectively, "**Hosts**"), Day 1 Academies, dba Bezos Academy, a Delaware nonprofit nonstock corporation ("**Bezos Academy**"), the Brevard Health Alliance, and the Space Coast Health Foundation (collectively, the "**Health Nonprofits**") (each, a "**Party**", and collectively, the "**Parties**").

Background and Recitals

Bezos Academy is a nonprofit that provides high-quality, tuition-free preschool education for children three (3) to five (5) years of age. Bezos Academy provides its students with educational materials and services to set each student up for success, including but not limited to, Montessori materials, books, arts and crafts, field trips, and meals (collectively, the "**Tuition-Free Education and Services**"). For more information about Bezos Academy's preschool program, curriculum, and admissions, see <https://www.bezosacademy.org>.

Bezos Academy develops preschools in collaboration with community hosts. Community hosts provide the physical space for a period of at least ten years where Bezos Academy preschools are housed. At each community host site, Bezos Academy hires, trains, develops, and pays talented educators and covers all other operating expenses of the Tuition-Free Education and Services at no cost to the families it serves. For more information about Bezos Academy's community hosts, see <https://www.bezosacademy.org/host/>.

Brevard Health Alliance ("BHA") is Brevard County's only Federally Qualified Health Center. BHA provides extensive primary health care services to Brevard County residents regardless of their ability to pay. By offering services on a sliding-fee scale, BHA has provided primary care services, behavioral health services, dental services, diagnostic services, resource management services, pharmacy services, women's health care and obstetrics, Hepatitis C and HIV services, extended hours of pediatric walk-in care, and specialty referrals to Brevard County's economically disadvantaged residents since March of 2005. <https://brevardhealth.org/>

The Space Coast Health Foundation was established on October 1, 2010, using the proceeds from the sale of Wuesthoff Health System. By continuing the long, proud and distinguished history of serving the people of Brevard County, the foundation intends to expand upon its roots and enhance the health and wellness of individuals and communities. The foundation is a public charity working on collaborative projects that will meet the healthcare needs of our community. These needs are chosen by using focus groups, one-on-one interviews and quantitative research to determine specific community health needs. <https://www.schfbrevard.org/>

The Diamond Square Community Redevelopment Agency ("CRA") is located on the southern border of the City of Cocoa and encompasses the area bounded by Pineda Street on the west, School Street on the north, the Florida East Coast Railroad on the east, and Rosa L. Jones Drive on the south. The Diamond Square CRA, originally named Census Tract 626, was established through City of Cocoa Ordinance No. 13-98 and is governed by a 7-member board. <https://www.cocoaf1.org/1726/Diamond-Square-Community-Redevelopment-A>

The Hosts understand the significant value of the Parties to its prospective residents, and desires to collaborate with the Parties by offering space to host services provided by the Parties at to-be-determined facilities/properties owned by the Hosts.

The Parties seek to enter this MOU to: 1) identify and prioritize specific communities, neighborhoods and facilities within the Hosts' real estate portfolio where the Parties can provide services; and 2) provide mutual support and assistance in the launch and operation of new services provided by the Parties within the City of Cocoa Florida.

Based on the above Background and Recitals, the Parties agree to the following:

- 1. Consideration and Acknowledgment of Background Recitals.** The Parties acknowledge and agree that valid consideration exists for this MOU and acknowledge and incorporate the preceding recitals as a part of this MOU.
- 2. Tuition-Free Education and Services of Bezos Academy.** Bezos Academy will explore establishing a high-quality, tuition-free Bezos Academy preschool within one or more facilities/properties owned or planned by the Hosts. Bezos Academy will provide input to ensure the potential space meets or exceeds state and local early childhood education licensing standards and Bezos Academy's educational and operating standards. Bezos Academy's preschools provide the Tuition-Free Education and Services to eligible children approximately three (3) to five (5) years of age. Bezos Academy covers all the operating expenses for the Tuition-Free Education and Services at no cost to its community hosts or the families Bezos Academy serves. Bezos Academy hires, trains, develops, and pays talented educators with a focus on hiring employees from within each preschool's local community.
- 3. Health Care Services of Brevard Health Alliance (BHA).** The Brevard Health Alliance will explore establishing a health-care center where they can provide extensive primary health care services to the Host community. BHA will provide low-cost primary care services including, behavioral health services, dental services, diagnostic services, resource management services, pharmacy services, women's health care and obstetrics, Hepatitis C and HIV services, extended hours of pediatric walk-in care, and specialty referrals to the Host community. BHA will be responsible for hiring of staff and daily operations of the health-care center.
- 4. Support and Assistance to be Provided by Hosts.** The Hosts will explore providing Bezos Academy and the Health Nonprofits space in one or more of its existing or planned facilities/properties rent-free for a minimum of ten (10) years to operate. Host will collaborate with Bezos Academy and the Health Nonprofits to develop facilities to ensure they can operate facilities that meet or exceed all state and local licensing requirements and their own operational standards. Hosts will also support Bezos Academy and the Health Nonprofits by promoting job openings and publicizing launches to support use and enrollment.
- 5. Publicity.** Each Party will obtain the other Party's prior written consent before using the other Party's name, logo, trademark, service marks, or other trade names in public written or verbal communications for public distribution, such as press releases or web site publicity. Nothing in this paragraph shall preclude any Party to release information as required by applicable law.
- 6. Compliance with All Laws.** Each Party will comply with all federal, state, and local laws, rules, regulations, and ordinances applicable to the performance of this MOU.
- 7. Intent of Non-Binding MOU.** This MOU is a non-binding summary and does not legally commit the Hosts or Parties to a specific site or any other obligation. The Parties hereby understand that each Party has its own approval processes and requirements. Parties shall not be deemed to have entered a legally binding obligation unless and until such Party has executed a binding lease agreement to operate within a community host. The Parties understand that the purpose of this MOU is to memorialize the intention of the Parties to explore locating facilities in one or more of the Hosts' existing or planned facilities/properties in the State of Florida. Nothing in this Agreement shall constitute a binding commitment for funding or other services by any Party and all specific commitments shall be memorialized in subsequent agreement(s).

[Signature Page Follows]

This MOU is entered into by and among the Parties identified below, to be effective as of the date fully executed.

CITY OF COCOA

By: _____
Name: _____
Title: _____
Date: _____

BREVARD HEALTH ALLIANCE

By: _____
Name: _____
Title: _____
Date: _____

BREVARD HEALTH ALLIANCE

By: _____
Name: _____
Title: _____
Date: _____

DIAMOND SQUARE REDEVELOPMENT AGENCY

By: Tracy Moore
Name: Tracy Moore
Title: Chairperson
Date: Sept. 18, 2023

SPACE COAST HEALTH FOUNDATION

By: _____
Name: _____
Title: _____
Date: _____



Legislation Details (With Text)

File #: 23-577 **Version:** 1 **Name:**
Type: Agenda **Status:** Agenda Ready
File created: 9/14/2023 **In control:** Diamond Square RDA
On agenda: 9/18/2023 **Final action:**
Title: Request Agency review and decision on whether to approve request for funding from Sherry Amos for her summer reading literacy program...End
Sponsors:
Indexes:
Code sections:
Attachments: [DSCRA 9.18 - EXHIBIT A.pdf](#)

Date	Ver.	Action By	Action	Result
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DIAMOND SQUARE REDEVELOPMENT AGENCY AGENDA ITEM

Memo Date: September 14, 2023
Agenda Date: September 18, 2023
Prepared By: Ryan Browne, Redevelopment Coordinator
Through: Charlene Neuterman, Community Services Director
Requested Action:
Request Agency review and decision on whether to approve request for funding from Sherry Amos for her summer reading literacy program.

BACKGROUND:

The Board asked Ms. Amos to submit background documentation to Charlene Neuterman, Community Services Director for review.

Ms. Amos has complied with this request and returned to present a refresher presentation and answer any remaining questions about her program.

BUDGETARY IMPACT:

None at this time; depending on outcome of review and vote.

PREVIOUS ACTION:

N/A.

RECOMMENDED MOTION:

Request Agency review and decision on whether to approve request for funding from Sherry Amos for her summer reading literacy program.

EXHIBIT A:

Sherry Amos

Placeholder for Summer
Reading Literacy Program
Proposal

State Board of Education

Tom Grady, Chair
Ben Gibson, Vice Chair
Members
Monesia Brown
Esther Byrd
Grazie Pozo Christie
Ryan Petty
Joe York



FLORIDA DEPARTMENT OF
EDUCATION
fldoe.org

Manny Diaz, Jr.
Commissioner of Education

E-MAILED
6/3/2022

5/27/2022

LEARNING ACHIEVEMENT ACADEMY(5876)
Attn: SHERRY AMOS
1040 W. KING STREET
COCOA, FL 32922

RE: LEARNING ACHIEVEMENT ACADEMY(5876)

Dear Private School Administrator:

The Office of Independent Education and Parental Choice has received your compliance paperwork for the 2022 - 2023 school year.

The documentation has been reviewed, and the paperwork attests to the fact that you are maintaining compliance with the requirements governing the state K-12 scholarship programs and s. 1002.42, Florida Statutes, related to private schools.

Your cooperation is greatly appreciated, and we look forward to working with you as we strive to increase the quantity and improve the quality of educational options for Florida's students.

Sincerely,

A handwritten signature in cursive script, appearing to read "Adam Emerson".

Adam Emerson
Executive Director
Office of Independent Education and Parental Choice

Adam Emerson, Executive Director
Office of Independent Education & Parental Choice
www.fldoe.org

325 W. Gaines Street | Tallahassee, FL 32399-0400 | 850-245-0502

Created
6/3/2022



DIAMOND SQUARE

REDEVELOPMENT AGENCY

PROGRAM SPONSORSHIP APPLICATION

PART I: GENERAL INFORMATION

APPLICANT INFORMATION:

APPLICANT NAME: Learning & Achievement Group, Inc.

FEDERAL ID #: 26-4674647

Please attach IRS Determination Letter as support documentation Exhibit A.

ADDRESS: 1040 W King Street

CITY/STATE: Cocoa

ZIP: 32922

Sherry Lyons-

CONTACT PERSON: Amos

TITLE: Director

Contact person will be in direct contact with Agency Staff and responsible for administering the funds if awarded.

TELEPHONE #: 321-594-6115

FAX #: 321-600-2033

EMAIL ADDRESS: Sherryamos1@bellsouth.net

FINANCIAL: Provide budget information for your organization by completing the attached Income/Expense Report as Exhibit B. The last filed IRS 990 or 990EZ will be accepted in lieu of the Income/Expense Report.

CURRENT OPERATING BUDGET: \$46,159.00

PROJECT INFORMATION:

NAME OF PROJECT: LA Academy Summer Enrichment Program

TOTAL

AMOUNT OF

PROJECT COST: \$46,159.00

MONETARY REQUEST: \$15,016.00

ANTICIPATED PARTICIPANTS TO BE SERVED: _____

42

OF DIAMOND SQUARE RESIDENTS TO BE
SERVED: _____

25

NEW PROGRAM?:

☐

YES

☒

NO

EXPANDED PROGRAM?:

☒

YES

☐

NO

PART II: EVALUATION CRITERIA

PROJECT IMPACT:

1. Please describe in detail, the proposed project objectives. Why is this project needed? Some of the issues the applicant may wish to address include, but are not limited to:

- ♦ How the project meets one or more of the Diamond Square Redevelopment Agency's Goals and Objectives;
- ♦ How quality of life for Diamond Square residents will be enhanced;
- ♦ Who will be served (children, seniors, families, and/or the disabled, etc.);

Please limit response to one typed page and attach as Exhibit C.

2. Will any Diamond Square residents be involved in the selecting, planning, and/or implementation of the proposed project? Yes x No _____ If yes, briefly describe.

We have several employees of LA Academy who live in the Diamond Square Area.

3. Briefly describe your organization's experience and ability to deliver the project as proposed as well as within the timeline for completion.

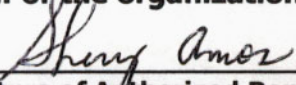
Learning & Achievement Academy's (LA) Academy is a K-8 grade private school that specializes in small class sizes and small group instruction. LA Academy has been hosting a successful summer literacy program for the past 2 years and is currently in its 3rd year. The summer literacy program was created to combat the "summer slide", where kids lose 22% of what they have learned over the summer months. The principals responsible for running this summer literacy program have also successfully implanted several other programs for low-income families and students including: LA Abstinence-only and Arts Program-Endeavour Elementary School (Sept 2007 – June 2008); LA Mentoring/Tutoring Program (Nov 2009-April 2011). LA Group received funding for these projects and successfully completed all requirements in a timely manner. LA Afterschool Program served over 200 young people in Brevard County, Fl (Cocoa, Rockledge, and Melbourne).

USE OF FUNDS: Complete Exhibit D. - Use Of Funds Statement describing how requested monetary funds are to be used for the program, including costs, potential vendors and a general description of the proposed purchases.

NOTE: Upon completion of the program, an After-Action Statement (Exhibit E) and supporting documentation must be submitted to confirm use of Agency funds and services provided. Failure to do so will result in denial of future requests.

Remember that all expenditures of Agency funds will need to be accounted for by supplying copies of sales receipts, cancelled checks, and/or invoices to Agency Staff.

I hereby certify that the information provided in this application is true and accurate, and I have the authority to apply for this Program Sponsorship on behalf of the organization.



Signature of Authorized Representative

7/6/2023
Date

Exhibit B

INCOME/EXPENSE REPORT (Fiscal Year)

Organization Name: Learning & Achievement Group, Inc.

Fiscal Period: 7/1/2022 to 06/30/2023

INCOME	AMOUNT	EXPENSES	AMOUNT
Support		Salaries and wages	\$ 359,247
Govt. grants	\$ 51,244	Insurance and Benefits	\$ 2,331
Foundations	\$ 0	Professional fees	\$ 1,390
Corporations	\$ 0	Fundraising costs	\$ 541
United Way	\$ 0	Travel	\$ 508
Individual contributions	\$ 0	Equipment	\$ 9,651
Fundraising efforts	\$ 0	Printing fees	\$ 150
Membership income	\$ 0	Telephone/Utilities	\$ 1,937
In-Kind support	\$ 0	Postage	\$ 194
Investment income	\$ 6	Rent	\$ 26,352
Other (loan for cash flow)	\$ 30,000	In-Kind expenses	\$ 0
		Depreciation	\$ 0
		Other (specify)	
Revenue		Consumable/Books/Supplies	\$ 120,752
Govt. contracts	\$ 0	Repairs	\$ 520
Earned Income	\$ 0	Uniforms	\$ 39
Other (specify):		Office Exp	\$ 4849
Scholarships Tuition	\$ 502,110		
Paid Tuition	\$ 0		
TOTAL INCOME	<u>\$ 583,354</u>	TOTAL EXPENSES	<u>\$ 528,461</u>

Exhibit B1

Summer Enrichment Program

INCOME/EXPENSE REPORT

Organization Name: Learning & Achievement Group, Inc.

Fiscal Period: 6/1/2023 to 6/30/2023

INCOME	AMOUNT	EXPENSES	AMOUNT
Support		Salaries and wages	\$ 21,648
Govt. grants	\$ 0	Insurance and Benefits	\$ 675
Foundations	\$ 0	Professional fees	\$ 400
Corporations	\$ 0	Fundraising costs	\$ 0
United Way	\$ 0	Travel	\$ 0
Individual contributions	\$ 775	Equipment	\$ 0
Fundraising efforts	\$ 0	Maintenance & Cleaning	\$ 300
Membership income	\$ 0	Telephone /Utilities/ Internet	\$ 980
In-Kind support	\$ 0	Consumables & Office Supplies	\$ 4,800
Investment income	\$ 0	Rent	\$ 2,340
Other (specify)		In-Kind expenses	\$ 0
Transfer from Savings	\$ 30,368	Other (program specific)	
	\$	Advertising & Marketing	\$ 828
Revenue		Curriculum / Supplies	\$ 1,756
Govt. contracts	\$ 0	Food Program (Brkfst/Lunch)	\$ 5,381
Earned Income	\$ 0	Field Trips	\$ 5,970
Scholarship Tuition	\$ 0	Transportation (Gasoline)	\$ 1,081
Paid Tuition	\$ 0		
TOTAL INCOME	\$ 31,143	TOTAL EXPENSES	\$ 46,159

FUNDING REQUEST FROM DIAMOND SQUARE GRANT: \$15,016

EXHIBIT C

Mission and Purpose

Learning & Achievement Academy (LA) Academy is a K-8 school that specializes in small class sizes and small group instruction. LA Academy has been hosting a summer program for the past 2 years and is currently in its 3rd year. According to research, the Covid-19 school shutdown affected all students negatively. Many students experienced a 1.5 – 2-year learning loss. In order to combat the learning losses, we have been hosting our summer literacy program for the past 2 years; and after overwhelming demand, are hosting our 3rd year. The learning losses the students experienced after Covid-19 were very evident when the state stopped virtual learning and required students to return to brick-and-mortar schools. Many students had experienced significant learning losses and needed a summer academic program to both make learning gains and stay on grade level.

“Summer slide” is the tendency for students, especially those from low-income families, to lose some of the achievement gains they made during the previous school year. Research shows that children lose approximately 2 months or 22% of what they learned during the school year over the summer months. Children in low-income households fall behind an average of 2 months in reading and math during the summer and have more difficulty finding access to books and reading programs. Scholastic Literacy says, “that summer reading is critical to a child’s ability to retain information learned during the previous year and grow in knowledge and critical thinking skills for the coming year”. Reading and Math over the summer keeps the brain in shape and is likened to exercising the brain muscle. When the students come back after 2 months of not working the brain, retention of previous year’s learning has decreased or weakened. Without this summer intervention, the brain is out of shape. The results are that teachers must use the first quarter of the new semester to review the previous year’s work that students have forgotten over the summer. The students have lost ground, and most are not working on grade level when they enter school in the fall. This is the result of “summer slide.” However, students who do read a lot over the summer or participate in a summer program like ours may gain a month of proficiency in reading. Summer reading is a critical requirement to help students stay on track for their entire educational career and beyond. We offer K-8 reading and math programs with the use of I-ready and other on-line reading and math programs. Our reading includes phonics instruction – both oral and written. We also have a Title I reading teacher from the district who will work with our 3-4 graders in remedial reading and math. The program also includes Arts and Field trips that function as incentives and motivation for students to complete the summer program.

Needs approach:

A few of the biggest problems our youth face today, which includes youth in the Diamond Square area, are the lack of activities to develop their intellectual and physical talents. The purpose of the program is to engage economically disadvantaged youth, especially African American and Latino youth, in the creative process enabling them to master multidisciplinary art skills, increase understanding of respective cultures, strengthen critical thinking skills, and foster proficiency in performance through team building, discussions and cultural arts.

Risk factors:

Some of these risk factors include: (1) Academic failure, (2) Lack of commitment to school, (3) Early initiation of problem behaviors, (4) School report of discipline problems. The program will offer academics, arts, and field trips 5 days per week. LA Summer Enrichment Program will offer reading literacy and math through its academic enrichment program. There will also be a computer lab onsite to offer technology-based learning.

Referrals:

Students will be referred to by teachers, counselors, parents, churches, and community agencies. Schools will refer students using factors such as poor discipline, academic performance, and/or attendance records.

Goals/objectives:

Our mission is to provide a positive and supportive environment as well as to increase the students' overall literacy.

1. 50% of participants will show a 1% to 5% improvement in reading scores within 30 days as a result of reading 3 books per week and practicing one hour of I-ready daily. Students will show an improvement of 2 to 5 points in reading by the end of the program.
2. K-2 grade will practice oral phonics, have Storytime, and read 3 books per week to increase literacy. They will review phonics charts 1-8 and learn charts 9-10.
3. 50% of participants will increase their English grammar knowledge 2% to 5% from pre-assessment results within 30 days after completing the I-ready and other grammar – based materials.

Exhibit D

Diamond Square Redevelopment Agency Use of Funds Statement

(To be submitted with Program Sponsorship Application)

Date: 6/13/2023 **Project Dates:** 6/5/2023 **to** 6/30/2023

Organization: Learning & Achievement Group INC **Project:** LA

1.) Please list the amount of monetary funds requested from the Agency, describing how the requested funds are to be used, including individual costs, potential vendors, and a general description of the purposed purchases: Learning & Achievement Academy Group requests \$15,016.00 to be used to expand its summer program by providing curriculum, books, assessments, field trips. We are also requesting funds to provide free breakfast and lunch to the student population. We would also use the funds to buy testing and tutoring software for our computers to use in the technology portion of our program. The program provides academic instruction in its morning sessions as well as a hot breakfast and a hot lunch. The afternoon program consists of field trips and art projects as creative outlets for our students.

Certification: I hereby certify that the purchases will be used to support this project.

Sherry Amos
Project Administrator

7/6/2023
Date

Certification: I hereby certify that the purchases will be used to support this project.

Talyn Eddy
Project Financial Officer

7-6-2023
Date



Chairman
Dr. Paul Rosbury
Prosbury@semcovcom.org

President
Rev. Dwight Bell

First Vice President
Rev. Hope Sierra

Dir of Community Fellowships
Rev. John Wilcox,

Mailing Address:
1260 S. Courtenay Parkway
Merritt Island, FL 32952

International Headquarters
1260 S. Courtenay Parkway
Merritt Island, FL 32952
321-452-9692

7/3/2023

RE: Learning and Achievement Group

To, Whom it may Concern

Learning and Achievement Group, Calvin and Sherry Amos were part of Seminary Covenant Community when they started this school. I have known them for over ten years. Their management and integrity are excellent and have an outstanding record in serving the children in their school. I highly recommend them for the grant.

Sincerely

A handwritten signature in black ink, appearing to read "Paul H. Rosbury".

Paul H. Rosbury, Chairman



P.O. Box 101381, Palm Bay, Florida 32910

June 25th, 2023

To whom it may concern,

It is with immense pleasure that I present my recommendation on behalf of Mrs. Sherry Amos and the Learning & Achievement Academy. Ms. Amos is an enthusiastic, loving, and caring woman of God who dedicated most of her time to make significant contributions to her communities with organizations such as Restoration International Ministries. Learning & Achievement Academy has donated funds and supplies to help my school in Haiti. Mrs. Amos is a motivated, hard-working woman and will be there whenever she is needed. Her passion and her intelligence make her an ideal businesswoman. In my experience working close with Mrs. Sherry Amos for many many years she displayed a great deal of being a responsible and mature person who can be given huge responsibilities. I strongly believe Mrs. Sherry Amos and Learning & Achievement Academy will be a deserving and excellent candidate for your grant. If you would like to further discuss my experiences working with mrs Sherry Amos you may contact me at (321) 557-8884 or via email: evangelistelsie@gmail.com.

Thank you.

Elsie Augustin
Director



Eastern Florida STATE COLLEGE

July 5, 2023

President

James H. Richey, J.D.

Board of Trustees

Alan H. Landman, Chair
Ronald Howse, Vice Chair
R. Bruce Deardoff
Dr. Edgar Figueroa
Moses L. Harvin, Sr.

Cocoa Campus

1519 Clearlake Road
Cocoa, Florida 32922
321/632-1111
Fax: 321/433-7064

Melbourne Campus

3865 N. Wickham Road
Melbourne, Florida 32935
321/632-1111
Fax: 321/433-5618

Palm Bay Campus

250 Community College Pkwy.
Palm Bay, Florida 32909
321/632-1111
Fax: 321/433-5305

Titusville Campus

1311 North U.S. 1
Titusville, Florida 32796
321/632-1111
Fax: 321/433-5113

easternflorida.edu

To whom it may concern,

I am writing this letter with the highest respect regarding Mrs. Sherry Amos and the Learning & Achievement Academy. I highly recommend this amazing organization and exceptional individual. Having had the privilege of working closely with Sherry and her husband Calvin Amos for many years, I've personally watched and supported their community initiatives and support for mentoring and educating youth. I can attest to their remarkable capabilities and unwavering commitment. We actually served together in church youth outreach ministry and programs such as the Faith Institute of the Arts summer program.

I have had the opportunity to speak at several programs at their Academy. I was the keynote at the Academy's 2021-22 graduation ceremony and have taught chapel services there. The Learning & Achievement Academy has a heart for youth, especially young men. Their keen insight, combined with his exceptional communication skills, helped him forge strong relationships with the students and community, allowing them to mentor and guide them effectively.

In summary, I wholeheartedly recommend the Academy for the City of Cocoa grant. Should you require any further information or have any specific questions, please do not hesitate to contact me at cadorem@easternflorida.edu or 321-433-7663.

Sincerely,

Dr. Michael A. Cadore Sr. Executive Director
Community Engagement
Eastern Florida State College





[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Not For Profit Corporation

LEARNING & ACHIEVEMENT GROUP, INC.

Filing Information

Document Number	N08000002736
FEI/EIN Number	26-4674647
Date Filed	03/19/2008
Effective Date	03/12/2008
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	10/11/2022

Principal Address

1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955

Mailing Address

1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955

Registered Agent Name & Address

AMOS, SHERRY R
1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955

Name Changed: 10/11/2022

Officer/Director Detail

Name & Address

Title Officer

AMOS, SHERRY
1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955

Title Officer

Amos, Calvin E, Sr.
1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955

Title Asst. Secretary

Rivera, Monique R
1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955

Annual Reports

Report Year	Filed Date
2021	04/29/2021
2022	10/11/2022
2023	07/06/2023

Document Images

07/06/2023 – ANNUAL REPORT	View image in PDF format
10/11/2022 – REINSTATEMENT	View image in PDF format
04/29/2021 – ANNUAL REPORT	View image in PDF format
06/29/2020 – ANNUAL REPORT	View image in PDF format
09/15/2019 – ANNUAL REPORT	View image in PDF format
09/08/2018 – ANNUAL REPORT	View image in PDF format
05/08/2017 – Amendment	View image in PDF format
04/27/2017 – ANNUAL REPORT	View image in PDF format
08/31/2016 – ANNUAL REPORT	View image in PDF format
05/30/2015 – ANNUAL REPORT	View image in PDF format
05/01/2014 – ANNUAL REPORT	View image in PDF format
04/12/2013 – ANNUAL REPORT	View image in PDF format
05/07/2012 – ANNUAL REPORT	View image in PDF format
04/12/2011 – ANNUAL REPORT	View image in PDF format
05/04/2010 – ANNUAL REPORT	View image in PDF format
08/31/2009 – ANNUAL REPORT	View image in PDF format
03/19/2008 – Domestic Non-Profit	View image in PDF format

2022 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000002736

Entity Name: LEARNING & ACHIEVEMENT GROUP, INC.**Current Principal Place of Business:**1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955**Current Mailing Address:**1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955 US**FEI Number:** 26-4674647**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AMOS, SHERRY R
1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** SHERRY R AMOS

10/11/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	OFFICER
Name	AMOS, SHERRY
Address	1165 TUCKAWAY DRIVE
City-State-Zip:	ROCKLEDGE FL 32955

Title	OFFICER
Name	AMOS, CALVIN E SR.
Address	1165 TUCKAWAY DRIVE
City-State-Zip:	ROCKLEDGE FL 32955

Title	ASST. SECRETARY
Name	RIVERA, MONIQUE R
Address	1165 TUCKAWAY DRIVE
City-State-Zip:	ROCKLEDGE FL 32955

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERRY R AMOS

PRESIDENT

10/11/2022

Electronic Signature of Signing Officer/Director Detail

Date

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: SEP 21 2017

LEARNING ACHIEVEMENT GROUP INC
1165 TUCKAWAY DRIVE
ROCKLEDGE, FL 32955-0000

Employer Identification Number:
26-4674647
DLN:
26053648004787
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
September 01, 2017
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

Based on the information you submitted in your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is the submission date of your application.

Our records show you were previously tax exempt as a subordinate under group exemption number 8167. Because you applied for and were granted your own individual tax-exempt status, you no longer rely on your affiliation with a parent organization for recognition of your tax exemption and you'll be listed individually in the Exempt Organizations Select Check (Pub. 78 data).

If, in the future, you choose to become a subordinate under a group ruling, you'll lose your individual recognition of tax-exempt status and you'll no longer appear in the Exempt Organizations Select Check (Pub. 78 data). Moreover, if you become a subordinate under a group ruling and your parent organization loses its tax-exempt status, you also will lose your exempt

LEARNING ACHIEVEMENT GROUP INC

status. To reestablish your individual tax exemption after rejoining a group exemption, you'll be required to reapply and pay the appropriate user fee.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin

Director, Exempt Organizations
Rulings and Agreements



THE HARTFORD
BUSINESS SERVICE CENTER
3600 WISEMAN BLVD
SAN ANTONIO TX 78251

July 6, 2023

For Informational Purposes
1040 W KING ST
COCOA FL 32922-8616

Account Information:

Policy Holder Details :	Learning & Achievement Academy
-------------------------	--------------------------------



Contact Us

Need Help?

Chat online or call us at

(866) 467-8730.

We're here Monday - Friday.

Enclosed please find a Certificate Of Insurance for the above referenced Policyholder. Please contact us if you have any questions or concerns.

Sincerely,

Your Hartford Service Team



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/06/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER SPECIALTY PROGRAM GROUP LLC/PHS 46505500 The Hartford Business Service Center 3600 Wiseman Blvd San Antonio, TX 78251		CONTACT NAME: PHONE (866) 467-8730 (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:	
INSURED Learning & Achievement Academy 1040 W KING ST COCOA FL 32922-8616		INSURER(S) AFFORDING COVERAGE INSURER A: Twin City Fire Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC# 29459	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/Y YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY			46 SBM VW0905	10/20/2022	10/20/2023	EACH OCCURRENCE \$1,000,000
	CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000
	☒ General Liability						MED EXP (Any one person) \$10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$1,000,000
	POLICY ☐ PRO-JECT ☒ LOC						GENERAL AGGREGATE \$2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG \$2,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)
	ANY AUTO						BODILY INJURY (Per person)
	ALL OWNED AUTOS						BODILY INJURY (Per accident)
	HIRED AUTOS						PROPERTY DAMAGE (Per accident)
	SCHEDULED AUTOS						
	NON-OWNED AUTOS						
	UMBRELLA LIAB EXCESS LIAB						EACH OCCURRENCE
	OCCUR CLAIMS-MADE						AGGREGATE
	DED RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE -EA EMPLOYEE
							E.L. DISEASE - POLICY LIMIT

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Those usual to the Insured's Operations.

CERTIFICATE HOLDERFor Informational Purposes
1040 W KING ST
COCOA FL 32922-8616**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Susan L. Castaneda

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Admin/Secretary Job Description

Responsibilities:

- Maintaining attendance records;
- Assisting in purchasing, transportation, travel arrangements, and field trips;
- Performing scheduling duties;
- Collecting data required for the preparation of reports to the charter entity and other appropriate bodies;
- Answering phones;
- Welcoming parents, children, and guests to the school;
- Coordinating mailings and copying;
- Other duties, as assigned.

Qualifications:

- High school diploma or higher degree;
- Demonstrated organizational and writing skills;
- Prior experience in an administrative assistant position;
- Demonstrated ability to relate well to adults and children.

Teacher Job Description

The following expectations for teachers at Learning and Achievement Academy as a Christian teacher are:

In faithful living you are expected to

be committed to obeying Christ, your Redeemer.
have a regular and active devotional life.
practice love, joy, patience, kindness, self-control, gentleness, faithfulness, truthfulness.
model biblical principles in making choices.
be humble in spirit but bold in Christ-like practice.
be conscientious and responsible.

In instructional planning you are expected to

Integrate the school's curriculum into specific objectives for lessons suitable to the age level and developmental needs of your students.
Use curricular materials and plan teaching-learning experiences that help each student achieve the stated objectives.
Plan activities that help students see wholeness and relevance in learning.
Plan lessons that connect biblical principles to concepts about God's word.
Plan a variety of teaching strategies to match the learning styles of the students.
Teach content that helps students see the variety and the integrity of God's creation.
select in advance the means of assessment to measure students' learning for a lesson or unit.

In teaching a class you are expected to

Use class time well with activities that engage students' attention and have a clear purpose.
Give clear directions and well-organized examples and explanations.
Listen carefully to students' ideas and apply them to the lesson.
Use questions and explanations that promote clear thinking in students..
Compose useful analogies to connect what students are learning to what they have already learned.

In relating with students you are expected to

Establish a climate of love and care.

Define responsible Christian behavior for students, including guidelines and consequences for good and bad behavior in the classroom.

Help students learn self-discipline through appropriate encouragement, correction, chastening, and counseling.

Provide organized learning that helps students support and learn from each other.

In professional growth you are expected to

Take responsibility for all tasks related to the classroom, parent communication, and, to some extent, the broader school community.

Keep current in scholarship on teaching, the purposes of Christian education, and your subject area.

Work constructively with colleagues and administration by contributing ideas and listening to the ideas of others.

In community relations you are expected to

Communicate regularly with parents about their child's progress and needs.

TEACHER ASSISTANT

BASIC FUNCTION:

Under the direction of an assigned supervisor, assist a teacher in reinforcing instruction to individual or small groups of students in a classroom or other learning environment; and assist in the preparation of instructional materials.

ESSENTIAL DUTIES:

Tutor individual or small groups of students, reinforcing instruction as directed by the teacher. Monitor and oversee student drills, practices and assignments in various subjects or assigned subject areas.

Confer with the teacher concerning lesson plans and materials to meet student needs; assist with the implementation of lesson plans.

Assist students in completing classroom assignments, homework and projects; assure student understanding of classroom rules and procedures.

Assist students by answering questions, providing proper examples, emotional support, friendly attitude and general guidance;

Compile homework materials for absent students as needed

Read books to students and observe their reading abilities as assigned by the position;

Assist students with letter and word pronunciation and recognition.

Assist students with spelling and writing exercises and assignments.

Observe and control behavior of students in the classroom according to approved procedures; monitor students during outdoor activities as directed; report progress regarding student performance and behavior.

Operate a variety of classroom and office equipment including a computer, copier, overhead projector and laminator as assigned.

Provide classroom support to the teacher by setting up work areas and displays, and distributing and collecting paper, supplies and materials.

Assure the health and safety of students by following established practices and procedures; maintain a learning environment in a safe, orderly and clean manner.

May be assigned to accompany students and teachers on field trips.

Attend mandatory training as required by your position.

OTHER DUTIES:

Perform related duties as assigned.

Cafeteria Manager

Should have food service experience.

The cafeteria manager's responsibilities include but are not limited to;

- Receiving breakfast/ lunches meals
- Monitor the temperature of food
- Ensure that there is no cross-contamination
- Serve and conduct breakfast and lunch count
- Clean and sanitize the cafeteria before and after each meal by wiping down the tables, chairs, sweeping and the floor, and taking out the trash
- Demonstrate ability to work well with children and adults.

Cafeteria Assistant

Should have food service experience and be able to lift at least 30 pounds without assistance

The cafeteria assistant's responsibilities include but are not limited to;

- Assisting manager with the distribution of breakfast and lunch meals
- Monitoring the temperature of food
- ensuring that there is no cross-contamination
- servant and conducting breakfast and lunch count
- cleaning and sanitizing the cafeteria before and after each meal by wiping down the tables chairs sweeping the floors and taking out the trash
- Completing any designated task assigned by the cafeteria manager
- Demonstrate the ability to work well with children and adults.

Recess/P.E. instructor

Should be able to stand for extended periods and lift at least 30 pounds without assistance

The recess / PE instructors responsibilities include but are not limited to;

- receiving students for recess on time
- Safely escorting students to recess area
- Closely monitoring student activity to ensure safety and prevent accidents and altercations
- Returning students to class on time
- Providing structured activities as well as free play
- Demonstrate the ability to work well with children and adults.

Janitorial Staff

Should be able to stand for extended periods and lift at least 30 pounds without assistance

Janitorial staff responsibilities include but are not limited to;

- Sweeping all floors daily
- sanitizing the stairwells daily
- clearing trash bins from all rooms and bathrooms daily
- maintaining clean restrooms and common areas daily
- restocking bathrooms as needed
- mopping floors weekly or as needed
- Demonstrate the ability to work well with children and adults.

Dean/Assistant Director

RESPONSIBILITIES:

- Establish and maintain a positive, safe, and productive school culture with clear school-wide and classroom rules and procedures, aligned with our school values.
- Collaborate with Community & organize school events that encourage community connection and investment in school culture and student success.
- Supervise the consistent and fair administration of school policies regarding student conduct and discipline
- Serves as the main disciplinarian for handling all infractions and restorative responses; investigate all infractions with administration
- Collaborate with the leadership team in behavioral crisis management and acute behavioral issues.
- Share discipline data with the administration to review with teachers during staff meetings Collaborate with social workers to support the school's social-emotional learning
- Routinely conduct school-wide walk-throughs.
- Support principals and teachers to create and sustain classroom management systems that ensure a focus on learning and student success
- Respond to behavioral crisis, including all discipline issues, and apply
- de-escalation strategies

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

OMB No. 1545-0047

► **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 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.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. LEARNING & ACHIEVEMENT GROUP INC	Taxpayer identification number (TIN) 26 4674647
	Number, street, and room or suite no. If a P.O. box, see instructions. 1165 TUCKAWAY DRIVE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ROCKLEDGE FL 32955	

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 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	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
Form 990-T (corporation)	07		

• The books are in the care of ► Sherry Amos

Telephone No. ► 321 2238824 Fax No. ► 321 6002033

- 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) 0. 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 05, 15, 20 23, 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 01, 01, 20 22, and ending 12, 31, 20 22.

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

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.

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

Form **8868** (Rev. 1-2022)

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.**2021****Open to Public Inspection**

A For the 2021 calendar year, or tax year beginning 01,01, 2021, and ending 12,31, 2021																													
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization LEARNING & ACHIEVEMENT GROUP INC</td> </tr> <tr> <td colspan="2">Doing business as</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td>1165 TUCKAWAY DRIVE</td> <td></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code</td> </tr> <tr> <td colspan="2">ROCKLEDGE FL 32955</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: Sherry Amos 1165 Tuckaway Drive ROCKLEDGE, FL 32955</td> </tr> <tr> <td colspan="2">D Employer identification number 26-4674647</td> </tr> <tr> <td colspan="2">E Telephone number 321-223-8824</td> </tr> <tr> <td colspan="2">G Gross receipts \$ 0</td> </tr> <tr> <td colspan="2">H(a) Is this a group return for subordinates? ☐ Yes ☒ No</td> </tr> <tr> <td colspan="2">H(b) Are all subordinates included? ☐ Yes ☐ No</td> </tr> <tr> <td colspan="2">If "No," attach a list. See instructions.</td> </tr> <tr> <td colspan="2">H(c) Group exemption number ▶ 0</td> </tr> </table>	C Name of organization LEARNING & ACHIEVEMENT GROUP INC		Doing business as		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	1165 TUCKAWAY DRIVE		City or town, state or province, country, and ZIP or foreign postal code		ROCKLEDGE FL 32955		F Name and address of principal officer: Sherry Amos 1165 Tuckaway Drive ROCKLEDGE, FL 32955		D Employer identification number 26-4674647		E Telephone number 321-223-8824		G Gross receipts \$ 0		H(a) Is this a group return for subordinates? ☐ Yes ☒ No		H(b) Are all subordinates included? ☐ Yes ☐ No		If "No," attach a list. See instructions.		H(c) Group exemption number ▶ 0	
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If "No," attach a list. See instructions.																													
H(c) Group exemption number ▶ 0																													
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527																													
J Website: ▶ www.laboysacademy.org																													
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation: 2017 M State of legal domicile: FL																												

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>THE MISSION IS TO EDUCATE YOUTH FROM THE AGES OF 5 TO 14.</u>
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 3 3
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 3
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 9
	6	Total number of volunteers (estimate if necessary) 6 0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a 0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0	
Revenue	8	Contributions and grants (Part VIII, line 1h) 8 0 0
	9	Program service revenue (Part VIII, line 2g) 9 0 438581
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0 0
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 0 0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0 438581
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3) 13 0 0
	14	Benefits paid to or for members (Part IX, column (A), line 4) 14 0 0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15 0 280439
	16a	Professional fundraising fees (Part IX, column (A), line 11e) 16a 0 0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 17 0 204222
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 18 0 484661
	19	Revenue less expenses. Subtract line 18 from line 12 19 0 -46080
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 20 6561 2416
	21	Total liabilities (Part X, line 26) 21 0 0
	22	Net assets or fund balances. Subtract line 21 from line 20 22 6561 2416

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		05/15/2022			
	Signature of officer Sherry R Amos Amos, Manager Type or print name and title	Date			
Paid Preparer Use Only	Print/Type preparer's name Sherry RiveraAmos	Preparer's signature Sherry RiveraAmos	Date 09/14/2022	Check ☐ if self-employed	PTIN P0-1324251
	Firm's name ▶ FINANCIALPLUS SERVICES			Firm's EIN ▶ 45-3835922	
	Firm's address ▶ 1165 TUCKAWAY DRIVE ROCKLEDGE FL 32955			Phone no. 410 7010829	

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐

- 1** Briefly describe the organization's mission:
 THE MISSION IS TO PROVIDE EDUCATION FOR THE WHOLE CHILD BOTH ACADEMIC AND SOCIO-EMOTIONAL.
- 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 \$ 484610 including grants of \$ 92231) (Revenue \$ 338489)
 LUNCH PROGRAM PROCEEDS ARE PAYED FOR BY SCHOOL THEN REIMBURSED. PAYCHECK PROTECTION LOAN WAS OBTAINED BY THE SCHOLOL.

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

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

4d Other program services (Describe on Schedule O.)
 (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ▶ 484610

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 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X
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	X
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	X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	X
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	X
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	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
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 donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X
d 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 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	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X
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 X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 X	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
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	X
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	X
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, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	X
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X

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	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? If "Yes," complete Schedule J	23	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	X
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?	24c	X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	X
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	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? If "Yes," complete Schedule L, Part I	25b	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? If "Yes," complete Schedule L, Part II	26	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? If "Yes," complete Schedule L, Part III	27	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? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? 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	X
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? If "Yes," complete Schedule N, Part II	32	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? If "Yes," complete Schedule R, Part I	33	X
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
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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)? If "Yes," complete Schedule R, Part V, line 2	35b	X
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	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? If "Yes," complete Schedule R, Part VI	37	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	38	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	1a	5
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	1
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 9		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		X
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)?	4a		X
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		X
7	Organizations that may receive deductible contributions under section 170(c).			
a	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?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
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?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	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?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	0	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	0	
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	11a	0	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	0	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		X
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	0	
c	Enter the amount of reserves on hand	13c	0	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
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.	16		X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		X

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 ☐

Section A. Governing Body and Management

	1a	3	Yes	No
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 on Schedule O.	1a	3		
b Enter the number of voting members included on line 1a, above, who are independent	1b	3		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
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	X
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	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
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			9	X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
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?	10b	X
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
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	15a	X
b Other officers or key employees of the organization	15b	X
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?	16a	X
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?	16b	X

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ►

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 ☐ 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.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
 SHERRY AMOS 1165 TUCKAWAY DRIVE ROCKLEDGE FL 32955 3212238824

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☒ **X****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, 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) STATEMENT #1	(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			
(1) Sherry Amos DIRECTOR	40 0	X			X	X		66000	0	0
(2) Calvin Amos DRIVER	15 0	X						6000	0	0
(3) Pamela Lyons OFFICER	35 0				X		X	33000	0	0
(4)										
(5)										
(6)										
(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								105000	0	0
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								105000	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**

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
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 RevenueCheck 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 0					
	b	Membership dues	1b 0					
	c	Fundraising events	1c 0					
	d	Related organizations	1d 0					
	e	Government grants (contributions)	1e 0					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 0					
	g	Noncash contributions included in lines 1a-1f	1g \$ 0					
	h	Total. Add lines 1a-1f ▶						0
Program Service Revenue	Business Code							
	2a			0	0	0	0	
	b			0	0	0	0	
	c			0	0	0	0	
	d			0	0	0	0	
	e			0	0	0	0	
	f	All other program service revenue . .		0	0	0	0	
	g	Total. Add lines 2a-2f ▶			0			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		0	0	0	0	
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0	
	5	Royalties ▶		0	0	0	0	
	6a	Gross rents	(i) Real	(ii) Personal				
			6a 0	0				
			b Less: rental expenses 6b 0	0				
	c	Rental income or (loss) 6c 0	0					
	d	Net rental income or (loss) ▶			0	0	0	0
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			7a 0	0				
			b Less: cost or other basis and sales expenses 7b 0	0				
	c	Gain or (loss) 7c 0	0					
	d	Net gain or (loss) ▶			0	0	0	0
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18		8a 0				
	b	Less: direct expenses 8b 0						
	c	Net income or (loss) from fundraising events . . ▶			0		0	0
	9a	Gross income from gaming activities. See Part IV, line 19		9a 0				
	b	Less: direct expenses 9b 0						
	c	Net income or (loss) from gaming activities . . . ▶			0	0	0	0
	10a	Gross sales of inventory, less returns and allowances	10a 0					
b Less: cost of goods sold 10b 0								
c Net income or (loss) from sales of inventory . . . ▶			0					0
Miscellaneous Revenue	Business Code							
	11a			0	0	0	0	
	b			0	0	0	0	
	c			0	0	0	0	
	d	All other revenue		0	0	0	0	
	e	Total. Add lines 11a-11d ▶			0			
12	Total revenue. See instructions ▶			0	0	0	0	

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).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	0	280439	0	0
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	0	0	0	0
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9 Other employee benefits	0	0	0	0
10 Payroll taxes	0	8972	0	0
11 Fees for services (nonemployees):				
a Management	0	0	0	0
b Legal	0	0	0	0
c Accounting	0	3454	0	0
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	0	0	0	0
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	0	0	0	0
12 Advertising and promotion	0	1545	0	0
13 Office expenses	0	12415	0	0
14 Information technology	0	0	0	0
15 Royalties	0	0	0	0
16 Occupancy	0	16747	0	0
17 Travel	0	0	0	0
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	0	2148	0	0
20 Interest	0	0	0	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	0	0	0	0
23 Insurance	0	3490	0	0
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	0	0	0	0
b	0	0	0	0
c	0	0	0	0
d	0	0	0	0
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e	0	329210	0	0
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)	0	0	0	0

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	0	4	0
	5 Loans and other receivables from 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	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	0	9	0
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 0		
	b Less: accumulated depreciation	10b 0	10c	0
	11 Investments—publicly traded securities	0	11	0
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 33)	0	16	0	
Liabilities	17 Accounts payable and accrued expenses	0	17	0
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other 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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☐ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	0	27	0
	28 Net assets with donor restrictions	0	28	0
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	0
	32 Total net assets or fund balances	0	32	0
33 Total liabilities and net assets/fund balances	0	33	0	

Part XI Reconciliation of Net AssetsCheck 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	0
2	Total expenses (must equal Part IX, column (A), line 25)	2	0
3	Revenue less expenses. Subtract line 2 from line 1	3	0
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	0
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	0

Part XII Financial Statements and ReportingCheck 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 ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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	X	
b Were the organization's financial statements audited by an independent accountant? 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 ☒ Both consolidated and separate basis	X	
c 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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .	X	

**SCHEDULE A
(Form 990)**Department of the Treasury
Internal Revenue Service**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.

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

LEARNING & ACHIEVEMENT GROUP INC

Employer identification number

26 4674647

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☒ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ 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: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **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).**
- 7 ☐ 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.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ 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 university: _____
- 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **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.**
- 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.**
- 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.**
- d ☐ **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.**
- e ☐ 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.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total					0	0

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

Schedule A (Form 990) 2021

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	0	0	0	0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	0	0	0	0	0	0
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)						0
6 Public support. Subtract line 5 from line 4						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	0	0	0	0	0	0
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11 Total support. Add lines 7 through 10						0
12 Gross receipts from related activities, etc. (see instructions)					12	0
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	0 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	0 %
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		☐
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		☐
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		☐
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		☐
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		☐

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	0	0	0	0
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	0	0	0	0	0	0
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b 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	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	0	0	0	0	0	0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
13 Total support. (Add lines 9, 10c, 11, and 12.)						0
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	0 %
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	0 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	0 %
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	0 %
19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
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 on 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 on 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 line 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.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	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		

Section D. All Type III Supporting Organizations

	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 on line 2, above, 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		

Section 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).			
a	☐ 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.		
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.			
		Yes No	
a	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 that these activities constituted substantially all of its activities.		
2a			
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more 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.		
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	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? If "Yes" or "No," provide details in Part VI .		
3a			
b	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.		
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C—Distributable Amount

			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D—Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017 . . .			
b Excess from 2018 . . .			
c Excess from 2019 . . .			
d Excess from 2020 . . .			
e Excess from 2021 . . .			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**SCHEDULE E
(Form 990)**Department of the Treasury
Internal Revenue Service**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.

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

LEARNING & ACHIEVEMENT GROUP INC

Employer identification number

26 4674647**Part I**

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1 X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2 X	
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or 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 X	
.		
.		
.		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	4a X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	4d X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
.		
.		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	5a	X
b Admissions policies?	5b	X
c Employment of faculty or administrative staff?	5c	X
d Scholarships or other financial assistance?	5d	X
e Educational policies?	5e	X
f Use of facilities?	5f	X
g Athletic programs?	5g	X
h Other extracurricular activities?	5h	X
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?	6a	X
b Has the organization's right to such aid ever been revoked or suspended?	6b	X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 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	7 X	

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

LEARNING & ACHIEVEMENT GROUP INC

Supplemental Information to Form 990 or 990-EZComplete 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 Form 990-EZ.

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

OMB No. 1545-0047

2021**Open to Public
Inspection**

Employer identification number

26-4674647

FORM 990 - OTHER:

ORGANIZATION WAS REQUIRED TO UNDERGO AN AUDIT BY AN INDEPENDENT FINANCIAL FIRM.

AUDIT WAS COMPLETED IN DEC. 2021

Form **8868**

(Rev. January 2022)

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. 1545-0047

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.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.		Taxpayer identification number (TIN)
	LEARNING & ACHIEVEMENT GROUP INC		26 4674647
	Number, street, and room or suite no. If a P.O. box, see instructions.		
	1165 TUCKAWAY DRIVE		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	ROCKLEDGE FL 32955		

Enter the Return Code for the return that this application is for (file a separate application for each return) **011**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	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
Form 990-T (corporation)	07		

• The books are in the care of ► Sherry Amos

Telephone No. ► 321 2238824

Fax No. ► 321 6002033

• 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) 0. 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 05, 15, 20 22, 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 01, 01, 20 21, and ending 12, 31, 20 21.

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

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.

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

Form **8868** (Rev. 1-2022)

Form **8879-TE****IRS e-file Signature Authorization
for a Tax Exempt Entity**

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning 01/01, 2021, and ending 12/31, 20 21

2021Department 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

LEARNING & ACHIEVEMENT GROUP INC

EIN or SSN

26 - 4674647

Name and title of officer or person subject to tax

SHERRY R AMOS AMOS, MANAGER**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.

1a Form 990 check here . . . ▶ ☒	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b	0
2a Form 990-EZ check here . . . ▶ ☐	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ ☐	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here . . . ▶ ☐	b Tax based on investment income (Form 990-PF, Part V, line 5) . . .	4b	
5a Form 8868 check here . . . ▶ ☐	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here . . . ▶ ☐	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here . . . ▶ ☐	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here . . . ▶ ☐	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here . . . ▶ ☐	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here ▶ ☐	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 2021 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 FINANCIALPLUS SERVICES to enter my PIN 7 4 6 4 7 as my signature

ERO firm name

Enter five numbers, but
do not enter all zeros

on the tax year 2021 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 2021 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 ▶ Sherry R Amos AmosDate ▶ 09/14/2022**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.

5 9 4 2 7 3 9 7 9 1 0

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 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 ▶ Sherry RiveraAmosDate ▶ 09/14/2022

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

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form **8879-TE** (2021)

Form **9325**
(January 2017)

Department of the Treasury - Internal Revenue Service

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS *e-file*.

Taxpayer name LEARNING [AMP:] ACHIEVEMENT GROUP INC

Taxpayer address (optional)

1. ☒ Your federal income tax return for 2021 was filed electronically with the Philadelphia Submission Processing Center. The electronic filing services were provided by FINANCIALPLUS SERVICES.
2. ☒ Your return was accepted on 09-14-2022 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is 5942732022257g0000e8
3. ☐ Your return was accepted on _____ Allow 4 to 6 weeks for the processing of your return.
4. ☐ Your electronic funds withdrawal payment request was accepted for processing.
5. ☐ Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.
6. ☒ Your Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on May 15 2022 8:42AM. The Submission ID assigned to your extension is 5942732022135i000007.

**DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at www.irs.gov, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to www.irs.gov and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give you refund information, call the Refund Hotline at 1-800-829-1954.

Learning & Achievement Academy List of Board of Directors

1. Calvin Amos - Cryomatiks, Inc. Masters of Business Administration.
2. Sherry Amos – Learning & Achievement Academy, Masters in Education Leadership.
3. Monique Rivera – Dept of Children and Families, Bachelors in Journalism and Communications, with ESOL Cert.
4. Pamela Lyons – Brevard School Foundation, Masters in Organization Leadership.

To the city of Cocoa,

Thomas Ford and Lisa. Ford grandparents of two students currently attending The Learning and Achievement Academy have supported Mr. and Mrs. Amos the funders and their staff for the past five years in providing a safe nurturing educational environment.

We strongly support the City of Cocoa granting this school financial assistant. This school was able to provide continual education doing the covid-19 pandemic, by providing online learning, they also have showed growth by moving to a larger location, they have been able to overcome temporary loss of location site due to natural disaster and was able to continual providing educations for their students over the summer. This demonstrates, sound financial leadership and commitment toward achieving their goal and vision.

The school has benefited their student by providing sound education for student who needs lower ratio teacher learning. We have observer our grandkids progress. The school has benefited their students' parent with personal contact about their child educational. They are always open to parent commits. This is school is all for their students' and the community.

Please accept our endorsement by granting them a financial assistant award.

Thomas and Lisa Ford citizens of the Great City of Cocoa Florida.

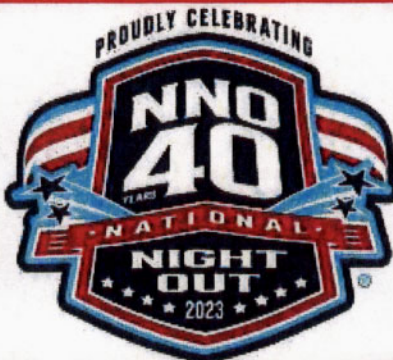
717 Ixora Ave Cocoa Fl 32922

Phone #321 215-5115

Taford321@gmail.com.



SAVE THE DATE



POLICE • COMMUNITY PARTNERSHIPS

TUESDAY, OCTOBER 3rd • 4pm until 7pm

**"NATIONAL NIGHT OUT
AGAINST CRIME"**

"Getting To Know Your Neighbor"

PROVOST PARK

400 South Varr Avenue, Cocoa

THIS IS A FREE COMMUNITY EVENT

**FOOD, MUSIC, BOUNCE HOUSES, FACEPAINTING, DOOR PRIZES
COMMUNITY INFORMATION AND RESOURCES AND MORE!**

**JOIN US FOR A
FAMILY-
FRIENDLY EVENT
TO HELP
PROMOTE**

**Neighborhood
Safety and Unity,
Crime, Drug and
Violence
Prevention and
Police &
Community
Partnerships!**

For additional information, contact Delores McLaughlin at 321.614.1286 or
delores@brevardweedandseed.org

CITY OF COCOA CITY COUNCIL

Request to Speak (print legibly and fill out completely)

①

NAME: Margie Harris

ADDRESS: 622 S. Carolina Ave - Cocoa

TELEPHONE: 321. 720. 4963

ORGANIZATION YOU REPRESENT (IF ANY): _____

AGENDA ITEM NUMBER/SUBJECT: Drainage / Culvert on S. Carolina Ave

IF YOU WOULD LIKE TO SPEAK UNDER DELEGATIONS, PLEASE CHECK ONE OR MORE THAT APPLY: (You must meet one of the following requirements to speak under Delegations)

- ◇ Resident or taxpayer (may speak on any subject of general or public interest)
- ◇ The Council by majority vote may decline to hear any person who is not a resident or taxpayer of the City, except:
 - ◇ City Employee (may speak regarding his/her employment)
 - ◇ Water and/or sewer customer (may speak on matters related to the City's water and/or sewer system.
 - ◇ Any person on any item on the agenda (except *emergency items, ministerial items, Quasi-judicial items, and public hearing items*)

PLEASE CONDUCT YOURSELF IN ACCORDANCE WITH THE TERMS AND CONDITIONS PRINTED ON BACK.

CITY OF COCOA CITY COUNCIL

Request to Speak (print legibly and fill out completely)

NAME:

Bernice Aox

ADDRESS:

701 AURORA ST

TELEPHONE:

321-720-4684

ORGANIZATION YOU REPRESENT (IF ANY):

HILLTOP & AURORA ST

AGENDA ITEM NUMBER/SUBJECT: _____

IF YOU WOULD LIKE TO SPEAK UNDER DELEGATIONS, PLEASE CHECK ONE OR MORE THAT APPLY: (You must meet one of the following requirements to speak under Delegations)

- ◇ Resident or taxpayer (may speak on any subject of general or public interest)
- ◇ The Council by majority vote may decline to hear any person who is not a resident or taxpayer of the City, except:
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