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Department of the

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

DLN: 93493049004092 OMB No. 1545-0047

Open to Public

Treasury Inspection Internal Revenue Service For the 2020 calendar year, or tax year beginning 09-01-2020 , and ending 08-31-2021 C Name of organization D Employer identification number B Check if applicable: TEXAS CENTER FOR ARTS ACADEMICS ☐ Address change 75-0942885 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3901 SOUTH HULEN STREET ☐ Amended return ☐ Application pending (817) 924-1482 City or town, state or province, country, and ZIP or foreign postal code FORT WORTH, TX $\,$ 76109 $\,$ G Gross receipts \$ 10,021,446 Name and address of principal officer: H(a) Is this a group return for PAUL GRAVLEY □Yes ☑No subordinates? 3901 SOUTH HULEN STREET H(b) Are all subordinates FORT WORTH, TX 76109 ☐ Yes ☐No included? 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► www.artsacademics.org L Year of formation: 1946 M State of legal domicile: TX **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities: PROVIDE ARTISTIC TRAINING AND COLLEGE PREPARATORY EDUCATION Activities & Governance 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) . 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 221 **6** Total number of volunteers (estimate if necessary) 6 225 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 275,695 198,022 Ravenue 9,094,000 8,857,965 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 16,079 109,299 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 17,060 56,479 9,402,834 9,221,765 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 5,841,795 6,261,895 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶123,648 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 2,857,274 2,652,488 8,699,069 8,914,383 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 307,382 Revenue less expenses. Subtract line 18 from line 12 . 703,765 Net Assets or Fund Balances Beginning of Current Year End of Year 14,174,871 14,025,945 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 4,971,140 4,370,194 22 Net assets or fund balances. Subtract line 21 from line 20 . 9,203,731 9,655,751 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 Signature of officer Sign Here PAUL GRAVLEY PRESIDENT/CEO Type or print name and title Print/Type preparer's name Preparer's signature Check \square if P00181647 Paid self-employed Firm's name Freemon Shapard & Story Firm's EIN ► 75-0706311 Preparer Use Only Firm's address ► 2088 Zihlman Road Phone no. (940) 423-6226 Windthorst, TX 76389

May the IRS discuss this return with the preparer shown above? (see instructions)

☑ Yes ☐ No

Form	990 (2020)					Page 2
Pa	statement	of Program Servic	e Accomplis	hments		
	Check if Sched	dule O contains a respo	onse or note to a	any line in this Part III		🗆
1	Briefly describe the o	rganization's mission:				
SCH		S CHOIR, AND OTHER			ING, SUPPORTING AND OPERATIN SIGNED TO FOSTER A LIFELONG P	
2	-	, ,		vices during the year w	hich were not listed on	☐ Yes ☑ No
3	•	3,		changes in how it cond	ucts, any program	☐ Yes ☑ No
	If "Yes," describe the	se changes on Schedu	e O.			
4	Section 501(c)(3) and		ons are required	to report the amount	largest program services, as meas of grants and allocations to others,	
4a	(Code: See Additional Data) (Expenses \$	859,631	including grants of \$) (Revenue \$	204,034)
4b	(Code: See Additional Data) (Expenses \$	4,642,195	including grants of \$) (Revenue \$	5,887,844)
4c	(Code: See Additional Data) (Expenses \$	2,210,911	including grants of \$) (Revenue \$	2,881,794)
4d	Other program servic	es (Describe in Schedi	ule O.) uding grants of	¢) (Revenue \$	1
	Total program serv		7,712,7	<u>'</u>) (Revenue 4	,
	- 10tal program serv	ice expenses r	,,,12,,	<u>, </u>		Form 990 (2020)

Form	990 (2020)			Page 3
Par	tiV 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
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		No
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? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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? <i>If "Yes," complete Schedule D,</i> Part 2	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	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		No
	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 2	11c		No
	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 2	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		No
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	Yes	
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		No

20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*.

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Nο

20a

20b

21

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Checklist of Required Schedules (continued)			
		Yes	No
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		No
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J </i>	23		No
	24a	Yes	
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	25a		No
	25b		No
officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family	26		No
Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	30		No
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	32		No
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
	37		No
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
	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. 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 nighest compensation of the organization's current and former officers, directors, trustees, key employees, and nighest compensated employees? If "Yes," complete Schedule 7. 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. gro to line 25a. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 II. 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 organizations prior or prompts 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 contribution, or employee thereof, a grant selection committee member, or to 38% controlled entity (including an employee thereof) or family member of any of these persons? If "yes," complete Schedule L, Part II. Did the organization provide a grant or other assistance to any current or former offi	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III. Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former of fifers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule 3. 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," pot line 25a. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d 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 I, Part I. 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-E22 If "Yes," complete Schedule I, Part II. 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 for films with a substantial contributor, or 35% controlled entity for films are provided as a complete Schedule I, Part II. Did the organization receive provides are considered and exceptions? If "Yes," complete Schedule II, Part IV instructions for applicable filing thresholds, conditions, and exceptions? A assist controlled entity (including amount on a controlled and exceptions): A current or former officer, direc	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III. Did the organization answer "Yes" to Part VII, Section A, line 3.4, or 5 about compensation of the organization's current and former officer, directors, trustees, key employees, and nights compensate demployees? If "Yes," complete Schedule I. Parts I and III. 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 240 through 245 and complete Schedule K. If "No," or to line 25a. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a blink the organization maintain an escrow account other than a refunding escrow at any time during the year? 24b complete Schedule K. If "No," or to line 25a. Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24c complete Schedule K. If "No," or the organization of the organization engage in an excess benefit transaction with a disqualified person line prior year, and transaction with a disqualified person during the year? If "No," complete Schedule I. Part I. 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-E27 If "Yes," complete Schedule I. Part II. Did 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 from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 25% controlled entity or femaly member of any of these persons? If "Yes," complete Schedule II. Part IV. 25

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

No

Yes

49

0

1c

1a

1b

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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	221		
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	Yes	
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	. 3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:			No
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (F	BAR).		
5a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organic solicit any contributions that were not tax deductible as charitable contributions?	zation 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or git not tax deductible?	fts were 6b		
7	, , , , , , , , , , , , , , , , , , , ,			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods an provided to the payor?	d services 7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require Form 8282?	ed to file 7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file 1098-C?	a Form 7h		
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?			
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10				
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	1? 12 a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration o	14b		
13	parachute payment(s) during the year?	15		No
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		No

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI		onse to	lines V
Se	ection A. Governing Body and Management			
			Yes	No
1a	a Enter the number of voting members of the governing body at the end of the tax year	7		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with an officer, director, trustee, or key employee?	y other 2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct su of officers, directors or trustees, or key employees to a management company or other person?	pervision 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	ed? . 4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	. 6		No
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one members of the governing body?	or more 7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholde persons other than the governing body?	rs, or 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the the following:	year by		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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 in Schedule O	ne . 9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	Revenue Cod		
		40	Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10a		No
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before file form?	. 11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give conflicts?	12b		No
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," descri	12c		No
13	Did the organization have a written whistleblower policy?	. 13	.,	No
14	Did the organization have a written document retention and destruction policy?	. 14	Yes	
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?			
	The organization's CEO, Executive Director, or top management official	. 15a		No
b	Other officers or key employees of the organization	. 15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its part in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's status with respect to such arrangements?	exempt		
C -	ection C. Disclosure	16b		
<u>5e</u> 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 Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c only) available for public inspection. Indicate how you made these available. Check all that apply.)(3)s		
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int policy, and financial statements available to the public during the tax year.	erest		
20	State the name, address, and telephone number of the person who possesses the organization's books and rec ▶JANELLE GRAU 3901 SOUTH HULEN STREET FORT WORTH, TX 76109 (817) 924-1482			
			orm 99	0 (2020

(A)

Part VII

(F)

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

(C)

(D)

(E)

- of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, or 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 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

(B)

(A) Name and title	Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W-2/1099-	Reportable compensation from related organizations (W-2/1099-	Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	MISC)	related organizations	
(1) CHARLES REID BOARD MEMBER	1.00	х						0	0	0	
(2) MELISSA GOODROE BOARD CHAIRMAN	1.00	х						0	0	0	
(3) MICHAEL WELLBAUM BOARD MEMBER	1.00	Х						o	0	0	
(4) DANIEL BATES CHAIRMAN ELECT	1.00	Х						0	0	0	
(5) LESLIE SCOTT BOARD MEMBER	1.00	х						0	0	0	
(6) MARY ZIMMERMAN BOARD MEMBER	1.00	Х						0	0	0	
(7) LESLIE WADE BOARD MEMBER	1.00	Х						0	0	0	
(8) PAUL GRAVLEY PRESIDENT/CEO	40.00			х				146,923	0	0	
										Form 990 (2020)	

Pa	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	than o	Position (do not check more than one box, unless person is both an officer and a director/trustee)					Repo compe fror orgar	(D) ortable ensation m the nization	(E) Reportable compensation from related organizations (W-2/1099-	n amount of oth d compensation s from the organization a		ated of other esation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	`	(,1099- ISC)	(W-2/1099- MISC)		rela rela organiz	ted
					Ш	Щ						_		
				\vdash	Н							\perp		
					$\vdash \vdash$	\vdash		\dashv				\perp		
				\vdash	$\vdash \vdash$	\vdash	\vdash	\forall				+		
								+						
						\Box	<u> </u>	\forall				+		
												\top		
c 1	Sub-Total	art VII, Section		 	•		*			146,923		0		0
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos			bove		rece	eived mo	re than \$.	100,000	•		
	, same compensation from the	J											Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> 2				•				-	npensate	d employee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual										m the	4		No
5	Did any person listed on line 1a receiservices rendered to the organization		•			•			_			5		No
	ection B. Independent Contract		d inde-	and a	,t	nter	ictor- '	th-+	received	more #1-	n \$100 000 -f	mn	cation	
	Complete this table for your five high from the organization. Report compe	nsation for the c									on's tax year.	npen		
<u> </u>	Name a	(A) and business addre	ess								(B) scription of services			nsation

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

JANITORIAL SERVICES

TECHNOLOGY

141,307

103,177

Form 990 (2020)

EDEN WORKPLACE

54 GILBERT STREET SAN FRANCISCO, CA 94103

CLEAR CHOICE TECHNOLOGY SERVICES LLC

compensation from the organization ▶ 2

12650 N BEACH ST SUITE 114 72 FORT WORTH, TX 76244

		(2020)	- f F	201100110						Page 9
Part	VII				respo	nse or note to any	line in this Part VIII			
		GHEEK II SCHOOL	auc	o comunio a 1	<u> </u>	inse or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
0	1 a	Federated campaig	gns	1	а	I_		revenue		312 314
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		. 1	b					
Gra	С	Fundraising events		. 1	С					
ifts, ar A	d	Related organization	ons	1	d					
. G mila		Government grants (e					
ions r Sil	f	and similar amounts i	s, gifi not ir	ts, grants, ncluded	f	198,022				
but the	a	above Noncash contributions	s incl		·	130,022				
ntri d O	Ī	lines 1a - 1f:\$		1	g					
Cogan	h	Total. Add lines 1a	a-1f		•	•	198,022			
						Business Code	8,409,378	0 400 370		
a.	28	TEA REVENUE				900099	8,409,378	8,409,378		
enu(Ŀ	ACTIVITY FEES				900099	158,596	158,596		
æ							125,980	125,980		
ące	C	FEDERAL REVENUE				900099	123,300	125,500		
Program Service Revenue	c	FOOD SERVICE REVE	NUE			900099	106,470	106,470		
		STATE REVENUE					37,709	37,709		
	•	STATE REVENUE				900099		,		
	f	All other program service revenue.			19,832	19,832				
		Total. Add lines 2			•	8,857,965				
	3	Investment income	(inc	luding divider						
	:	similar amounts) .				•	32,300	32,306		
		Income from invest Royalties		it or tax-exem	ipt bo	nd proceeds •	2.22	6 2,330	5	
		,		(i) Real		(ii) Personal				
	6-	Gross rents	6a		4 072					
		Less: rental			4,072		-			
	_	expenses	6b		0					
	С	Rental income or (loss)	6c		4,072					
	•	d Net rental income	or	(loss)			4,07	4,07	2	
				(i) Securiti	es	(ii) Other				
	7 <i>a</i>	Gross amount from sales of	7a	87	6,674					
		assets other than inventory								
	b	Less: cost or other basis and		79	9,681					
		sales expenses								
	С	Gain or (loss)	7с	7	6,993					
		d Net gain or (loss)					76,993	76,993	3	
<u>ə</u>	88	Gross income from fu (not including \$		of						
€		contributions reported See Part IV, line 18	d on	line 1c).						
Rev					8a 8b	50,071				
Other Revenue		Less: direct expen						1		50,071
	9a	Gross income from See Part IV, line 19	gam •	ing activities.	9a					
	ı	• Less: direct expen	ses		9b		-			
		: : Net income or (los			ctiviti	es >				
	10	- Cuana and an af inve		m. laaa						
	10	a Gross sales of inve returns and allowa	nce	ry, less	10a					
	ı	Less: cost of good	s so	ld	10b					
	•	Net income or (los			vent	ory ►				
	11	Miscellaneo	us R	evenue		Business Code	-			
	1	La								
		-								
	,	d All other revenue								
		Total. Add lines 1	1a-:	11d		•				
	12	2 Total revenue. S	ee ir	nstructions .			0.224.70	5 0.070.67		0 50.071
						•	9,221,76	5 8,973,677	-1	0 50,071 Form 990 (2020)

Forr	n 990 (2020)				Page 10
Р	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must co		_	ns must complete colu	mn (A).
	Check if Schedule O contains a response or note to an	y line in this Part IX		(0)	<u> L</u>
Do 7b,	not include amounts reported on lines 6b, 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				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	146,923		146,923	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	5,477,360	4,976,125	402,072	99,163
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits	502,249	448,579	44,495	9,175
	Payroll taxes	135,363	117,494	13,418	4,451
	Fees for services (non-employees):				
	Management				
Ŀ	Legal	64,860		64,860	
	Accounting	45,500		45,500	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	32,291	32,291		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	90,712	90,712		_
17	Travel	35,078	35,049		29
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest	180,935		180,935	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	546,191	525,705	20,486	
23	Insurance	69,159	63,320	5,839	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a SUPPLIES	397,408	362,768	32,571	2,069
	b MAINTENANCE AND REPAIRS	374,697	374,697		
	c PROFESSIONAL SERVICES	370,912	319,864	47,598	3,450
	d UTILITIES	178,185	168,520	9,665	
	e All other expenses	266,560	197,613	63,636	5,311
25	Total functional expenses. Add lines 1 through 24e	8,914,383	7,712,737	1,077,998	123,648
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).				

Assets

Fund Balances

5 29

Assets 30

27

28

31

32

33

End of year

Beginning of year

15,506,211

5,689,446

1.771.040

2

3

4

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6

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8

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10c

11 12

13

14

15

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17

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19

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21

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25

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29

30

31

32

33

21,510

10,342,470

1.424.530

615.321

8.618

24.543

4,433,437

504,542

4.971.140

5,624,289

3.579,442

9,203,731

14,174,871

14,174,871

Page **11**

1.697.592

414

103.615

9,816,765

1.678.325

729.234

42.457

48.622

3,676,193

602.922

4.370.194

5,989,060

3.666,691

9,655,751

14,025,945

Form 990 (2020)

14,025,945

	Check if Schedule O contains a response or note to any line in this Part IX	
		Г
1	Cash-non-interest-bearing	T
2	Savings and temporary cash investments	Γ

sh investments Pledges and grants receivable, net . . . Accounts receivable, net .

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 Loans and other receivables from other disqualified persons (as defined under

section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net

Inventories for sale or use .

basis. Complete Part VI of Schedule D b Less: accumulated depreciation Investments—publicly traded securities .

Prepaid expenses and deferred charges . 10a 10b

10a Land, buildings, and equipment: cost or other 11

12 13 Investments—program-related. See Part IV, line 11 .

Investments—other securities. See Part IV, line 11 . . .

14 Intangible assets . . .

15 Other assets. See Part IV, line 11 . . .

16

17 Accounts payable and accrued expenses .

Total assets. Add lines 1 through 15 (must equal line 33) . . .

Grants payable .

18 19 Deferred revenue . . . 20

Tax-exempt bond liabilities . . . Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

21

Liabilities 22 23

Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties,

24 25 and other liabilities not included on lines 17 - 24).

Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 . .

26

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Organizations that follow FASB ASC 958, check here ▶ 🗹 and

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

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?

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 in Schedule O and describe any steps taken to undergo such audits. 3h Form 990 (2020)

3a

No

Additional Data

Software ID:

THE PURPOSE OF THE TEXAS CENTER FOR ARTS + ACADEMICS IS TO CONDUCT AND MANAGE ARTISTIC PROGRAMS AND TO PROVIDE FOR THE EDUCATION AND ARTISTIC

Software Version:

EIN: 75-0942885

Name: TEXAS CENTER FOR ARTS ACADEMICS

TRAINING OF BOYS AND GIRLS.

Form 990, Part III, Line 4a:

Form 990 (2020)

Form 990, Part III, Line 4b: THE PURPOSE OF THE CHARTER SCHOOL, FORT WORTH ACADEMY OF FINE ARTS, IS TO PROVIDE COLLEGE PREPARATORY EDUCATION AND ARTISTIC TRAINING FOR STUDENTS IN GRADES 3-12 UNDER AN OPEN ENROLLMENT CHARTER; 610 STUDENTS SERVED.

Form 990, Part III, Line 4c: THE PURPOSE OF THE CHARTER SCHOOL, TEXAS SCHOOL OF THE ARTS. IS TO PROVIDE COLLEGE PREPARATORY AND FINE ARTS-BASED EDUCATION FOR STUDENTS IN GRADES K-6 UNDER AN OPEN ENROLLMENT CHARTER; 280 STUDENTS SERVED.

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -	DLN: 9	DLN: 93493049004092							
SCI	HED	ULE A	Dublic	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047					
	m 99		Complete if the o	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2020					
		the Treasury	► Go to <u>www.irs</u>	<u>s.gov/Form990</u> for in	nstructions and	l the latest info	ormation.	Open to Public Inspection					
Nam	e of th	nte Service h e organiza ER FOR ARTS A					Employer identific	ation number					
ILAA	CLIVIL	INTOK AKTS A	CADEMICS				75-0942885						
	rt I		for Public Charity Stat				See instructions.						
1 ne c	rganiz		a private foundation because onvention of churches, or as	•			(A)(:)						
		,	,				. , . ,						
2	✓		scribed in section 170(b)(,								
3	Ш	·	or a cooperative hospital ser	-			-						
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, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).						
7			ation that normally receives (0(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the gener	al public described in					
8		A communi	ty trust described in sectio	170(b)(1)(A)(vi).	(Complete Part I	I.)							
9			ural research organization de rant college of agriculture. S					ege or university or a					
10		from activit investment	ation that normally receives: dies related to its exempt fur income and unrelated busin dee section 509(a)(2). (Co	nctions—subject to cer ness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross					
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	See section 509	(a)(4).						
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a						
a		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B	appoint or elect a majo									
b		manageme	supporting organization sup nt of the supporting organiz plete Part IV, Sections A	ation vested in the sar									
С			unctionally integrated. A sorganization(s) (see instruct					ted with, its					
d		Type III n	on-functionally integrate integrated. The organizations). You must complete Par	d. A supporting organing n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar						
e		Check this	box if the organization recei or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally					
f	Enter		of supported organizations		-		<u> </u>						
g	Provi	de the follow	ing information about the su	upported organization(т'								
	(i) Name of supported (ii) EI organization			(iii) Type of organization (iv) Is the organization listed in your governing document? (see instructions) (vi) Amount of monetary support (see instructions) (vi) other instructions)									
					Yes	No							
Tota			tion Act Notice, see the I										

Sch	nedule A (Form 990 or 990-EZ) 2020						Page 2
P	Part II Support Schedule for	Organizations	Described in S	ections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(vi)
	(Complete only if you ch						under Part III.
	If the organization failed	to qualify unde	r the tests listed	below, please	complete Part I	II.)	
	Section A. Public Support Calendar vear		I		I		
	(or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grant.")						
2	Tax revenues levied for the						
_	organization's benefit and either paid						
_	to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f) Public support. Subtract line 5 from						
	line 4.						
S	Section B. Total Support	T	ı			1	
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7							
8							-
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
9							
_	activities, whether or not the						
	business is regularly carried on				1		
10	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						_
11							
12	10 Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First 5 years. If the Form 990 is for t						zation check
	this box and stop here	=			•		zation, check
	Section C. Computation of Publi				<u> </u>		
	Public support percentage for 2020 (li			column (f))		14	
	Public support percentage for 2019 Sc					15	
	a 33 1/3% support test—2020. If the						hox
100	and stop here. The organization qual						
b	33 1/3% support test—2019. If th	ne organization did	not check a box of	n line 13 or 16a,	and line 15 is 33 i		k this
_	box and stop here. The organization						
17 a	a 10%-facts-and-circumstances tes	t—2020. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization	n meets the "facts	-and-circumstanc	es" test, check thi	s box and stop h e	e re. Explain	
	in Part VI how the organization meets			-			. 🗆
_	organization						▶□
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organis						
	Explain in Part VI how the organization						
	supported organization						▶□
18		on did not check a	box on line 13, 1	6a, 16b, 17a, or 1	17b, check this box	k and see	
	instructions						▶□
					Schodu	le A (Form 990 o	r 990-F7\ 2020

Р	Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	quality under	the tests listed	pelow, please co	omplete Part II.)	
Se	ection A. Public Support						1
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
-	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are						
•	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
5	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
	ection B. Total Support		1	1	Γ	Π	1
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on	I					
	securities loans, rents, royalties and	I					
	income from similar sources.						
b	Unrelated business taxable income	I					
	(less section 511 taxes) from businesses acquired after June 30,	I					
	1975.	I					
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,	I					
	whether or not the business is	I					
12	regularly carried on.		-				1
12	Other income. Do not include gain or loss from the sale of capital assets	1					
	(Explain in Part VI.)	1					
13							
	11, and 12.).		<u> </u>	1.6 11 601 1		F04()(2)	<u> </u>
14	First 5 years. If the Form 990 is for the	-			•	. , , ,	· —
	check this box and stop here					<u></u>	<u>▶⊔</u>
	ection C. Computation of Public S			1 (6)			
15	Public support percentage for 2020 (lin					15	
16	Public support percentage from 2019 S					16	
	ection D. Computation of Investi				.,		
17							
18	Investment income percentage from 2	019 Schedule A,	Part III, line 17 .			18	
19a	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more thar	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box and s	stop here. The o	rganization qualifi	es as a publicly su	ipported organiza	tion	. ▶□
	33 1/3% support tests—2019. If the						
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	. ▶ □
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	l9a, or 19b, check	this box and see	instructions	▶□

Page 4

5a

5b

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

amendment to the organizing document).

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below.

6

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Vec No

				'''	
L	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.	1			
,	Did the organization have any supported organization that does not have an IRS determination of status under section 509	_	-		
2	(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).	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.				
ŧa	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				

acternment.	3b				
Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
If tes, explain in Part VI what controls the organization put in place to ensure such use.	3с				
Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
cnecked DOX 12a or 12b in Part 1, answer lines 4b and 4c below.					
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.	4b				
Did the organization support any foreign supported organization that does not have an IRS determination under sections					
			 		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 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. 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.	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. 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. 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. 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	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. 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. 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. 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 War II and a finite Book 1/7 what are trade the appropriation must be also be a properly used.			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
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.			
С	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.	4c		

	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с			
4a	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.	4a			
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.				
С	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.	4c			
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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

	Supporting Outpointing (actions)					
ŀē	Supporting Organizations (continued)		l			
			Yes	No		
11	, , , , , , , , , , , , , , , , , , , ,					
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, governing body of a supported organization?					
		11a				
	A family member of a person described in 11a above?	11b				
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in P VI.	Part 11c				
S	Section B. Type I Supporting Organizations					
			Yes	No		
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if a applied to such powers during the tax year.	ny,				
_		. 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.					
	Section C. Type II Supporting Organizations					
_	action of Type 12 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).					
S	Section D. All Type III Supporting Organizations					
			Yes	No		
1	old the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's ax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the orm 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?					
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).					
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significan	. 2				
3	By reason of the relationship described in 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.					
S	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 inst	ructions):				
	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.					
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see instru	ctions)			
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 support 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.	ed 2a				
	b Did the activities described in line 2a 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 involvement.					
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	25				
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? If "Yes" or "No" provide details in Part VI. 	h of 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. 	21-				

	Recoveries of prior-year distributions			
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):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		

tax year or assets held for part of year):	1		
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt use assets	2		
Subtract line 2 from line 1d	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter 85% of line 1	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
Enter greater of line 2 or line 3	4		
	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A)	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) I Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 I and Average monthly value of securities 1b 1a 1a 1b 1a 1a 1a 1a 1a 1a	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 1 1 1 1 1 1 1 1 1 1 1 1

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) Schedule A (Form 990 or 990-F7) 2020

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5

Income tax imposed in prior 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 (<i>provide details in Part VI</i>). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

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				
9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions if any for years prior to 2020				

8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions				8	
9 Distributable amount for 2020 from Section C, line 6				9	
10 Line 8 amount divided by Line 9 amount					
Section E - Distribution (see instruction		(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from	om Section C, line 6				
2 Underdistributions, if any, for yea (reasonable cause required <i>exp</i> See instructions.					
3 Excess distributions carryover, if	any, to 2020:				
a From 2015			·		
b From 2016					

(see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see			

See instructions.		
3 Excess distributions carryover, if any, to 2020:		
a From 2015		
b From 2016		
c From 2017		
d From 2018		
e From 2019		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		
 Carryover from 2015 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2020 distributable amount		

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		
 Carryover from 2015 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
 a Applied to underdistributions of prior years 		
b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to		

Schedule A (Form 990 or 990-EZ) (2020)

2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2021. Add lines

See instructions.

d Excess from 2019.

a Excess from 2016. **b** Excess from 2017. c Excess from 2018.

e Excess from 2020.

3j and 4c. 8 Breakdown of line 7:

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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).						
	Facts And Circumstances Test						

SCHEDULE D

Supplemental Financial Statements

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

► Attack to Form 990.

OMB No. 1545-0047 2020

DLN: 93493049004092

Department of the Treasury Internal Revenue Service

(Form 990)

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

Open to Public Inspection

	me of the organization KAS CENTER FOR ARTS ACADEMICS			Empl	oyer identificatio	n number
1 1 /	CAS CENTER FOR ARTS ACADEMICS			75-09	942885	
Pā	ort I Organizations Maintaining Donor Adv	ised Funds or (Other Similar I	Funds or Acco	ounts.	
	Complete if the organization answered "Y		<u>, Part IV, line 6</u> or advised funds		(b) Funds and other	
1	Total number at and of year	(a) Don	or advised funds		b) Funds and other	accounts
	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advis organization's property, subject to the organization's e	xclusive legal cont	ol?			Yes 🗌 No
6	Did the organization inform all grantees, donors, and or charitable purposes and not for the benefit of the dono private benefit?	r or donor advisor,	or for any other	purpose conferri	ng impermissible] Yes □ No
Pa	rt II Conservation Easements.	COO	Doub IV Goo 7			
_	Complete if the organization answered "Y					
1	Purpose(s) of conservation easements held by the orga	•				
	☐ Preservation of land for public use (e.g., recreation	on or education)			cally important land	area
	Protection of natural habitat		☐ Preservat	ion of a certified	historic structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	a qualified conserva	tion contribution	in the form of a	conservation Held at the End	of the Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements			2b		
c	Number of conservation easements on a certified histor	ric structure include	ed in (a)	. 2c		
d	Number of conservation easements included in (c) acquestructure listed in the National Register	uired after 7/25/06	, and not on a his	toric 2d		
3	Number of conservation easements modified, transferr tax year ▶	ed, released, extin	guished, or termi	nated by the orga	anization during the	!
4	Number of states where property subject to conservati	on easement is loc	ated ▶			
5	Does the organization have a written policy regarding and enforcement of the conservation easements it hold			nandling of violat	cions,	□ No
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of	violations, and en	forcing conserva	tion easements duri	ing the year
7	Amount of expenses incurred in monitoring, inspecting \$ \bigsup \$, handling of violat	ions, and enforcir	ig conservation e	easements during th	e year
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(i)$?)(B)(i) ☐ Yes	□ No
9	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the o				
Pai	Organizations Maintaining Collections Complete if the organization answered "Y	s of Art, Histori es" on Form 990	cal Treasures, , Part IV, line 8	or Other Sim	nilar Assets.	
1a	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pul Part XIII, the text of the footnote to its financial staten	blic exhibition, edu	cation, or researc	statement and b h in furtherance	alance sheet works of public service, pr	of art, ovide, in
b	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pul following amounts relating to these items:	blic exhibition, edu	cation, or researc	h in furtherance	of public service, pr	ovide the
	(i) Revenue included on Form 990, Part VIII, line 1				> \$	
	ii)Assets included in Form 990, Part X					
2	If the organization received or held works of art, histor following amounts required to be reported under FASB	rical treasures, or o	ther similar asset			
а	Revenue included on Form 990, Part VIII, line 1	<u>-</u>			> \$	
b	Assets included in Form 990, Part X				> \$	
For	Paperwork Reduction Act Notice, see the Instruction	ons for Form 990		Cat. No. 52283	Schedule D (F	orm 990) 202

Par	t III	Organizations Ma	aintaining Col	lections o	f Art, His	stori	cal T	reası	ires, oi	r Other	Similar A	ssets (c	ontinued)	
3		the organization's acq (check all that apply):		n, and other	records, c	heck a	any of	the fo	llowing t	hat are a	significant	use of its	collection	
а		Public exhibition				d		Loan	or excha	ange prog	ırams			
b		Scholarly research				е		Othe	r					
c		Preservation for future	e generations											
4	Provid Part X	e a description of the l	organization's col	lections and	explain ho	ow the	y furtl	her the	e organiz	zation's ex	kempt purpo	ose in		
5		the year, did the orga to be sold to raise fur										☐ Yes	s □ r	lo.
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.	odial Arrange ganization ansv	ments. /ered "Yes"	' on Form	n 990	, Part	IV, li	ne 9, o	r reporte	ed an amo			Part
1a		organization an agent ed on Form 990, Part)										☐ Yes	;	No
b	If "Yes	s," explain the arrange	ement in Part XIII	and comple	te the follo	owina	table:					mount		_
c		ning balance		•		_				1c				_
d	_	ons during the year .								1d				_
е	Distrib	outions during the year	r							1e				_
f	Ending	g balance								1f				_
2a	Did th	e organization include	an amount on Fo	rm 990, Parl	t X, line 21	1, for	escrow	or cu	stodial a	account lia	ability?	☐ Yes	. 🗆 r	No
b	If "Yes	s," explain the arrange	ement in Part XIII	. Check here	if the exp	lanati	on has	s been	provide	d in Part 3	XIII			
Pa	rt V	Endowment Fund												
		Complete if the org	ganization ansv								(4) Thurs		(-) [bl-
1a	Beginni	ng of year balance .		(a) Curren	it year	(b) P	rior yea	11	(E) TWO y	ears back	(d) Three ye	ars back ((e) rour ye	ars Dack
	_	utions												
С	Net inve	estment earnings, gair	ns, and losses											
d	Grants	or scholarships												
е		xpenditures for facilition	es											
f	Adminis	strative expenses .												
g	End of y	ear balance												
2		e the estimated perce	-	ent year end	balance (l	line 1 <u>c</u>	g, colu	mn (a))) held a	s:				
а	Board	designated or quasi-e	ndowment 🟲											
b	Perma	nent endowment 🟲												
С		endowment 🕨												
3a		ercentages on lines 2a ere endowment funds				n that	· ara h	old an	d admini	ictored fo	r tha			
Ja		zation by:	not in the posses	SION OF THE O	n garnzacio	II tilat	. are ii	eiu aii	u aummi	istered 10	i tile		Yes	No
	(i) Un	related organizations										3a	(i)	
		elated organizations										3a		
ь 4		s" on 3a(ii), are the rel be in Part XIII the inte	=		-			.? .				. 3	b	<u> </u>
	rt VI	Land, Buildings,			1 S Elluowii	nent i	unus.							
. CI		Complete if the org			' on Form	990	, Part	IV, li	ne 11a.	. See Fo	rm 990, Pa	art X, line	e 10.	
	Descrip	otion of property	(a) Cost or oth (investme	er basis	(b) Cost or						lepreciation		d) Book valu	ie
1a	Land .						30	08,507						308,507
	Building						14,22	26,042			4,949,785			9,276,257
С	Leaseho	old improvements												
d	Equipm	ent					9	71,662			739,661			232,001

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

9,816,765

	Complete if the organization answered "Yes" on Form 990, I (a) Description of security or category (including name of security)	(b) Book	(c) Metho	Part X, line 12. d of valuation: -year market value
(1) Financial		value		
(2) Closely-l	held equity interests			
(3)Other				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
Total. (Column Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) Investments—Program Related.			
	Complete if the organization answered 'Yes' on Form 990, I	Part IV, line		
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market
(1)				value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.		•	
	Complete if the organization answered 'Yes' on Form 990, P (a) Description	art IV, line	11d. See Form 990, Pa	t X, line 15. (b) Book value
(1)DUE FRO				729,234
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(7)				
(8)				
(8)				
(8) (9) (10) Total. (Colum				729,234
(8) (9) (10) Total. (Colum	mn (b) must equal Form 990, Part X, col.(B) line 15.)			990, Part X, line 25.
(8) (9) (10) Total. (Colum Part X	Other Liabilities.			990, Part X, line 25. (b) Book
(8) (9) (10) Total. (Column Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P			990, Part X, line 25.
(8) (9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUEE	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE			990, Part X, line 25. (b) Book value 469,844
(8) (9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUEE (3) DUE TO S	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS			990, Part X, line 25. (b) Book value
(8) (9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUEE (3) DUE TO S (4) ACCRUEE (4) ACCRUEE (5)	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS			990, Part X, line 25. (b) Book value 469,844 104,569
(8) (9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUEE (3) DUE TO 9 (4) ACCRUEE (4)	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS			990, Part X, line 25. (b) Book value 469,844 104,569
(8) (9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUED (3) DUE TO (4) ACCRUED (4) (5)	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS			990, Part X, line 25. (b) Book value 469,844 104,569
(8) (9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUED (3) DUE TO S (4) ACCRUED (4) (5) (6)	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS			990, Part X, line 25. (b) Book value 469,844 104,569
(8) (9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUED (3) DUE TO S (4) ACCRUED (4) (5) (6) (7)	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS			990, Part X, line 25. (b) Book value 469,844 104,569
(9) (10) Total. (Column Part X 1. (1) Federal in (2) ACCRUED (3) DUE TO S (4) ACCRUED (4) ACCRUED (5)	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS			990, Part X, line 25. (b) Book value 469,844 104,569
(8) (9) (10) Total. (Column Part X 1. (1) Federal i (2) ACCRUED (3) DUE TO S (4) ACCRUED (4) (5) (6) (7) (8) (9) Total. (Column	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes D WAGES PAYABLE STUDENT GROUPS	art IV, line	11e or 11f.See Form	990, Part X, line 25. (b) Book value 469,844 104,569 28,509

1

2

5

1

2

3

4

b

5

Part XIII

а

Schedule D (Form 990) 2020

Page 4

144,638

9,221,765

8,914,383

8,914,383

Schedule D (Form 990) 2020

Add lines 4a and 4b .

Add lines 2a through 2d . .

Return Reference

С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
e	Add lines 2a through 2d				
3	Subtract line 2e from line 1				
4	Amounts included on Form 990, Part VIII, line				
а	Investment expenses not included on Form 9				
_					

Donated services and use of facilities . .

e 12, but not on line 1: 90. Part VIII. line 7b Other (Describe in Part XIII.)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Explanation

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . .

Total revenue, gains, and other support per audited financial statements

2d

4a 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

2a

2h 2c

2a

2b

2c 2d

4b

4c Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

> 2e 3

> 4c

2e

144.638

9,221,765 8,914,383

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities

Subtract line 2e from line 1

Part XIII	Supplemental Info		
Return Reference		Explanation	
			Schedule D (Form 990) 2020

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE E**

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.

DLN: 93493049004092 OMB No. 1545-0047

Department of the Treasury Namel & the osganization

(Form 990 or 990-

EZ)

Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection **Employer identification number**

Namel & the organization TEXAS CENTER FOR ARTS ACADEMICS		Employer identification number			
LEXAS CENTER FOR ARTS ACADEMICS	75-0942885				
Part I					
			YES	NO	
1 Does the organization have a racially nondiscriminatory policy toward students by statement in it other governing instrument, or in a resolution of its governing body?		1	Yes		
2 Does the organization include a statement of its racially nondiscriminatory policy toward students		_	163		
brochures, catalogues, and other written communications with the public dealing with student ad	lmissions,				
programs, and scholarships?		2	Yes		
3 H\u00e1s the organization publicized its racially nondiscriminatory policy on its primary publicly access all times during its taxable year in a manner reasonably expected to be noticed by visitors to the					
newspaper or broadcast media during the period of solicitation for students, or during the registr					
solicitation program, in a way that makes the policy known to all parts of the general community					
describe. If "No," please explain. If you need more space use Part II		3	Yes		
		1			
4 Does the organization maintain the following?		1			
a Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes		
b Records documenting that scholarships and other financial assistance are awarded on a racially n	•				
basis?		4b	Yes		
c Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	-	4c	Yes		
d Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes		
5 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?				No	
b Admissions policies?		5b		No	
c Employment of faculty or administrative staff?		5c		No	
d Scholarships or other financial assistance?		5d		No	
e Educational policies?		5e		No	
f Use of facilities?		5f		No	
g Athletic programs?		5g		No	
h Other extracurricular activities?		5h		No	
		-			
6a Does the organization receive any financial aid or assistance from a governmental agency?		6a	Yes		
b that are a gamma and a gamma and a contract and a		6b		No	
If you answered "Yes" to 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 4.1	01 through 4.05				
of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part	=	7	Yes		
aperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 5008			1	1020	

Schedule E (Form 990 or 990EZ) (2020)						
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.						
Return Reference	Explanation					
, ,	NEWSPAPER ADVERTISEMENTS, ANNOUNCEMENTS, POLICY STATEMENT IN HANDBOOK					
	THE ORGANIZATION OPERATES TEXAS CHARTER SCHOOLS AND AS SUCH RECEIVES STATE AND FEDERAL ENTITLEMENTS AND GRANTS FOR SCHOOL OPERATIONS.					

Schedule F (Form 990 or 990-F7) (2020)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493049004092 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization TEXAS CENTER FOR ARTS ACADEMICS 75-0942885 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2020

		ete if the organization a	answered "Yes" on Forn	n 990, Part IV, line 18	Page 2 , or reported more
Т	than \$15,000 of fundraising e	event contributions and			
	gross receipts greater than \$!	(a)Event #1	(b) Event #2 FACULTY TALENT	(c)Other events	(d) Total events (add col. (a) through
		GALA (event type)	SHOW (event type)	(total number)	col. (c))
Reversie					
	1 Gross receipts	39,968	10,103		50,071
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	39,968	10,103		50,071
	4 Cash prizes				
	5 Noncash prizes				
₽	6 Rent/facility costs				
호	7 Food and beverages 8 Entertainment				
ပ္မွ	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 t	through 9 in column (d)			
	11 Net income summary. Subtract line 10	-			50,071
	Gaming. Complete if the organized on Form 990-EZ, line 6a.			V, line 19, or reported	,
Revenue	on rolling 550 EZ, line ou.	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
&	1 Gross revenue				
nses	2 Cash prizes				
<u>x</u>	3 Noncash prizes				
Direct Expense	4 Rent/facility costs				
	5 Other direct expenses				
		Yes %	☐ Yes %	Yes %	
	6 Volunteer labor	∐ No	∐ No	∐ No	
	7 Direct expense summary. Add lines 2 t	through 5 in column (d)		•	
	8 Net gaming income summary. Subtrac	t line 7 from line 1, colum	n (d)	<u> • • • • </u>	
9 a	Enter the state(s) in which the organization licensed to conduct grant of "No," explain:	aming activities in each of	these states?		Yes No
b					

Sche	dule G (Form 990 or 990-EZ) 2020					F	Page 3
11	Does the organization conduct ga	ming activities with nonmember	s?		· 🗌 Yes	□No	
12	Is the organization a grantor, ben formed to administer charitable g		member of a partnership or other	entity	·□Yes	_	
13	Indicate the percentage of gaming	g activity conducted in:					
а	The organization's facility .			13	Ba		%
b	An outside facility			13	ВЬ		%
14	Enter the name and address of th	e person who prepares the orga	nization's gaming/special events bo	oks and record	ds:		
	Name ►						
	Address						
15a	Does the organization have a conrevenue?	tract with a third party from who	om the organization receives gamin	-	· 🗆 Yes	Пис	
b	If "Yes," enter the amount of gam	ning revenue received by the org	anization 🕨 \$		□ les		
	amount of gaming revenue retain	ed by the third party 🕨 \$					
c	If "Yes," enter name and address	of the third party:					
	Name ▶						
	Address >						
16	Gaming manager information:						
	Name ▶						
	Gaming manager compensation	• \$					
	Description of services provided ▶	•					
	☐ Director/officer	☐ Employee	☐ Independent contra	ctor			
17	Mandatory distributions:						
а	Is the organization required unde retain the state gaming license?		stributions from the gaming procee	eds to	· 🗆 Yes	Пы	
b	Enter the amount of distributions in the organization's own exempt	•	uted to other exempt organizations	or spent	□ res		
Pa			* ions required by Part I, line 2b	. columns (ii	i) and (v): a	nd Part	
			licable. Also provide any additi				s
	Return Reference		Explanation				

DLN: 93493049004092 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No. 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) 2020 ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Open to Public ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** TEXAS CENTER FOR ARTS ACADEMICS 75-0942885 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (q) Defeased (h) On behalf of issuer Yes No Yes No ORCHARD CULTURAL CAPITAL EXPENDITURES 26-3692123 04-25-2012 5,000,000 Х Χ **EDUCATION FACILITIES BUILDINGS AND STRUCTURES** FINANCE CORPORATION

Inspection (i) Pool financing Yes No Χ SPLENDORA CULTURAL 76-0664368 08-31-2009 4,900,000 CAPITAL EXPENDITURES BUILDINGS AND EQUIPMENT **EDUCATION FACILITIES** FINANCE CORPORATION Part II **Proceeds** C D Α В 2 Total proceeds of issue . 3 5,000,000 4,900,000 4 5 6 100,000 98,000 8 9 10 4,900,000 4,132,900 11 12 13 2010 2013 Yes Yes No Yes No Nο Yes No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Χ Were the bonds issued as part of an advance refunding issue of taxable 15

Χ Χ Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ Part 🏻 **Private Business Use** Yes No Yes No Yes No Yes No 1 Was the organization a partner in a partnership, or a member of an LLC, which owned property Are there any lease arrangements that may result in private business use of bond-financed 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50193E Schedule K (Form 990) 2020 b

d

6

Part IV

b

C

Arbitrage

D

Schedule K (Form 990) 2020

No

Yes

В

No

Yes

Α

Nο

В

No

Χ

Yes

Χ

Х

Yes

Α

No

Χ

Yes

Χ

Χ

C

No

Yes

C

No

Yes

Page 2

If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

counsel to review any research agreements relating to the financed property?

organization, or a state or local government

Does the bond issue meet the private security or payment test?

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Schedule K (Form 990) 2020

(GIC)?

period?

Part V

Arbitrage (Continued)

Term of GIC

requirements of section 148? . . .

	Α	
	Yes	No
Were gross proceeds invested in a guaranteed investment contract		V

if self-remediation is not available under applicable regulations? Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

В

Nο

No

Χ

Yes

Yes

No

No

Yes

Nο

Yes

Yes

Χ

Page 3

No

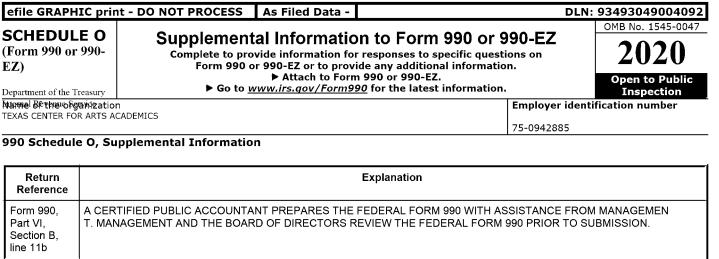
D

D

No

Yes

Yes



Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section C,
line 18

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section C,
line 19